

Synthesis of Four Country  
Enabling Environment Assessments for Scaling  
Up Sanitation Programs

Fred Rosensweig

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Global Scaling Up Sanitation Project

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This report is one in a series of products of the Water and Sanitation Program's Scaling Up Sanitation Project funded by the Bill and Melinda Gates Foundation. A major focus of the project is on learning how to scale up efforts in the sanitation sector in the developing world. The project tests proven and promising approaches to create demand for sanitation and the use of marketing techniques to generate demand and improve the supply of sanitation-related products and services among the rural poor.

This series of reports documents the findings of work in progress in the sanitation sector in order to encourage the exchange of ideas and information and to promote learning. Please send your feedback to: [wsp@worldbank.org](mailto:wsp@worldbank.org).

WSP is a multi-donor partnership administered by the World Bank to assist the poor in gaining sustained access to improved water supply and sanitation services (WSS). For more information, please visit: [www.wsp.org](http://www.wsp.org).

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The findings, interpretations, and conclusions expressed in this report are entirely those of the author. They do not necessarily represent the views of the International Bank for Reconstruction and Development/World Bank and its affiliated organizations or those of the Executive Directors of the World Bank or the governments they represent.

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## List of Acronyms and Abbreviations

BPL	Below poverty line
CLTS	Community-Led Total Sanitation
CSO	Civil Society Organization
DSM	District Sanitation Mission
GOI	Government of India and Government of Indonesia
GOT	Government of Tanzania
IEC	Information, education, and communication
M&E	Monitoring and evaluation
MDGs	Millennium Development Goals
MOEVT	Ministry of Education and Vocational Training
MOF	Ministry of Finance
MOHSW	Ministry of Health and Social Welfare
MOWI	Ministry of Water and Irrigation
NEHHASS	National Environmental Health, Hygiene, and Sanitation Strategy
NGO	Nongovernmental organization
NGP	<i>Nirmal Gram Puraskar</i> (Clean Village Award)
ODF	open defecation—free
PAMSIMAS	Third Water Supply and Sanitation for Low Income Communities Project
PHAST	Participatory Hygiene and Sanitation Transformation
PRO-RALG	Prime Minister’s Office—Regional Administration and Local Government
TSC	Total Sanitation Campaign
TSSM	Total Sanitation and Sanitation Marketing
WASPOLA	Water and Sanitation Policy and Action Planning Project
WSDP	Water Sector Development Programme
WSLIC-2	Water and Sanitation for Low-Income Communities Project (Second Phase)
WSP	Water and Sanitation Program

## Summary

The Water and Sanitation Program (WSP) recently completed the first year of a four-year Global Scaling Up Sanitation Project. The project tests proven and promising approaches to create demand for sanitation and the use of sanitation marketing techniques to improve the supply of sanitation-related goods and services among the rural poor. These approaches are referred to as “Total Sanitation and Sanitation Marketing (TSSM)” throughout this report.

During the first year of the project, baseline enabling environment assessments were conducted in the four project sites in India, Indonesia, and Tanzania to better understand the programmatic and institutional conditions needed to scale up, sustain, and replicate the interventions used in the projects. The assessments will be repeated after three years of project implementation to assess progress in strengthening the enabling environment and to determine more definitive lessons learned.

This report synthesizes the findings from the four enabling environment assessment reports, including preliminary conclusions and lessons learned, and recommended interventions and practices that can be used to strengthen the enabling environment. The report also identifies knowledge gaps and, hence, priority areas for learning.

This report and the findings from the four assessments are a work in progress that will be enhanced with additional lessons learned and insights as the projects move forward in each country.

## Findings

The enabling environment assessments were conducted using a common conceptual framework consisting of the following eight dimensions:

- Policy, Strategy, and Direction
- Institutional Arrangements
- Program Methodology
- Implementation Capacity
- Availability of Products and Tools
- Financing
- Cost-Effective Implementation
- Monitoring and Evaluation

The definition of each dimension, as well as specific findings and recommendations from the four enabling environment assessment reports, are provided in the third section of this report. The overarching conclusion from the four assessments is that, while some countries have important elements of the enabling environment in place at the national level, much remains to be done, especially at the state or provincial and district levels.

- Although a supportive policy framework is an essential starting point for establishing an enabling environment, it must also be matched by a well-developed strategy and sound operational plans at the state and district levels to put the strategy into action.

- An incentive framework such as the *Nirmal Gram Puraskar* (NGP, or Clean Village Award) in India is a very powerful way to generate support and interest for TSSM at the state, district, and community levels.
- Implementation arrangements at the state or provincial and district levels are a major constraint in scaling up. States and districts need to have organizational units or cells dedicated to managing rural sanitation activities and clear operational arrangements for carrying out the intensive work of social intermediation and outreach with communities.
- The methodology for total sanitation is more developed than the methodology for sanitation marketing. Countries such as Indonesia and India, for example, are much more familiar with the total sanitation approach than with sanitation marketing.
- It has not yet been demonstrated that the labor-intensive approaches associated with the community-led total sanitation (CLTS) approach can be implemented at scale. The experience of Indonesia and India demonstrates that the first wave of communities responding to the CLTS approach tends to be those with strong local leadership and interest. These communities are not necessarily representative. As the program scales up, a higher percentage of the target communities will require more outside support and resources than may be available.
- Capacity at all levels must be developed for TSSM, especially the district level. Districts must have access to an adequate number of trained sanitation specialists either through their own staff or by contracting with nongovernmental organizations (NGOs) and training of masons and artisans.
- Although the private sector seems to be able to provide sanitation goods and services to rural communities at affordable prices, the options available to consumers remain limited.
- Although significant resources are increasingly available for rural sanitation, especially from central government sources, local governments are not making effective use of these funds because there is a lack of experience in how to plan and budget for rural sanitation activities.
- Systems that can track costs do not yet exist, so that the most cost effective way to implement TSSM at scale cannot yet be determined.
- Monitoring and evaluation (M&E) systems for TSSM are not yet in place. M&E systems for TSSM must focus not only on monitoring of project inputs and basic outputs but also on collective sanitation outcomes.

## Learning Agenda

The Global Scaling Up Sanitation project places great emphasis on learning from the four assessments. The analysis and preliminary recommendations suggest a number of knowledge gaps in TSSM programs that are elements of scaled-up and sustainable sanitation programs. The synthesis report provides the following specific suggestions for a learning agenda for WSP for the strengthening of the enabling environment:

- Develop detailed guidance on how to determine the effectiveness of the enabling environment for TSSM.
- Determine what types of policy instruments are needed to provide a framework for scaling up TSSM. It is not clear from the baseline assessments what types of policy instruments are needed to provide the necessary framework for scaling up.
- Provide guidance on the functions and staffing profile of dedicated sanitation units at the state/province and district levels.
- Develop case studies on the different implementation models that districts use to carry out the social intermediation and outreach roles needed for CLTS.

- Provide evidence of the effectiveness of the CLTS approach in bringing about demand for sanitation.
- Document approaches to develop the capacity of the local private sector to supply consumer-responsive and affordable sanitation goods and services that address the different economic market segments.
- Determine how best to finance institutional sanitation.
- Develop standard templates for tracking costs.
- Develop standard indicators for monitoring collective sanitation outcomes.



# 1. Introduction

The Water and Sanitation Program (WSP) recently completed the first year of a four-year Global Scaling Up Sanitation project.” The project has the primary goal of learning about scaling up effective and efficient sanitation interventions that improve health. The project tests proven and promising approaches to create demand for sanitation and the use of marketing techniques to generate demand and improve the supply of sanitation-related products and services among the rural poor. The project is being implemented in four locations: Himachal Pradesh and Madhya Pradesh in India, East Java in Indonesia, and Tanzania.

## Purpose

During the first year of the project, baseline enabling environment assessments were conducted in the target locations to better understand the programmatic conditions needed to scale up, sustain, and replicate the interventions used in the projects. *Sustainability* is defined as the ability to maintain programs after external funding has ended. *Replication* is the eventual application of the approach in other countries, or states, at scale. *Scalability* is increasing the present scale and rate of sanitation change—that is, moving from a few districts to a majority of districts that reach the majority of the target audience.

The purpose of this report is to synthesize the four enabling environment assessment reports and determine preliminary conclusions and recommendations that can be used to strengthen the enabling environment in the target locations. This report and its

findings from the four assessments should be seen as a work in progress to be enhanced with additional lessons learned as the project moves forward in each country.

