Scaling Up Rural Sanitation

Policy and Sector Reform to Accelerate Access to Improved Rural Sanitation

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Acknowledgments

Designated a core business area in 2011, WSP's Scaling Up Rural Sanitation is working with governments and the local private sector to develop the knowledge needed to scale up rural sanitation for the poor. The programmatic approach combines Community-Led Total Sanitation (CLTS), behavior change communication, and sanitation marketing to generate sanitation demand and build up the supply of sanitation products and services at scale. In addition, WSP works with local and national governments and the local private sector to strengthen the enabling environment—including institutional, regulatory, financial, service delivery, and monitoring capacities—to achieve change that is sustainable. Starting in India, Indonesia, and Tanzania in 2006, Scaling Up Rural Sanitation is currently being implemented in more than a dozen countries. For more information, please visit www.wsp.org/scalingupsanitation.

This Working Paper is one in a series of knowledge products designed to showcase findings, assessments, and lessons learned through WSP's Scaling Up Rural Sanitation initiatives. This paper is conceived as a work in progress to encourage the exchange of ideas about development issues. For more information please email Eddy Perez at wsp@worldbank.org or visit www.wsp.org.

SANITATION FOR ALL

THE DRIVE TO 2015

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Executive Summary

Background

The Water and Sanitation Program (WSP) has provided technical assistance to support government efforts to scale up rural sanitation since 2007 through Scaling Up Rural Sanitation (TSSM). One of the central objectives of this initiative is to learn how to improve rural sanitation at a scale sufficient to meet the 2015 Millennium Development Goal for sanitation in Indonesia, Tanzania, and the states of Himachal Pradesh (HP) and Madhya Pradesh (MP) in India, and to then use the lessons learned to help replicate policy, programmatic, and service delivery approaches in other countries.

Baseline assessments of the enabling environment in these areas were completed in late 2007 during the start-up phase of the overall program.* These assessments took a deep look at the programmatic and institutional conditions needed to scale up, sustain, and replicate the total sanitation and sanitation marketing programmatic and service delivery approaches. To ensure consistency in the assessment findings, WSP developed a conceptual framework on the basis of a literature review and discussions with key actors. This framework consists of the following eight dimensions, considered essential to scaling up rural sanitation:

- Policy, strategy, and direction
- Institutional arrangements
- Program methodology
- Implementation capacity
- Availability of products and services
- Financing and incentives
- Cost-effective implementation
- Monitoring and evaluation

The 2007 baseline assessments identified weaknesses in the enabling environment in each country and made concrete recommendations for WSP technical support to help address these gaps. These recommendations were incorporated into work plans in each country. Although WSP facilitated steps to help governments adopt these recommendations, implementation was led by government and development partners involved in rural sanitation.

Endline assessments were conducted between July and November 2010 in each country. These assessments used the same methodology as the baseline and reviewed the status of the programmatic and institutional conditions needed to scale up, sustain, and replicate the total sanitation and sanitation marketing programmatic and service delivery approaches. The endline assessments were intended to determine to what extent the gaps identified in the baseline enabling environment assessments had been addressed.† The assessments also sought to clarify is whether the enabling environment in each country had been institutionalized to support scaling up in a sustainable manner, and whether that scale up could continue after 2010 without assistance, with less assistance, or with different assistance from WSP and other development partners.

The purpose of this document is to synthesize key findings, conclusions, and recommendations from the country-specific endline assessment reports to provide guidance and insight to other countries seeking to create large-scale sustainable rural development programs.

Overall Findings

One of the central hypotheses of TSSM was that a supportive enabling environment was an essential element of large-scale rural sanitation programs. Although state-of-the-art knowledge on how to strengthen the enabling environment for rural sanitation is still a work in progress, the experience from 2007 to 2010 strongly supports this hypothesis as the countries with the strongest enabling environment made the most progress—HP is an excellent example. At the same time, WSP's experience indicates that while all components of the enabling environment are important, not all are equally amenable to external intervention and therefore take time to address. External agencies have less influence, for example, in strengthening political will than in strengthening implementation capacity.

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* *Enabling Environment Baseline Assessment: Three Country Synthesis* is available at www.wsp.org/scalingupsanitation.

