SanCop 23 Synopsis

Building Municipal Capacity to Sustain Sanitation Services

The 23rd meeting of the UK's Sanitation Community of Practice was held on the 14th of June 2019 at the University of Sheffield. The aim of the event was to discuss the importance and potentials of capacity building as an integral part of sanitation service delivery. The event started with a welcome note from Prof Dan Brockington, Director of the Sheffield Institute for International Development (SIID). This was followed by an introduction to the importance of municipal capacity building by Dr Glyn Williams, of Urban Studies and Planning (USP). Glyn spoke about the need for capacity development, and the aspects (e.g. technical knowledge and policy learning) and determinants (e.g. institutional innovation and supportive partnerships) of capacity. Students from the University of Sheffield then presented their group work assessing municipal capacity building approaches in Ghana, after which an engaged audience discussed with an expert panel key questions posed by the students. In two afternoon sessions, various case studies of building municipal capacity were presented. Finally, a group exercise was conducted to develop capacity building strategies in relation to the Ghana Sanitation Challenge.

This synopsis and the speaker presentations are available at https://www.susana.org/en/community/integrated-content/sancop-uk

A special thanks to the University of Sheffield for hosting the event.

Session 1 – Assessing approaches to building municipal capacity to improve sanitation service delivery in Ghana

Presentation and discussion of findings and key questions, led by University of Sheffield student research group

With support from IMC Worldwide, the students conducted a study on institutional capacity building to deliver non-sewered sanitation, with a focused literature review on: technical and managerial components, political structures, gender equality, and financing. In an online survey, the students also found that 77% of respondents reported issues with 'capacity development', with a lack of motivation at municipal level being a particular challenge. Training and technical assistance were most widely used to address capacity gaps, while there was also some evidence of participatory approaches and peer to peer mentoring. 10% of survey respondents reported city twinning/neighbouring cities in regions or even international exchanges. Other challenges included lack of education, awareness on sanitation, lack of personnel and gender inequality, with few female workers in higher-level positions (affecting the type of sanitation infrastructure implemented), and numerous cases of harassment in the workplace. Recommendations were educational programmes on the importance of sanitation, a platform for key stakeholders to network, staff training to increase the use of internet platforms, on-the-job training (also at community level), enhanced monitoring and evaluation, and supporting women to enter the sector.

Panel Discussion: Peter Hawkins, Noemie De La Brosse, Joanne Beale

The students proposed the following questions to the panel and audience: 1. Which external factors do you believe must be considered in designing a successful capacity building program? 2. Is implementing municipal capacity building programs where there is no demand for it among municipal actors, problematic? Where there is no demand, how could you motivate municipal workers to improve their skills and capacity? 3. Do you think it is too narrow directing capacity building solely at municipal bodies? Should these efforts be comprehensive and also direct resources at improving the capacity of national institutions and local communities to improve sanitation infrastructure? 4. How long should a capacity programme such as this last in order to be successful? 5. What would you suggest are effective strategies in measuring improved capacity?

Some key points from the panel were as follows:

Challenges to municipal capacity building include: limited budgets; knowledge transfer during frequent staff turnovers (training and awareness therefore needs to be institutional, not individual); 3-5 year time horizons for donor projects are too short (you need at least 50 years to implement real change, more long-term engagement from NGOs, and relationship building is also key); donors want numbers (e.g. how many trained) but this is not always possible, or appropriate; there is a strong internal bias towards centralised off-site sewered systems, making it difficult to obtain budgets and buy-in for on-site sanitation (when first introduced).

It's too narrow to focus only on municipal capacity gaps; capacity building is also needed in the private sector, among small-scale service providers and at the community-level. Effective strategies include: peer to peer learning; positioning/seconding professionals (e.g. NGO or local staff) in a municipal office to understand how decisions are made, effective mind-set shifts, building trust and respect. You can have embedded expertise or remote support; matching roles to equivalent partners; E-learning platforms / online; study tours and knowledge exchanges; follow-up monitoring and evaluation from workshops/activities.