## Water and Sanitation Program

WSP is an international partnership to help the poor gain sustained access to water supply and sanitation services. Administered by the World Bank with financial support from several bi- and multilateral and private donors, the WSP is a decentralized partnership that operates through regional offices in Africa, East Asia, Latin America, and South Asia. A major thrust of the programs is to help its clients prepare for and implement actions toward meeting the water supply and sanitation Millennium Development Goals (MDGs). In pursuing its mission, WSP staff provides advisory support to projects and policies to help identify and disseminate best practices and lessons from experience across countries, assist clients in the implementation of pilot projects to test out new ideas, and facilitate informal networks of practitioners and sector stakeholders. Additional information about the WSP can be found on the program website, [www.wsp.org](http://www.wsp.org).

## Global Scaling Up Sanitation Project

WSP is implementing the project in partnership with the governments in the respective countries with funding from the Bill & Melinda Gates Foundation. The overall objectives of the project are:

- To create large-scale, sustainable, and effective *demand* for sanitation and hygiene at the household and community level in the four selected project sites.
- To create large-scale, sustainable, and effective *supply* of sanitation and hygiene services and products that are appropriate for and affordable to the poorest families in the four selected project sites.
- To support the expansion of sanitation coverage in each of the countries/states as shown in Table 1.

The project is designed to achieve key targets in each project site at the end of three years of project implementation. The specific sanitation targets for each site are shown in Table 1.

**Table 1: Geographic Areas and Beneficiaries**

Geographic areas where the project will take place/population	Estimated number of people without access to sanitation in 2006*	Estimated number of people who will gain access to sanitation during three-year pilot phase	Vision of number of additional people who will get access to sanitation by 2015 to meet MDG targets**
Tanzania (rural)/26.7 million in 2006	14.25 million	750,000	6.5 million
Indonesia (East Java province)/36.5 million	18.6 million	1.4 million	10 million
Indian state of Himachal Pradesh (rural)/5.5 million rural population	4.3 million	700,000	1.2 million
Indian state of Madhya Pradesh (rural)/45 million rural population	43.6 million	1.1 million	20 million
<b>Totals</b>	80.75 million	3.75 million	37.7 million

\* Best estimates given poor status of data.

\*\* Accounts for population growth estimates

Source: World Bank (Water and Sanitation Program). 2007. "Terms of Reference. Baseline Assessment of the Enabling Environment to Scale up, Sustain and Replicate Sanitation Approaches, April 30, 2007."

### **Enabling Environment Assessments**

The project is committed to learning how to design large-

scale demand-responsive sanitation programs that focus on behavior change and market development to ensure the provision and use of sustainable and affordable sanitation services. The project uses two

approaches in combination: total sanitation and sanitation marketing (TSSM).

- The ***total sanitation*** approach focuses on stopping open defecation at the village level by highlighting the problems that result from open defecation by some within and around the community and by ensuring that *every* household builds, uses, and maintains its own affordable toilet, or has access to and uses a shared toilet. The approach creates demand for sanitation by building upon a combination of peer pressure at the community level and collective action to help destitute members of the population and public facilities (schools and hospitals) have sanitation solutions. The total sanitation approach promotes and works toward the *outcome* of open defecation-free (ODF) communities, regardless of the individual solutions chosen by households.
- ***Sanitation marketing*** is based on the premise that commercial marketing techniques will generate demand for sanitation services from the small- and medium-scale private sector providers of

sanitation services. This approach requires understanding demand and supply through an analysis of the sanitation market, promoting demand for sanitation services based on the results of the market studies, developing the right products to respond to consumer choice, and building the capacity of private providers.

WSP conducted enabling environment assessments in each project site. Each three-week assessment was carried out in the period from April to September 2007. The assessments will be repeated in 2010 after the three-year period of project implementation to determine to what extent the enabling environment has been strengthened, which components of the enabling environment are critical, and what actions still need to be taken.

In order to ensure consistency in the assessment findings and provide a common definition of the enabling environment, the WSP developed a conceptual framework for assessing the enabling environment conditions needed for scalability and sustainability. The framework comprises eight dimensions that are considered essential to creating an enabling environment for scaling up an improved total sanitation and sanitation marketing program. These dimensions include the following:

- Policy, Strategy, and Direction
- Institutional Arrangements
- Program Methodology
- Implementation Capacity
- Availability of Products and Tools
- Financing
- Cost-Effective Implementation
- Monitoring and Evaluation

A description of each dimension is provided in the third section of this report.

## 2. Summary of Country Projects

This section provides a brief summary of each country project to establish a context for the findings and recommendations. Two overall comments are important to note. First, three of the four project sites are in large countries that have decentralized responsibility, to the state level in India and to the provincial and district levels in Indonesia. In both of these countries, the focus of the TSSM project is on the state (Himachal Pradesh and Madhya Pradesh in India) and or province (East Java in Indonesia). Providing some assistance to strengthen the enabling environment at the central level is also needed, since to a large extent policy, strategy, and incentive schemes are formulated at the national level. Second, Indonesia and India benefit from prior WSP involvement in developing an enabling environment for TSSM. As a result, in both countries there is significant experience to build upon and some very positive lessons learned. In contrast, Tanzania is a medium-size country with a meaningful intermediate level of government and without much previous experience in sanitation interventions.

### **East Java, Indonesia**

In 2007, the Government of Indonesia (GOI) introduced a national operational strategy for

rural sanitation and hygiene improvement. This strategy seeks to translate into practice the GOI National Policy for Community-led Water Supply and Environmental Sanitation signed in 2003. The National Strategy is based on lessons learned from past sanitation and hygiene-related programs in the country, and consensus from sector experience analysis with a wide range of sector stakeholders. Indonesia is a signatory country to the Millennium Development Goals (MDGs) for sanitation. As in India, the GOI has adopted total sanitation as the objective of its rural sanitation and hygiene strategy.<sup>1</sup>

Based on its commitment to the MDGs, the GOI has recently requested World Bank loan assistance for a total of US\$137.5 million to implement the Third Water Supply and Sanitation for Low Income Communities (PAMSIMAS) Project.<sup>2</sup> The project aims to increase the number of low-income populations living in rural and peri-urban areas accessing improved water and sanitation facilities. PAMSIMAS will help the GOI to meet the MDG targets in water supply and sanitation through programmatic mainstreaming and scaling up of a nationwide community-driven approach.

Of the US\$137.5 million, approximately US\$24.7 million will be allocated for improving hygiene and sanitation behavior and services through a phased program of community-led total sanitation (CLTS) and development of local markets to tap into the emerging demand for sanitation. The TSSM project will also provide strategic guidance to the government for the successful implementation of the “improving hygiene and sanitation behavior and services” component of PAMSIMAS.

The CLTS approach was introduced in Indonesia in 2005, and has focused on achieving sanitary behavior outcomes by the entire community aided by appropriate ways to ignite change, along with recognition for communities that achieve an ODF environment. This approach has shown promising results quickly in several provinces of Indonesia, so much so that two whole subdistricts in East Java and Sumatra had been declared free of open defecation by 2006. In addition, important scaling-up lessons have been learned, from both CLTS and experiments in neighboring countries, about a complementary approach for activating market forces to expand rural sanitation services.

### **Himachal Pradesh, India**

The State of Himachal Pradesh is a small predominantly rural state with over 88 percent of the population residing in villages (equivalent to 5.5 million). Compared with other Indian states, Himachal Pradesh performs well on social indicators related to education, health, housing, and access to water supply. However, its high infant mortality rate of 64 per thousand and rising pollution levels (total coliforms) in rivers appear to be areas of concern. These indicators could be a reflection of the current sanitation and hygiene practices prevalent in the rural areas. According to baseline estimates a few years ago, almost 80 percent

of the rural population practiced open defecation; that figure had not changed much until recently.

The practice of open defecation has been a traditional behavior in rural India, and until recently—that is, until the last decade—sanitation was not accorded great priority by the government and general population. This is the reason that, as per the 2001 census data, only 21.9 percent of the rural population had latrines. The lack of adequate coverage was the result, in part, of the emphasis on sanitation interventions that have not proved to be successful. These interventions concentrated on providing hardware infrastructure to the people, with the governments covering a major part of the costs involved. The assumption was that providing sanitation hardware would translate into its usage, an assumption that has not been demonstrated to be accurate.