† Enabling environment endline assessment reports for each country are available at www.wsp.org/scalingupsanitation.

Country-Level Findings

Indonesia

In East Java, the enabling environment has significantly improved, especially at the provincial and district government levels (see Table A). The development of a national strategy for community-led total sanitation (STBM) in 2008 led to the inclusion of an STBM program in the five-year national development plan from 2010 to 2014. However, these promising developments have yet to be institutionalized. As of August 2010, there were inadequate budget allocations to meet the ambitious STBM targets and the STBM secretariat largely relied on development partners to finance its activities. At the provincial level, and especially at the district level, local governments have developed significant implementation capacity and demonstrated a commitment through increased allocations of their own funds. District governments believe that they now have the capacity to continue implementation of rural sanitation activities.

TABLE A: RATING DIMENSIONS—INDONESIA

DIMENSION	Indonesia	
	2007	2010
Policy, strategy, and direction	Medium	High
Institutional arrangements	Low	Medium
Program methodology	Low	High
Implementation capacity	Low	High
Availability of products and services	Low	High
Financing and incentives	Low	Medium
Cost-effective implementation	Low	Medium
Monitoring and evaluation	Low	High

Key:

Low	Needs improvement
Medium	Progress made, but still not high performing
High	Performing at a high level

India

In India, the national enabling environment remains exceptionally strong, as evidenced by the well-funded TSC and NGP programs. However, because of the highly decentralized system and the authority of each state government, on-the-ground results depend on

the policies, strategies, and capacity of each state (see Tables B and C). Himachal Pradesh (HP) is a major success story due in large measure to strong political support at the state level. Although the reasons for the development of this political support are complex, it seems likely that the early successes provided by a combination of progressive state sanitation policies and exceptional leadership in Mandi District were sufficient to demonstrate that new approaches worked and that rapid sanitation approaches were possible. In addition, there was convergence between the aims of the TSC, local cultural mores, and a growing environmental movement, which made sanitation improvement a politically viable and attractive cause for local leaders.

TABLE B: RATING DIMENSIONS—INDIA (HP)

DIMENSION	India-HP	
	2007	2010
Policy, strategy, and direction	Medium	High
Institutional arrangements	High	High
Program methodology	Medium	High
Implementation capacity	Medium	High
Availability of products and services	Low	High
Financing and incentives	High	High
Cost-effective implementation	Low	Medium
Monitoring and evaluation	Low	High

Key:

Low	Needs improvement
Medium	Progress made, but still not high performing
High	Performing at a high level

By contrast, Madhya Pradesh (MP) has not embraced a demand-responsive approach and the program methodology of total sanitation and sanitation marketing. The program remains supply-driven, with the state contracting with the private sector to construct latrines using standard designs. MP is a much bigger and poorer state than HP and as a result, it can legitimately be argued that what works in HP may not work in MP. However, the endline assessment concludes that MP has not progressed in large part because the state government has not accepted the fundamental principles of a demand-responsive approach.

TABLE C: RATING DIMENSIONS—INDIA (MP)

DIMENSION	India-MP	
	2007	2010
Policy, strategy, and direction	Low	Low
Institutional arrangements	Medium	Medium
Program methodology	Low	Low
Implementation capacity	Low	Medium
Availability of products and services	Low	Low
Financing and incentives	High	High
Cost-effective implementation	Low	Low
Monitoring and evaluation	Low	Medium

Key:

Low — Needs improvement

Medium — Progress made, but still not high performing

High — Performing at a high level

TABLE D: RATING DIMENSIONS—TANZANIA

DIMENSION	Tanzania	
	2007	2010
Policy, strategy, and direction	Low	Low
Institutional arrangements	Low	Medium
Program methodology	Low	Medium
Implementation capacity	Low	Medium
Availability of products and services	Low	Medium
Financing and incentives	Low	Low
Cost-effective implementation	Low	Low
Monitoring and evaluation	Low	Low

Key:

Low — Needs improvement

Medium — Progress made, but still not high performing

High — Performing at a high level

Tanzania

Without a national policy for sanitation, clear institutional home, or major program in place, efforts to scale up rural sanitation in Tanzania were in a very low starting position in 2007, especially when compared to conditions in India and Indonesia. However, significant improvements in the national enabling environment for rural sanitation were achieved between 2007 and 2010 (see Table D). Investments in long-term enabling processes resulted in a strong national framework for rural sanitation improvement but they have not yet translated into large-scale implementation or improved sanitation outcomes. The decision to designate the Ministry of Health, Sanitation, and Water (MOHSW) as the lead agency is a positive development even though the ministry still lacks capacity to carry out its functions. Implementation capacity has been strengthened in the ten project districts although it has not been effectively used, largely because of resource constraints.