Comments from the audience:
- Capacity building is transformation from within. You need different activities at different moments, depending on the problem to be addressed. For example, peer to peer learning is good when there is a specific problem to solve. It's all about timing.
- It's important to find local champions to push forward the sanitation agenda.
- Some municipalities in Bangladesh use a multi-level incentive system, for example, 'if you get to this level, funding opens up for next level'. However, not all municipalities start at same level, so it ultimately incentivises those with less capacity, and acts to dis-incentivise. It then means that those who already have more capacity were given more, and it did not benefit those with lower resources and capacity. Many municipalities will be left behind if they have limited capacity.
- Building in practices for participatory planning to embed into municipal planning is key. For this, certain skills are needed to listen to communities and informal workers, and institutionalise supportive structures – a process of learning by doing.
- One participant from a business and change management background noted that you must understand people first before developing a capacity building programme. This can be done by completing readiness assessments to understand; personal motivations and skill/learning gaps. Also, if you know the budget is not available, ideas may not be taken up, even with proactive staff. Embedding this in the DNA of the organisation is central.

Sessions 2&3 – Case studies of building municipal capacity

Building capacity for city-wide inclusive sanitation, Peter Hawkins (Consultant)
Peter spoke about the integration of sanitation with solid waste management, drainage and water services. This requires engaging with the multiple actors and institutions involved in delivering these services. The municipal authority has a key role in coordination of service delivery, and the national government is responsible for policy environment and regulations. Capacity relates to building systems and procedures, skills and knowledge, equipment and infrastructure (it's not only about training, but also equipment e.g. vehicles; I.T.). Training for the private sector should relate to formalisation, business planning and registration. This can be implemented better, and municipalities can engage better with the private or informal sector if they are organised in unions / associations. There are also potential synergies to link SWM and FSM businesses, e.g. using an existing customer base and equipment. Capacity development is also needed for consultants – an online course is currently being developed for this aim (ConCad).

Municipal scope for action in urban sanitation and support mechanisms, Kevin Sansom (WEDC)
Kevin spoke about water utilities and municipal sanitation in Mumbai and Sangli, India and Ashaiman and Kumasi, Ghana. He mentioned poorly defined responsibilities in urban governance, political interference in decision making, and limited revenues and staffing as challenges, and stressed the importance of accountability and organisational autonomy over finances, staffing, and business planning. Examples of strategic initiatives to encourage efficient & effective use of staff time were: a) a Mumbai Slum Sanitation Project, where the municipality delegated responsibility to an NGO that played a key role in toilet construction & monitoring (optimising numbers of toilets to ensure cost recovery and avoid queuing), bundling technical & community development. After initial challenges, the municipality offered longer-term flexible contracts; b) Shelter Associates in Sangli gradually built effective relations with the municipality. This took time, but when the NGO become a 'trusted insider', capacity building was more effective; c) In Ashaiman, a PhD student used their study to attract more funding from the municipality which previously did not provide affordable or adequate services for the poor and d) In Kumasi, there is a strong waste management department, where enabling policies stimulated private sector involvement. The private sector formed associations, with which the municipalities could have effective relationships. Kevin's lessons were: utilise studies, move towards 'trusted insider' relations, enable greater use of the private sector through well designed contracts/licenses, and enable productive dialogue via associations.

Participatory planning with a municipality for sustainable sanitation solutions: Experience from Babati, Tanzania, Joanne Beale (Consultant / WaterAid)
Joanne spoke about a 3 year participatory planning project in a small town (Babati) in Tanzania, with WaterAid. The 100,000 people town has grown from a small market town to a regional hub. WaterAid conducted a stakeholder analysis and partnership mapping and partnered with BAWASA (Babati Urban Water Supply and Sanitation Authority), Nelson Mandela University, and Babati Town Council (which started with low interest in the project but later had buy in from key stakeholders). The project focused on behaviour change in all partners and involved the stakeholders in every stage. Engaging and building capacity was key: the staff at BAWASA and BTC carried out data collection using mobile technology. Thus, they could feed back actual data and were able to see key issues with their own eyes. Likewise, it was important to build capacity of local academic institutions. WaterAid participatory tools and SFD's were used, e.g. a scenario building workshop, and creation of business cases. Lessons learnt were the need for long term involvement (this project had a timescale of 3 years and it took one year to build effective relationships) and the importance of national advocacy and relationships (there was an existing bias towards centralised sewers but the national government recognised the importance of on-site FSM which assisted decision-making at the municipal level). Recommendations were to recognise the history of relationships and to understand and clarify expectations from the outset.