India benefits from the Total Sanitation Campaign (TSC)—a national-level comprehensive program launched in 1999 to improve rural sanitation coverage and latrine use in rural areas, with the broader goal of eliminating the practice of open defecation. The key objectives of the TSC are as follows:

- improve the quality of life in the rural areas
- accelerate sanitation coverage in rural areas
- generate felt demand for sanitation facilities through awareness creation and health education
- cover schools/*anganwadis* in rural areas with sanitation facilities and to promote hygiene education and sanitary habits among students
- encourage cost-effective and appropriate technologies in sanitation

- eliminate open defecation to minimize risk of contamination of drinking water sources and food
- convert dry latrines to pour-flush latrines, and eliminate manual scavenging practice, wherever in existence in rural areas

With the intervention of the national-level TSC, the approach to sanitation intervention changed from a hardware-centric supply approach to creation of demand and behavior change among the people. This approach has resulted in rapid growth in sanitation coverage in rural India, estimated to be about 21 percent of the rural population; this increased to around 38 percent in 2006. The approach has also changed to promote fully ODF communities, based on the assumption that sanitation is a public good and community outcomes are essential for individual benefit. Under this new approach, according to the Himachal Pradesh and Madhya Pradesh Enabling Environment Assessment reports, the number of local governments claiming to be “totally sanitized” has also increased significantly in India, from none in 2003 to almost 4,959 in 2007.

In addition, following the success of state incentives schemes, in 2003 the Government of India introduced the *Nirmal Gram Puraskar* (NGP, or Clean Village Award). Under the NGP program,

local governments, individuals, and institutions are eligible to apply for the NGP award (a case incentive calculated on the basis of population) if they achieve collective outcomes that include 100 percent sanitation coverage of households, 100 percent school sanitation coverage, are free from open defecation, and maintenance of a clean environment.

The state government of Himachal Pradesh has formulated a strategy that envisions that by 2009 at least 700,000 rural inhabitants will have improved and sustainable sanitation access and coverage with:

- an appropriate enabling environment that supports institutions to facilitate collective demand creation and an enhanced supply market that is equipped for large-scale implementation
- increased awareness and collective demand by communities for improved sanitation and hygiene
- enhanced demand and considerable improvement in the supply of sanitation products and services

The state government is supporting districts in the implementation of the TSC, and the WSP’s support to the state and districts will leverage the state’s efforts toward its implementation.

### **Madhya Pradesh, India**

The State of Madhya Pradesh, located in the geographical heart of India, was constituted in 1956 and split into two states—Chattisgarh and Madhya Pradesh—in 2000. Even after the split, residual Madhya Pradesh has a population of nearly 60

million people and occupies an area of 308,000 square kilometers, making it the second largest and seventh most populous state in India, according to the GOI's 2001 census data. Nearly 75 percent of Madhya Pradesh's total population lives in rural areas, and 37 percent of the rural population is classified as below the poverty line. Madhya Pradesh has a large population of scheduled tribes (20 percent) and scheduled castes (15 percent), who are among the most deprived segments of society. Despite being endowed with a central location, rich mineral resources, and a high tourism potential, Madhya Pradesh is India's fourth poorest state, ranking low on almost all of the human development indicators. Of particular interest are estimates pointing to less than 10 percent of the rural population having access to sanitary facilities.

The TSC was initiated with 5 districts in Madhya Pradesh in 2000 and a further 3 districts in 2003. At present, all 45 districts of Madhya Pradesh are under the TSC.

The state government is supporting districts in the implementation of the Total Sanitation Campaign, and the WSP's support to the state and districts will leverage the state's efforts toward its implementation. The preexistence of the TSC and the NGP program provides a

well-developed enabling environment at the national level for the TSSM to build upon.

As in Himachal Pradesh, the TSSM project works through the TSC in Madhya Pradesh. The TSSM project will enable the WSP team to broaden the support provided, leverage TSC resources and sector opportunities at the national level, and enhance preexisting initiatives at the state level.

## **Tanzania**

Tanzania has adopted a national target under MKUKUTA (Tanzania's national poverty reduction strategy) of achieving 95 percent sanitation coverage by 2010. This represents a reduction by half of the unserved, as identified by the 2002 census, thus satisfying the criteria for achieving the Millennium Development Goals' sanitation target. This level of coverage is to be maintained through 2025, as identified under the government's Vision 2025.

Tanzania already reports a high level of sanitation coverage—over 90 percent—but it is unclear whether this amounts to “basic sanitation.”<sup>3</sup> With such a high level of coverage, the expectation would be for a correspondingly low diarrheal incidence. However, the 2005 Demographic and Health Survey reports a relatively high diarrheal prevalence, of 12.6 percent for under-5-year-old (<5) children, with children under 2 years suffering the most. A final component is that the prevalence of open defecation is poorly documented, but assumed to be low. However, the Joint Monitoring Program figures for open defecation are 31 percent for East Africa and 25 percent for the continent as a whole,<sup>4</sup> which suggests that Tanzania is likely to have one fourth of the population practicing open defecation (although over 15 percent of the population



of Tanzania is nomadic). The health benefits of water supply and sanitation will not be realized without moving people onto the sanitation ladder, improving existing latrines, and eliminating open defecation.

The ultimate responsibility for the provision of water supply services rests with the Ministry of Water and Irrigation (MOWI). However, different central and local government departments and organizations have mandates to be involved in the provision of the sanitation and hygiene services. In particular, the Ministry of Health and Social Welfare (MOHSW) has an overall responsibility for protecting public health through ensuring the provision of adequate sanitation and hygiene education by the local authorities. Under decentralization measures, the Prime Minister's Office–Regional Administration and Local Government (PRO-RALG) has become responsible for implementation at the local level. Other concerned ministries include the Ministry of Finance (MOF) and the Ministry of Education and Vocational Training (MOEVT), which have financial and educational relations with regional administration and local government authorities.

The Government of Tanzania (GOT) has taken a number of important steps in addressing sanitation. The MOWI has adopted the national Water

Sector Development Programme (WSDP), which is comprised of rural and urban water supply and sanitation (WSS) and water resource management. Since the GOT has adopted a no-subsidy-for-household-sanitation policy, these resources will go toward school and clinic sanitation as well as the promotion of improved hygiene. Under the WSDP, the MOWI has instituted several technical working groups, including a sanitation and hygiene working group. The working group is currently chaired by the acting director of Urban Water Supply and is comprised of representatives from the MOWI, the MOHSW, donors, nongovernmental organizations (NGOs), and other agencies involved in sanitation and hygiene.

The MOHSW has included sanitation under its national health policy. Historically, sanitation has received very little attention and budget. To remedy the situation and assist districts in implementing sanitation, the MOHSW has developed the National Environmental Health, Hygiene, and Sanitation Strategy (NEHHASS). Additionally, with an ever increasing attention on sanitation and hygiene, the MOHSW has begun developing a national sanitation and hygiene policy. Resources to the sector have grown to a FY09 pledge of 25 percent of the national health budget.

In 2005, WSP-Africa opened a country office in Tanzania to work with the GOT on sanitation, hygiene, and sector coordination issues.

### 3. Analysis by Dimension

This section is organized by each of the eight assessment dimensions. Each dimension is defined and then further subdivided into the key issues identified across the four intervention areas and preliminary recommendations. In some areas, these issues have been addressed effectively; in others, more work needs to be done. When taken together, the issues constitute the outline of an agenda for establishing the enabling environment for scaling up TSSM programs. The preliminary recommendations do not address all the issues, but instead focus on those issues where there appears to be enough experience to propose a potential solution.

#### **Policy, Strategy, and Direction**

*Establishing a shared vision and strategy among key stakeholders and ensuring the political will to implement a program is the starting point for scale-up. Developing this shared vision and strategy in a collaborative manner is also the foundation for coordination and for creating motivation all levels. Policy is defined as the set of procedures, rules, and allocation mechanisms that provide the basis for programs and services. Policies set the priorities and often allocate resources for*

*implementation. Policies are reflected in laws and regulations, economic incentives, and the assignment of rights and responsibilities for program implementation.*

#### **Analysis**

*Developing a shared vision.* The assessment reports indicate unevenness in developing a shared vision for rural sanitation among key government stakeholders. At the national level in India and Indonesia, there seems to be general agreement on the importance of meeting the MDG targets in sanitation and a shared vision of an ODF country based on a strategy of collective outcomes. The TSC in India is strong evidence of this shared vision. The TSC is a comprehensive national program aimed at improving rural sanitation that provides a programmatic framework and set of principles consistent with the TSSM approach. However, this vision is not uniformly shared at the state and district levels. At the state level in Himachal Pradesh, senior government officials do share this vision, but lower-level officials remain focused on building facilities with subsidies for hardware rather than focusing on collective outcomes. In Madhya Pradesh, the state-level approach to rural sanitation has been top-down and based on the large-scale supply of sanitation facilities. Similar to India, Indonesia has set a target of an ODF country by 2009, a very ambitious goal, and key national-level stakeholders appear to be in agreement on the most effective approaches to scale up rural sanitation coverage. In Tanzania, which has not had the same focus on sanitation over the past several years as India and Indonesia have, even though targets for 2025 have been set, as yet there is no common vision at the national level for how to reach those targets.

However, the MOHSW in Tanzania has the NEHHASS and has begun the process of developing a national policy.

*Adequacy of the legislative framework.* A recurring theme in the assessment reports was the lack of an adequate legislative framework for sanitation. Despite the existence of the Model Public Health Act 1987 in India, there is no legislative framework for the regulation of public health services at the state level in Himachal Pradesh or Madhya Pradesh. In Himachal Pradesh, government officials said that a public health act was necessary only after basic sanitation coverage increased substantially and the provision of sanitation services became a priority. In Indonesia, environmental management laws exist at the national level, but there is little evidence that they are enforced. Local government stakeholders said they are unaware of local laws and regulations related to sanitation facilities. It is not clear from the assessment reports to what extent a legislative framework is essential and whether a policy framework based on decrees and official strategies might be sufficient to increase access to sanitation facilities in rural areas.

*Strategic plan to operationalize the vision.* Progress in developing a shared vision for rural sanitation has not been matched by the necessary strategy and planning. In

Madhya Pradesh, the Public Health Engineering Department responsible for the program at the state level does not have a strategic plan for rural sanitation that targets specific geographic areas and populations and defines strategies for complex problems such as water scarce areas and how to reach the poorest. In short, there is no road map leading to universal sanitation. In Himachal Pradesh, a progressive strategy has been developed and formally approved, but its implementation has waned after state-level leadership for sanitation changed, so the strategy has not been fully implemented. In Indonesia, the MOH has developed a draft *National Operational Strategy for Sanitation and Hygiene Improvement* and organized a national sanitation summit in 2007. The strategy provides a solid foundation for determining whether latrines are hygienic, directing incentives at the whole community and prohibiting the use of upfront hardware subsidies. The challenge will be to communicate the strategy to a wider group of stakeholders at the national level and, more importantly, to local governments. Tanzania is much less advanced in developing policies and strategies than India or Indonesia.

*Role of institutional incentives.* The NGP awards in India have proven to be very popular in generating interest and attention from politicians, government officials, and communities as evidenced by the 4,959 awards given in 2007. The program is so popular that the increase in the number of applications has required a significant reduction in the amount available for each award. The value of this program is seen not simply in the power of financial incentives, but also in the benefits from developing the systems needed to objectively verify the outcomes—these systems inject an element of transparency and accountability for program results.

Despite the popularity of the program, there have been criticisms of the program at the state level in the area of ODF verification, especially in how to use ODF evaluation criteria, and in the use of the incentives for individual rather than collective outcomes. No incentive framework is yet in place in Indonesia, where there is no central source of financing as in India. The WSP is working to convince the provincial and district governments in East Java to develop such a program. The sanitation sector in Tanzania is still developing and is not at the stage of creating an incentive program such as the one developed in India.

*Advocacy to gain political support for TSSM.* The Tanzania and Indonesia assessment reports point out the importance of aggressive advocacy efforts at the national and local levels to develop awareness, gain political support, and catalyze action. In Tanzania, where there is as yet no shared vision and national strategy, the assessment team suggests that an advocacy campaign be developed that is aimed at influencing national-level decision makers that are needed to drive a program. In East Java, the TSSM project has conducted “road shows” at the district level to explain the project, generate demand, and encourage districts to commit resources. These are reported to be very successful in rolling out the project to districts. In

Madhya Pradesh, support does not yet exist for the CLTS approach on which TSSM is based. The assessment report says that high-level support will be critical for scaling up sanitation improvements and that advocacy materials must emphasize the benefits of sanitation and the problems that result when sanitation is lacking.

### **Preliminary recommendations**

- In large countries such as Indonesia and India, assist the state or provincial and district governments to develop planning processes to assist them in translating national policies and strategies into action at the district level. The result should be state- and district-level sanitation strategic plans. The Madhya Pradesh report specifically recommends, for example, the development of state-level guidelines that promote collective sanitation outcomes; the Himachal Pradesh report suggests that the TSSM project assist each district to develop strategic sanitation plans. In medium-sized countries such as Tanzania, the development of planning processes will take place at the national level for use at the district level.
- Develop aggressive advocacy strategies aimed at sharing information about TSSM, gaining political support, and catalyzing action. These efforts should raise awareness of the costs of inadequate sanitation and the benefits to be had from well-designed sanitation investments. Nearly all the reports recommend the development of hard-hitting advocacy campaigns.
- Develop outcome-based incentive frameworks based on the experience of the NGP program in India. This is explicitly recommended for Indonesia.

## **Institutional Arrangements**

*Institutional arrangements are defined as the assignment of roles and responsibilities at all levels for planning, implementation, and monitoring and evaluation (M&E) of all aspects of the program and the provision of mechanisms to coordinate activities among these actors. Institutions—government, NGOs, and private sector—at all levels must clearly understand and accept their roles, responsibilities, and authorities. They must also have the resources to carry out these responsibilities.*

### **Analysis**

*Clarity of roles and responsibilities among central, state or provincial, and district levels.* In all the target locations, central governments have normative responsibilities and state and local governments have responsibility for management and implementation (although states in India also have some normative roles). In Tanzania, decentralization has shifted implementation responsibility to the districts, but as yet districts have not completely carried out their new roles. In India, the TSC and the NGP are national-level programs that provide the normative framework for sanitation as well as financial resources and incentives. States are, in turn, responsible for management of the TSC and NGP programs, including

supervision and monitoring of district level sanitation programs. In Indonesia, although the central government is responsible for national policy and strategy, no central agency yet has ownership of the TSSM program, mostly because donor efforts to date (including those of the WSP) have been targeted at the provincial and district level in East Java and central funding has been limited. The result is that few central-level stakeholders are aware of the details of the program and how it relates to other sanitation initiatives. The consequence is that, at present in Indonesia, TSSM is mostly a provincial-level activity.

*Adequacy of state- and district-level institutional arrangements.* State- or provincial-level institutional arrangements are generally inadequate for managing TSSM activities. In Madhya Pradesh, the engineering-oriented Public Health Engineering Department has not been a successful manager of the TSC. It will be replaced by the Rural Development Department, which is considered a more appropriate choice because of its receptivity and experience with community-led approaches. In Himachal Pradesh, the Rural Development Department, which is responsible for rural sanitation, manages 11 large programs, which raises the issue whether it will have the staff and resources to manage the TSC. While both states in India have dedicated units and budgets for sanitation, neither of these units has a full-time head, since each department has other responsibilities. The assessments also indicated that the roles and responsibilities of these state-level units needed clarification. At the district level in India, there are no dedicated TSC cells. Mandi, considered to be the most successful district in Himachal Pradesh, pays three full-time NGO staff to manage the TSC program. This may be an approach worth replicating in other districts.

In Tanzania, the TSSM program is too new to have resulted in district-level institutional arrangements, but the assessment reports suggests that international NGOs and civil society organizations (CSOs) are likely to play a significant role.

*Establishing and clarifying linkages between the TSSM project and other programs.* In Tanzania and Indonesia, the importance of clarifying linkages between the TSSM and other related programs was stressed in the assessment reports. This issue seems less critical in India, mostly because of the already-strong national-level support and significant resources that are available through the TSC and the NGP. In Indonesia, the assessment report noted that the Indonesia Sanitation Sector Development Project and TSSM project would benefit from better coordination. In addition, the TSSM project has established close links for project implementation with the World Bank-funded Water and Sanitation for Low-Income Communities Project (WSLIC-2), which has covered 14 of 29 districts in East Java. The CLTS approach was piloted through WSLIC-2, and TSSM plans to use the same institutional arrangements in East Java. PAMSIMAS, due to begin in 2008, will provide resources for scaling up TSSM to an additional 5,000 communities in 15 provinces. In Tanzania, the WSP is working toward establishing

close linkages between TSSM and the national Water Sector Development Programme (WSDP), a well-funded 20-year program that provides US\$20,000 per year to each district for sanitation and handwashing. The fact that TSSM in Tanzania is well linked with the national Sector-Wide Approach is an important element in integrating the approach with national strategies. Establishing linkages between TSSM and other large programs, including both water and sanitation and health, is an essential element of scaling up because of the opportunity to leverage resources and existing programmatic infrastructure.