Building capacity for citywide FSM in Lusaka, Jane Olley (WSUP Advisory)
Jane spoke about WSUP's Theory of Change, and their work in Zambia (since 2006), where they work through service providers. Sanitation is a 'hot potato' – no one wants to take responsibility. Key challenges are poorly built on-site facilities, limited ability to pay, informal pit-emptiers who bury on site, frequent cholera outbreaks caused by FS buried underground, and vacuum trucks preferring industrial clients with large septic tanks. Improvements have been: Lusaka Water becoming the mandated duty bearer and taking on the responsibility to manage pit emptying services, a clear mandate leading to a plan to align with national and local visions, co-creation workshops & joint monitoring, a sanitation surcharge (with lower prices for lower income customers), Lusaka Water setting up an FSM department and cross-subsidising the sanitation surcharge. There is still a need for external capacity building and formal training.

Building the capacity of municipalities to engage with the informal sector on sanitation services, and the challenges of scaling this up (examples from Kenya and Bangladesh), Noemie De La Brosse & Lucy Stevens (Practical Action)
Noemie and Lucy spoke about engagement with the informal sector. They stressed the importance of acknowledging the power dynamics between municipalities and the informal service providers who, in the past, wouldn't even step inside a municipal office, and the need to build capacity of the informal sector to be a part of the citywide service provision. For this, the two sides (municipality and informal sector) need to engage effectively, which requires a particular set of skills to change the relationship of trust. In Kisumu, Kenya, the challenge is to create policy framing relations between public and private actors. The Kisumu county WASH forum attempts to build capacity of pit emptiers via formalisation, to create a win-win partnership with KIWASCO. In Bangladesh, a scale-up is attempted at a national level. the institutional regulatory framework (IRF-FSM) has a big national focus on sanitation, prompting a national action plan and clustering of municipalities depending on their FSM needs, with a range of activities planned according to the clusters (e.g. capacity building, awareness campaigns, technical assistance to FSM, service implementation, mechanical de-sludging, land procurement). Capacity building will include: training modules, programmes, support linkages and research and studies (mostly 'formal' and focus on municipalities; only some small elements relating to informal, existing service providers and some budget for exposure visits for sharing). Challenges are resourcing and budget lines, turn-over and sustainability of capacity building (is it a rolling programme or a single training session), and the inclusion of women, as well as the informal sector, especially, when the initiatives are scaled up.

Sessions 4 – Group Work

Jonathan Parkinson and Bastian Schnabel (IMC Worldwide) presented 6 groups with 3 case scenarios in relation to the Ghana Sanitation Challenge. The groups were asked to read the scenario, and develop a capacity building strategy to share. The following were the group recommendations for each case:

Case A – Strategy (conflict setting)
Manage expectations (as it's a conflict zone), build trust and be responsive to needs and priorities; encourage incremental change as there may be a mismatch between short-term priorities for security and long-term plans; hygiene promotion (a small budget can have a high impact in the short-term; improve municipalities ability to access funding. Integrate ideas into conflict resolution.

Case B – Strategy (post-conflict setting)
Group 1: Wider stakeholder analysis of existing municipal staff and limited private sector; gather some momentum (create positive energy); group training (e.g. construction); build on existing programmes (e.g. community engagement); pull in additional informal capacity; identify need to help access funds (e.g. peer to peer learning from towns 5 years ahead); contracting and peer to peer learning.
Group 2: A *process-oriented and systematic approach* is key. Start with the problem – what are we trying to fix? The strategy would then follow, including; stakeholder mapping (main players); conducting contextual, informative research to find what they do and who left out; creating a capacity building policy; designing an evidence-based plan; engaging tribal leaders who are there in the long-term, and could become figurehead leadership advocates.

Case C – Strategy (conflict-free)
Stakeholder identification – power dynamic analysis (gender needs; user/customers and land ownership; tribal leaders); participatory planning practices; readiness assessments – training, policy, procurement in short, medium, long-term; theory of change; log-frame and assessment of long-term resilience of projects; implementation of latrines; capacity to identify the beneficiaries e.g. CBS; schools; involve stakeholders already key to the process; who were the most vulnerable / needs-assessment; build WWT capacity.

Closing reflection: *Greater knowledge sharing is needed across the sector, to learn about different approaches and strategies for capacity building, not only for municipalities but also the private sector, community members, NGOs and consultants.*