*Coordination at all levels.* Coordination among key actors at the national and state levels is not optimal. At the national level in Indonesia, there are two sanitation working groups, one formed by the Indonesia Sanitation Sector Development Project in 2006 and another established by the Water and Sanitation Policy and Action Planning Project (WASPOLA). The distinction between these two groups is not clear. At the state level in India, the State Water and Sanitation Mission is the main coordinating body for sanitation, but its attention is mostly focused on water supply. In Himachal Pradesh, in 2007 the state government formed a State Sanitation Review Committee to bring together the key actors in sanitation and improve links to the health sector. This is a promising development to improve coordination and link sanitation and hygiene activities to the health sector. At the district level in Himachal Pradesh, Mandi District has established a District Sanitation Mission (DSM) to manage TSC activities. The full DSM meets quarterly, implementation staff meets monthly, and the core team meets almost daily. In addition, at the subdistrict level in Mandi, the district coordinator has

appointed the subdivisional magistrate to coordinate TSC activities, thus empowering a senior official at this level with responsibility for coordination. Not surprisingly, Mandi is considered the most successful district in Himachal Pradesh. In Tanzania, there is a national coordinating group under the National Sanitation and Hygiene Steering Committee (chaired by the MOHSW). Sectorally, the MOWI also has a coordinating group under the Sanitation and Hygiene Technical Committee. At the district level, coordination is managed through district water and sanitation teams. Although the structures are largely in place, the use of these arrangements for implementation remains a challenge.

*Clear and workable implementation arrangements.* All the reports spoke directly to the issue of the implementation arrangements, especially how the labor-intensive work of social intermediation and outreach will happen. In Tanzania, the recommendation is to rely more heavily on international NGOs working closely with CSOs. In East Java, the TSSM project plans to use the capacity and institutional arrangements that were put in place under WSLIC-2. This model relies on district project management units that contract with facilitators for outreach and social intermediation. Plans have also been developed to encourage districts to involve local

organizations, such as NGOs, federations, and religious groups. In India, district governments have the authority to choose their implementation arrangements. Most of them tend to rely heavily on local government staff. In Madhya Pradesh, for example, government functionaries do most of the outreach with very limited involvement of NGOs. This is partly because of the shortage of qualified NGOs.

### **Preliminary Recommendations**

- Assist states and districts to establish dedicated sanitation units that will serve as focal points for TSSM. These units should be adequately staffed and have the required skills to oversee the full range of tasks associated with TSSM. The assessment reports from India make this specific recommendation and advise that the 5 percent administration budget in the TSC be used to finance these sanitation units.
- Strengthen the cross-sectoral partnerships between the infrastructure-focused ministries and the ministries of health in order to ensure programmatic linkages. The Tanzania assessment suggested the formation of a national TSSM management team with a core group of representatives from the Ministry of Water and the Ministry of Health and Social Welfare. In Indonesia, the assessment team recommended strengthening linkages with other sanitation and health programs. Many of the large health programs include hygiene improvement components that should be integrated into the TSSM program.

## Program Methodology

*The program methodology consists of the program rules and specific activities with their timing and sequence. Each country will adapt and apply the program methodology, making it specific and appropriate to the country context. A workable program methodology that is clear and agreed upon by all key stakeholders is a key element of the enabling environment.*

### Analysis

*Understanding of the methodology by program implementers.* In general, sanitation marketing seems to lag behind total sanitation in being understood by program implementers. In India, sanitation marketing is seen as one of the main weaknesses of the TSC program mostly because government and NGO staff have little experience with private sector supply issues and social marketing. In Tanzania, where TSSM is much less advanced than in Indonesia or India, the development of the methodology for sanitation marketing is still at an early stage and will be informed by the sanitation marketing assessment that the WSP has recently carried out. In East Java, the CLTS methodology that underpins the total sanitation approach is well regarded and understood, while sanitation marketing is new and not yet proven. Clearly, there is

much to do to inform TSSM actors about sanitation marketing.

*Level of demand responsiveness.* Across the four project sites, there are varying levels of acceptance of a demand-responsive approach. In East Java, the acceptance of CLTS is such that only those communities that formally express their interest will be selected. In contrast, in Madhya Pradesh, supply-driven approaches are the norm and collective outcomes are not emphasized. The assessment report calls for training of state and district officials in CLTS to convince them of the benefits of demand-driven approaches to sanitation. In Tanzania, CLTS is relatively new, although Plan International is implementing the approach in several districts and may provide a useful set of experiences that have application to TSSM. In Himachal Pradesh, there has been some resistance to CLTS, but recent CLTS training has increased support for it.

*Effectiveness of the methodology at scale.* One of the key areas of concern for the TSSM project is whether the program methodology will be effective when implemented at scale, especially given the heavy emphasis on labor-intensive approaches that require multiple visits to the communities. Because the TSC in India is a program already operating at scale, there are some preliminary lessons that can be drawn. The example of Himachal Pradesh shows that even though the labor-intensive CLTS approach that requires extensive community outreach seems more effective than less labor intensive information, education, and communication (IEC) approaches at scale, there seems to be resistance to the use of shame and disgust as triggers for behavior change. The assessment report suggests that a hybrid approach that combines CLTS with less labor intensive approaches may be more acceptable. The assessment report in



Himachal Pradesh also calls for more concrete evidence of the effectiveness of IEC approaches before reaching consensus on the best way to bring about widespread demand for sanitation.

*Targeting representative communities.* In India and Indonesia, the assessment reports expressed the concern that it might be difficult to replicate early successes as TSSM scales up to more communities. In Madhya Pradesh, the success in achieving 191 NGP awards in 2005–06 can possibly be attributed both to the fact that exceptional communities were selected and to intensive government effort. As the program scales up, there may not be as many communities with the same level of interest and leadership as in the past, and Madhya Pradesh resources will be spread much more thinly. In East Java, the TSSM project plans to target 870 of 8,484 villages, or 11 percent of the total. In the previous intervention under WSLIC-2, only 72 villages were reached. With only 11 percent of the villages being targeted, the risk is that district governments will select only the more progressive villages with strong leaders and latent demand. This will not really answer the question of how the TSSM approach will work at scale when a large number of communities may not be as motivated to participate as the first group. The TSSM project intends to

determine whether capacity building and mass media increases demand in the less progressive villages.

*Reaching the right people in the communities.* All the reports address the issue of how to ensure that the TSSM methodology finds ways to serve the poorest segments of the population. This issue ran through all the assessments, but took different forms. In Tanzania, the point was made that the zero subsidy approach may leave out the poorest families and that the TSSM project should explore the use of “targeted strategic subsidies” through credit mechanisms. In East Java, this issue was manifested in the level of service that the program provides. An estimated 20 percent of the population live below the poverty line in East Java and therefore can afford only simple latrines with earthen floors and non-brick walls. Similarly, in Madhya Pradesh, this issue revolved around households that are below the poverty line (BPL): what cash incentives should be paid to BPL households, what latrine design was most appropriate, and how to structure cash incentives to best reach individual BPL households. The emphasis on sustainability and collective sanitation outcomes places great importance on developing approaches that are demand responsive and result in the usage of sanitation facilities by the poorest segments of the community.

### **Preliminary Recommendations**

- Consider explicitly targeting communities that have either difficult physical conditions or social problems in order to ensure that the methodology is applicable to the full range of communities. In East Java, the observation was made that about 10 percent of communities should fall into this category.

- Develop a robust and comprehensive methodology for sanitation marketing that is comparable in its development to the approach for total sanitation. The methodology needs to include a focus on making a wider range of sanitation products and services available to consumers than is presently the case.

### **Implementation Capacity**

*Implementation capacity is the ability of institutions at all levels to carry out their roles and responsibilities. Institutional capacity includes adequate human resources with the full range of skills required to carry out their functions, an “organizational home” within the institution that has the assigned responsibility, mastery of the agreed upon program methodology, systems and procedures required for implementation, and the ability to monitor program effectiveness and make continual adjustments.*

### **Analysis**

*Capacity at the state or provincial level in a large country. While the policy framework and commitment of resources are in place at the national level in India, capacity at the state level remains a constraint to scale-up. As mentioned previously, although there are dedicated sanitation units at the state level in both*

Himachal Pradesh and Madhya Pradesh, the capacity of these units needs strengthening in order to run a statewide program. At the provincial level in East Java, staff is overstretched and not able to give rural sanitation the attention that it deserves. In large countries that decentralize responsibility to the states or provinces, capacity at this level is essential to scale up to all districts in the state, especially as the percentage of less motivated and less progressive districts increases.

*District-level implementation capacity. District-level capacity for rural sanitation and hygiene promotion also needs strengthening. In Madhya Pradesh, the assessment report points out the shortage of qualified organizations that can support TSC implementation. At the individual level, there are an insufficient number of sanitation specialists in each district. To address this problem, the WSP is planning to train a cadre of sanitation specialists in each district, but this will be a major undertaking if the TSC is to be scaled up across all of Madhya Pradesh. The Tanzania assessment report also suggests that capacity-building efforts be focused at the district level, since that is where the responsibility for implementation lies. Districts in Tanzania appear to have staff with experience in participatory community planning and project implementation and monitoring, skills that—with additional training—can be applied to the TSSM project. Importantly, the Tanzania report also mentions other types of gaps related to the lack of resources, including vehicles, computers, and budget.*

*Community-level capacity. In addition to capacity-building needs at the state and district levels, community capacity is also lacking. In Himachal Pradesh, for example, attempts at working through village committees have not been especially*

successful. However, working through committed local leaders has proven to be a more effective approach. In East Java, rural health centers and midwives appear to be the main sources of implementation capacity. In principle, rural health centers employ sanitarians, but the lack of resources and incentives limits their capacity to carry out their sanitation-related responsibilities. Identifying the most effective approaches to developing community capacity is an area worth further exploration.

*Mobilizing the capacity of the private sector for TSSM.* None of the locations has yet implemented activities to develop the capacity of the private sector to provide consumer-responsive and affordable sanitation goods and services. The Tanzania assessment team noted that there is private sector capacity in the district seats and larger towns that could be attracted to work in rural areas if there is demand. Additionally, under the Rural Water Supply and Sanitation Program, training of sanitation masons has begun in order to build the supply capacity. The report suggested that the TSSM project take actions such as certifying sanitation hardware suppliers and forming trade cooperatives to mobilize the private sector to provide services in rural areas. The India and Indonesia assessments stated that sanitation marketing was much weaker than the total sanitation

component and noted that, despite the availability of a TSC budget for “alternative delivery mechanisms” and revolving funds to increase the availability of goods and services, little has been done to improve local private sector capacity. The WSP has recently conducted a comprehensive assessment of sanitation marketing that should provide information on how best to strengthen and mobilize the capacity of the private sector to provide sanitation products and services.

### **Preliminary recommendations**

- Each district should develop a master capacity-building plan for reaching the target number of communities. This master plan should be based on the number of qualified staff that is needed to reach each community and an estimate of the number of visits that are generally required. Each district can then decide how to provide the staff to carry out the social intermediation and promotional activities associated with TSSM. These personnel might come from district government staff, or from contracting individuals or NGOs.
- Since it is unlikely and perhaps not even advisable for government staff to carry out most of the implementation activities, districts might consider contracting with local organizations to support district implementation activities. Typically these organizations will be NGOs. In India, there is some question whether there are an adequate number of qualified NGOs, but it is fair to assume that the market will develop over time if the demand is present.
- The WSP should develop standard training packages to train a cadre of sanitation specialists in each district. Clearly this kind of training will be

necessary to develop district level capacity to support TSSM.

- After the sanitation marketing assessment is completed, develop and implement a strategy to develop and mobilize the capacity of the local private sector to provide sanitation products and services.

### **Availability of Products and Tools**

*The availability of products and tools includes ready access to sanitation goods and services that respond to consumer preferences and their willingness and ability to pay for them. The ability of target consumers to adopt the promoted behavior(s) is highly dependent on the existence and availability of products and services. Any and all relevant products and services need to be considered, specific to each country situation.*

### **Analysis**

*Availability of sanitation goods.* In Indonesia and India, the availability of sanitation products does not appear to be a widespread problem. In East Java, there is a relatively well developed market system to which rural communities are connected. Prices are affordable and sanitation retailers did not report constraints to operating their businesses. In Madhya Pradesh and Himachal Pradesh, the assessments indicated that,

according to those interviewed, the supply of goods from the private sector is adequate, wholesale suppliers can be found in most large towns that in turn sell to local retailers, and products are reasonably priced. In contrast, in Tanzania, the market for sanitation goods and services has not yet been developed.

*Improving local supply chains.* Despite the generally positive findings about private supply chains in India and Indonesia, the options available to consumers remain somewhat limited. Sanitation retailers have not had any business training to develop the skills to respond to consumer demand, especially in offering a wider range of affordable sanitation options. At a policy level in India, the TSC guidelines prohibit the construction of dry latrines and instruct that all existing dry latrines be converted to pour-flush latrines or other higher levels of service, thus providing a policy barrier for local suppliers to develop a wider range of sanitation options. Increased sanitation marketing will be needed for the market to provide a range of options that respond to consumer demand and are affordable and desirable by different market segments. In Tanzania under the Rural Water Supply and Sanitation Project, initial work in the training of sanitation masons has begun.

### **Preliminary recommendations<sup>5</sup>**

- Remove any policy barriers that constrain the ability of the private sector to respond to consumer demand. The prime example of this is the national TSC requirement to promote only pour-flush latrines in India. Clearly, having a flexible set of national norms and standards for latrine design is an essential precondition for the local private sector to become demand-responsive.

- Provide business training to both wholesalers and retailers in the range of low-cost technologies available and how to identify and respond to consumer preferences.

## **Financing**

*This dimension assesses the adequacy of arrangements for financing the programmatic costs. These costs include training, staff salaries, transportation, office equipment and supplies, and the development of communication and education materials as well as programmatic line items in budgets for program and promotion activities.*

## **Analysis**

*Government commitment of resources.* There is no current shortage of funds for implementation of TSSM in India or Indonesia. In India, the combination of the TSC and the NGP provide ample financial resources. Twenty-five percent of the total TSC budget in India is for IEC, sanitation marketing, and the enabling environment. At the state level in Madhya Pradesh, this translates to US\$8 million per year or US\$150,000 per district. The other 75 percent is for facility construction and cash incentives to BPL households. In Indonesia, while the national government has not committed the level of resources that India has, the World Bank–financed WSLIC-3 project will provide US\$275 million, of which a

significant percentage can be used for hygiene promotion, sanitation marketing, and the enabling environment. In Indonesia, however, the continued control of water supply and sanitation funding by the central level has resulted in a lack of commitment at the local government level to finance sanitation from their own budgets. Even though the 10 districts involved in the Phase 1 of the TSSM project have increased their contributions, at the time of the assessment, budgets were still relatively low. Raising the level of local government investment in East Java is essential to financing a scaled-up program. Compared with Indonesia and India, Tanzania does not yet have an adequate source of funds for implementing TSSM at scale. While government funds could be increased, especially the US\$10,000 per district per year earmarked for sanitation, some of the support will need to come from other sources, including donors, the private sector, and the leveraging of other government programs.

*Utilization of available resources.* Districts are not using funds available for rural sanitation. In Tanzania, the assessment report suggests that the 10 target TSSM districts will need assistance in programming the US\$10,000 that they receive for rural sanitation. In East Java, because of inadequate planning and management skills, available funds are often not fully used. In Himachal Pradesh and Madhya Pradesh, as in East Java, districts have not used available funds to develop local capacity and increase demand for sanitation. Even when resources are available for strengthening the enabling environment, they are not being well used.

*Sustainability of outcomes from the incentive program.* The NGP incentive program in India may be the single biggest factor in the success of the TSC. The NGP

program is popular and successful in generating support for rural sanitation. The number of awards has been increasing rapidly as the program becomes better known. However, it is not yet known whether the program will result in long-term sanitation outcomes. To address this issue, the India assessment reports recommend that the TSSM project develop a phased incentive framework where a small percentage of the award is provided after reaching ODF status, another percentage after achieving post NGP outcomes, and the balance used to finance recurrent costs if sanitation outcomes are sustained. This type of system would clearly be more complex to administer, but it would create an incentive for sustainable outcomes. Neither Tanzania nor Indonesia has an incentive framework based on collective outcomes, although TSSM plans to pilot an incentive system. In Tanzania, the concept of an incentive framework is not discussed in the assessment report.

*Financing institutional sanitation.* Financing institutional sanitation including schools and other public buildings remains a somewhat unresolved issue. The TSSM project does not finance the construction of any facilities, although other projects do. In India, this problem has been addressed to some degree by the criteria of the NGP incentive program, which requires that sustainable facilities be in place

in all schools and public places in order to reach ODF status. Funding the investment costs does not fully resolve the problem, however, since budgets for schools and local governments are rarely large enough to pay for regular maintenance.

### **Preliminary recommendations**

- Develop a sustainable incentive framework based on collective outcomes that can be replicated in other regions. The East Java assessment makes this explicit recommendation, although the source of the financing remains to be determined. The India reports suggest a reworking of the incentive framework so it is phased and more focused on sustainable outcomes.
- Improve the planning and management skills of districts so they are better able to use the available funds for sanitation. This recommendation is made in all of the assessment reports.
- Develop approaches for financing institutional sanitation such as schools and other public buildings and places.

### **Cost-Effective Implementation**

*Cost-effective implementation is defined as approaches that are affordable and effective and take advantage of economies of scale. Although it will not be possible to assess the cost effectiveness of the approach or how best to achieve economies of scale and scope until the end of the project, data must still be collected during implementation to make this determination at the end of the project. Therefore, the focus in the baseline assessment is to ensure that information will be collected from the outset and that the capacity to collect the information is in place, including systems and procedures for collecting cost information and capacity to use and collect it.*

## Analysis

*Availability of adequate data to determine cost per ODF community.* None of the TSSM locations appear to be collecting adequate information about cost to determine how to implement TSSM in the most cost-effective way. None of them have the mechanisms in place to determine the cost of government involvement. Further, there does not yet appear to be any demand for this type of information. The reports did not discuss whether states and local governments have the capacity to track this information if appropriate systems were developed. The Indonesia and India reports suggest the need to determine the cost per ODF community as a unit of measure. In East Java, estimates have been made about the cost of CLTS on a per household and per community basis. However, these estimates do not take into account all of the program costs.

*Developing a system to track costs.* The WSP intends to develop the systems so costs can be tracked, and then strengthen the capacity of states and districts to use the data to determine the most effective way to implement TSSM at scale. The East Java report raises the important issue that, at present, sanitation expenditures are not disaggregated from water supply costs. This may be because of the use of shared project resources

and integrated activities, such as when training addresses both water supply and sanitation. The assessment reports suggest that a cost-tracking system might be based on the following indicators:

- cost per ODF community
- cost per household that gains access to sanitation facilities
- cost per household sanitation facilities
- cost per additional dollar invested in sanitation by others

This kind of cost data is essential for reaching consensus on which approaches are the most effective at scale.

*Economies of scale.* The Tanzania assessment introduces the concept of economies of scale as a way to think about cost-effective implementation, and suggests that certain TSSM activities might provide economies of scale. These activities include training, procurement of materials, and credit mechanisms. This concept extends to the private sector, which can achieve economies of scale by purchasing and transporting materials in bulk or by contracting with vendors at reduced cost through cooperatives and other collaborative mechanisms.

## Preliminary recommendations

- Systems need to be set up to track implementation costs, or the follow-up assessment in two years will not be able to inform project learning in this dimension. This effort is apparently underway in all countries.
- WSP can assist in setting up these systems by developing standard indicators and templates around which cost tracking can take place.

## Monitoring and Evaluation

*Monitoring and evaluation (M&E) refers to the government's capacity (or the state's or province's capacity, in large countries such as India or Indonesia) to track implementation and the make adjustments in the program. Large-scale sanitation programs require regular monitoring and periodic evaluation and, perhaps more importantly, the willingness and ability to use the monitoring process to make adjustments in the program. Effective monitoring will identify strengths and weaknesses in the program methodology, implementation arrangements, and cost efficiencies. Overall monitoring responsibility must be at the highest level of the program, but must be based on information collected at the local government or community level.*

## **Analysis**

*Monitoring sanitation outcomes.* All the assessment reports pointed out the importance of monitoring sanitation outcomes such as latrine usage, prevalence of open defecation, and disposal of children's feces. Given the focus of the TSSM methodology on collective outcomes, an M&E system focused on outcomes seems essential. In India, the NGP verification process does track outcomes, but this is a one-time event. In addition, the national TSC monitoring system tracks some outcomes, but mostly through project-based monitoring systems that are not

integrated into a national system. In Indonesia, there is no regular monitoring of sanitation outcomes. The consequence of not collecting outcome data is that it is difficult to know what works and what does not, and difficult to know the relative advantages or disadvantages of various approaches. Monitoring of sanitation outcomes would provide a rich source of information for programmatic lessons learned that are essential to finding the more effective approaches to scale up TSSM.

*Strengthening M&E systems at all levels.* Integrated M&E systems at the national, state or provincial, and district levels are not yet in place. The WSP plans to provide assistance in developing TSSM-specific M&E systems that build on existing government ones. The India assessments stated that "current M&E systems are fragmented and inadequate." The NGP and state award systems that are linked to the incentive framework do provide a measure of monitoring, but neither constitutes a fully institutionalized and ongoing system. At the national level in India, a positive step is that the TSC has increased its monitoring efforts by requiring that data for each community be entered at the state and district levels. In Indonesia, a regular national-level household survey is carried out, but the definitions of sanitation facilities are not aligned with international definitions, thus making the results more difficult to interpret.

*Developing capacity for M&E.* Only the Tanzania report spoke directly to the capacity at the state and district levels to implement an M&E system, and, more importantly, to use that information to make program adjustments. Although capacity to monitor may exist to some extent in Tanzania, it is not yet adequate, in part because of the heavy reliance on project-based M&E funded by donors. All the reports suggest that one of the keys to



improve district-level capacity for M&E is to develop simple tools that will provide the information to monitor performance, develop strategic sanitation plans, and allocate resources efficiently. In addition to routine monitoring, none of the target countries currently has the capacity to carry out impact evaluations. Impact evaluation is a component of WSP assistance, although the development of a standard impact evaluation tool is not likely, given the complexity of impact evaluations and the difficulty in standardizing them.

### **Preliminary Recommendations**

- M&E systems need to be developed that link the central, state or provincial, and district levels. These systems should include data for outcome monitoring in addition to program inputs and simple outputs. Developing these systems will require concurrence on a standard set of indicators that

are based on agreed-upon international definitions, preferably linked to the Joint Monitoring Program. These systems should clarify roles and responsibilities at all levels, provide the formats and protocols for linking the system, and include simple tools that can be used at the state and district levels.

- In addition, capacity needs to be developed to implement the systems, including the ability to use the data to inform program implementation.

## 4. The Way Forward

This chapter provides preliminary guidance on the way forward to strengthen the enabling environment for TSSM. As discussed earlier in this document, this guidance should be seen as preliminary, since the TSSM project is still in the early stages of implementation and has not yet developed a fully informed set of recommendations. Nevertheless, the analysis of the four enabling environment assessments does provide an early indication of some key lessons learned.

### Overall Conclusions

The following are overall conclusions from the assessments about strengthening the enabling environment for the Global Scaling Up Sanitation project that have broad significance for the wider international sanitation community.

The overarching conclusion from the assessments is that, although some countries have important elements of the enabling environment in place at the national level, much remains to be done, especially at the state or provincial and district levels.

- While a supportive policy framework is an essential starting point for establishing an enabling environment, it must also be matched by a well-developed strategy and sound operational plans at the state and district levels to put the strategy into action.
- An incentive framework such as the NGP in India is a very powerful way to generate support and interest for
- TSSM at the state, district, and community levels.
- Implementation arrangements at the state or provincial and district levels are a major constraint in scaling up. States and districts need to have organizational units or cells dedicated to managing rural sanitation activities and clear operational arrangements for carrying out the intensive work of social intermediation and outreach with communities.
- The methodology for total sanitation is more developed than it is for sanitation marketing. Countries such as Indonesia and India, for example, are much more familiar with the total sanitation approach than they are with sanitation marketing.
- It has not yet been demonstrated that the labor-intensive approaches associated with the CLTS approach can be implemented at scale. The experience of Indonesia and India demonstrates that the first wave of communities tends to be those with strong local leadership and interest, and these communities are not necessarily representative. As the program scales up, a higher percentage of the target communities will require more outside support and resources than may be currently available.
- Capacity at all levels must be developed for TSSM, especially at the district level. Districts must have access to an adequate number of trained sanitation specialists, either through their own staff or by contracting with NGOs and trained masons and artisans. Capacity-building plans need to address the

systems and resources that the sanitation units need in order to function effectively.

- Although the private sector seems to be able to provide sanitation goods and services to rural communities at affordable prices, the options available to consumers remain limited. In India, this is often the result of policy barriers on what latrine options can be promoted.
- Although significant resources are increasingly available for rural sanitation, especially from central government sources, local governments are not making effective use of these funds because of a lack of experience in how to plan and budget for rural sanitation activities.
- Systems to track costs, so that the most cost effective way to implement TSSM at scale can be determined, do not yet exist.
- M&E systems for TSSM are not yet in place. M&E systems for TSSM must focus not only on monitoring of

project inputs and basic outputs but also on collective sanitation outcomes.

### Summary of Preliminary Guidance

Table 2 summarizes the recommendations from each dimension in the previous section of this report for strengthening the enabling environment for TSSM. The guidance in this table is based both on actual practices and on the recommendations provided in the assessment reports and were, for the most part, reflected in more than one assessment. These recommendations are intended to provide guidance to the WSP and governments for actions at the country level. As discussed previously, this guidance is not intended to be a comprehensive set of recommendations that addresses all the elements in each dimension. They are, instead, what can be reasonably put forth at this stage of the TSSM project.

**Table 2: Summary of Preliminary Recommendations**

Dimension	Guidance
Policy, Strategy, and Direction	<ul style="list-style-type: none"> <li>• In large countries such as Indonesia and India, assist the state or provincial governments to develop planning processes to assist them in translating national policies and strategies into action at the district level. The result should be state- and district-level sanitation strategic plans.</li> <li>• Develop aggressive advocacy strategies aimed at sharing information about TSSM, gaining political support, and catalyzing action. These efforts should raise awareness of the costs of inadequate sanitation and the benefits to be had from well-designed sanitation investments.</li> <li>• Develop outcome-based incentive frameworks based on the experience of the NGP program in India.</li> </ul>

<b>Dimension</b>	<b>Guidance</b>
Institutional Arrangements	<ul style="list-style-type: none"> <li>• Assist states and districts to establish dedicated sanitation units that will serve as focal points for TSSM. These units should be adequately staffed and have the required skills to carry out the full range of tasks associated with TSSM.</li> <li>• Strengthen the cross-sectoral partnerships between the infrastructure-focused ministries and the ministries of health in order to ensure programmatic linkages.</li> </ul>
Program Methodology	<ul style="list-style-type: none"> <li>• Consider explicitly targeting communities that have either difficult physical conditions or social problems in order to ensure that the methodology is applicable to the widest population range possible.</li> <li>• Develop a robust and comprehensive methodology for sanitation marketing that is comparable in its development to the methodology for total sanitation.</li> </ul>
Implementation Capacity	<ul style="list-style-type: none"> <li>• Each district should develop a master capacity-building plan for reaching the target number of communities. This master plan should be based on the number of qualified staff that is needed to reach each community, based on an estimate of the number of visits that are generally required.</li> <li>• Since it is unlikely and perhaps not even advisable for government staff to carry out most of the implementation activities, districts might consider contracting with local organizations to support district implementation activities.</li> <li>• The WSP should develop standard training packages to train a cadre of sanitation specialists in each district.</li> <li>• After the sanitation marketing assessments are completed, develop and implement strategies to strengthen and mobilize the capacity of the local private sector to provide sanitation products and services.</li> </ul>
Availability of Products and Tools	<ul style="list-style-type: none"> <li>• Remove any policy barriers that constrain the ability of the private sector to respond to consumer demand.</li> <li>• Provide business training to both wholesalers and retailers in the range of low-cost technologies available and how to identify and respond to consumer preferences.</li> </ul>
Financing	<ul style="list-style-type: none"> <li>• Develop a sustainable incentive framework that can be replicated in other regions.</li> <li>• Improve the planning and management skills of districts so they are better able to use the available funds for sanitation.</li> <li>• Develop approaches for financing institutional sanitation such as schools and other public buildings and places.</li> </ul>

Dimension	Guidance
Cost-effective Implementation	<ul style="list-style-type: none"> <li>• Systems need to be set up to track implementation costs, or the follow-up assessment in two years will not be able to inform project learning in this dimension.</li> <li>• The WSP can assist in setting up these systems by developing standard indicators and templates around which cost tracking can take place.</li> </ul>
Monitoring and Evaluation	<ul style="list-style-type: none"> <li>• M&amp;E systems need to be developed for TSSM that build on existing government M&amp;E systems. These systems should include data for outcome monitoring in addition to program inputs.</li> <li>• In addition, capacity needs to be developed to implement the TSSM systems to learn what is working and what is not in order inform program implementation.</li> </ul>

### Learning Agenda for Enabling Environment

The Global Scaling Up Sanitation project places great emphasis on learning from the four programs. The analysis and preliminary recommendations presented earlier have suggested a number of knowledge gaps in TSSM programs that are elements of scaled-up and sustainable programs. This section provides specific suggestions for a learning agenda for the WSP for the strengthening of the enabling environment. The items in the learning agenda are intended to better inform how to create an enabling environment for TSSM programs at scale. The WSP should ensure that the knowledge products suggested below are used to further learning about strengthening the enabling environment for TSSM.

1. *Develop detailed guidance on how to determine the effectiveness of the enabling environment for TSSM.* Having a structured manner for measuring the enabling environment

will enable TSSM implementers to track progress and at the same time clearly communicate what constitutes a supportive enabling environment.

2. *Determine what types of policy instruments are needed to provide a framework for scaling up TSSM.* It is not clear from the baseline assessments what types of policy instruments are needed to provide the necessary framework for scaling up. Are legal instruments necessary? Would a set of regulatory instruments be adequate, or perhaps a program issued under a ministerial decree or government initiative?
3. *Provide guidance on the functions and staffing profile of dedicated sanitation units at the state or provincial and district levels.* All the reports recommend that dedicated sanitation units be established at the state or provincial and district levels. What should the functions of these units be? How many staff members are needed and what skills do they need?

4. *Develop case studies on the different implementation models that districts use to carry out the social intermediation and outreach roles needed for CLTS.* Most districts do not have adequate numbers of trained staff to carry out the labor-intensive work of CLTS. What other models (for example, contracting to NGOs) are there that might be used? This is a critical issue that must be addressed for a large-scale program.
  5. *Provide evidence of the effectiveness of the CLTS approach in bringing about demand for sanitation.* Consensus does not appear to exist regarding whether CLTS approaches that depend on highly labor intensive activities can be implemented at scale. In some countries, there is support for additional, less labor intensive IEC approaches, perhaps as a hybrid with the type of labor-intensive approaches associated with methodologies such as Participatory Hygiene and Sanitation Transformation (PHAST). If CLTS approaches can be shown to work at scale, this will increase its acceptance as an approach.
  6. *Document approaches to develop the capacity of the local private sector to supply consumer responsive and affordable sanitation goods and services that address the different economic market segments.* This is a relatively new area of work and therefore will benefit from documentation of the approaches that are used under the Global Scaling Up Sanitation project. Approaches could include training of masons and businesses, organization of trade cooperatives, provision of incentives, and so on.
  7. *Determine how best to finance institutional sanitation.* The NGP criteria require that public facilities be provided in order to qualify for an award. Are there other approaches in countries where there is no cash incentive program as there is in India? Similarly, what approaches have been developed to pay for the ongoing maintenance of public facilities.
  8. *Develop standard templates for tracking costs.* None of the project locations has systems in place for tracking implementation costs. This is further complicated by the fact that local governments may not track their costs by program areas, and that not all of these costs are paid by governments. Developing a method for capturing these costs with associate templates would greatly facilitate this task.
  9. *Develop standard indicators for monitoring collective sanitation outcomes.* The focus on collective outcomes requires different indicators than are required for a focus on individual households. Developing a standard set of indicators for collective sanitation outcomes would be an important contribution to TSSM. The analysis of the dimension of cost-effective implementation provided earlier suggests a preliminary set that might serve as a starting point.
- In addition to these items, in the course of the implementation of the four programs, other items for a learning

agenda for the enabling environment may be identified. The post-central challenge of creating an enabling environment for scaled up and sustainable TSSM programs.

implementation enabling environment

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<sup>1</sup> Draft “National Operational Strategy for Rural Sanitation and Hygiene Improvement in Indonesia.”

<sup>2</sup> Project Appraisal Document on a proposed credit to the Republic of Indonesia for a Third Water Supply and Sanitation for Low Income Communities (PAMSIMAS) Project, June 1, 2006.

<sup>3</sup> *Water and Sanitation in Tanzania: An Update Based on the 2002 Population and Housing Census*. WaterAid. July 20, 2005. [http://www.wateraid.org/documents/060524\\_censusupdate\\_wssweb.pdf](http://www.wateraid.org/documents/060524_censusupdate_wssweb.pdf).

<sup>4</sup> Preliminary JMP data presented at AfricaSan conference February 2008.

<sup>5</sup> In addition to the enabling environment assessments, sanitation marketing assessments have also been carried out. These provide more in-depth analysis and recommendations related to the programmatic methodology of working with the local private sector to increase the supply of consumer-responsive and affordable sanitation products and services; they also provide analysis and recommendations for creating communications campaigns to socially market a range of sanitation products and services. These reports are available on the Water and Sanitation Program website ([www.wsp.org](http://www.wsp.org))