Progress in Each Dimension of the Enabling Environment Framework

Table E rates each project site at baseline and endline in each of the eight dimensions of the enabling framework. The table highlights the low starting position in Tanzania as well as the different scale of the challenges in Madhya Pradesh and Himachal Pradesh due to the more difficult context in MP.

Overall, the most significant progress was made in four areas of the enabling environment: program methodology, implementation capacity, availability of products and services, and monitoring and evaluation. These four areas were directly and strongly influenced by technical support and capacity-building activities, whereas the other areas (policy, strategy, and direction; institutional arrangements; financing and incentives; and cost-effective implementation) proved more difficult to influence during the three-year interval between baseline and endline. Efforts to strengthen the enabling environment in each country have continued since the endline assessments were conducted in 2010 (see Epilogue, p. 35) and are largely based on the findings of the endline assessments.

Summary of Findings by Dimension

Policy, strategy, and direction. The most significant area of progress in this dimension was in the improved policy framework for rural sanitation in Indonesia and Tanzania. India already had a strong policy framework prior to the project. A second key finding is the limited impact the project has had on political commitment with the exception of Himachal Pradesh. No progress in this dimension was evident in Madhya Pradesh.

Institutional arrangements. Local governments have demonstrated that they can serve as the focal point for a large-scale service delivery model for rural sanitation. Fragmented roles

TABLE E: RATING DIMENSIONS AT BASELINE AND ENDLINE

2007 BASELINE	India-HP	India-MP	Indonesia	Tanzania
Policy, strategy, and direction	Medium	Low	Medium	Low
Institutional arrangements	High	Medium	Low	Low
Program methodology	Medium	Low	Low	Low
Implementation capacity	Medium	Low	Low	Low
Availability of products and services	Low	Low	Low	Low
Financing and incentives	High	High	Low	Low
Cost-effective implementation	Low	Low	Low	Low
Monitoring and evaluation	Low	Low	Low	Low

2010 ENDLINE	India-HP	India-MP	Indonesia	Tanzania
Policy, strategy, and direction	High	Low	High	Low
Institutional arrangements	High	Medium	Medium	Medium
Program methodology	High	Low	High	Medium
Implementation capacity	High	Medium	High	Medium
Availability of products and services	High	Low	High	Medium
Financing and incentives	High	High	Medium	Low
Cost-effective implementation	Medium	Low	Medium	Low
Monitoring and evaluation	High	Medium	High	Low

Key:

Low   Needs improvement

Medium   Progress made, but still not high performing

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and responsibilities for rural sanitation and hygiene increased the importance of having clearly defined roles and responsibilities, including a designated lead agency with the mandate and capacity to play its role. Effective coordination was an important success factor, but was driven more by political priority than by the nature and composition of the coordination mechanisms.

Program methodology. Workable program methodologies were demonstrated in all project areas except for Madhya Pradesh. All three countries have adopted the total sanitation and sanitation marketing approach to scaling up rural sanitation. In particular, the project's experience in sanitation marketing has pointed out the importance of market research early in the process to inform the design of supply improvement interventions and of linking masons to the supply chain.

Implementation capacity. National-level implementation capacity has improved in all three countries although gaps still remain. District government implementation capacity has improved significantly in Himachal Pradesh and East Java in particular. Capacity has also increased in the ten districts in Tanzania, but this capacity has not been fully utilized, mostly due to the lack of resources. Institutionalized and effective at-scale capacity development systems have not yet been developed with the exception of HP.

Availability of products and services. Baseline findings determined that the availability of sanitation products and services was not a widespread problem in India and Indonesia. HP now allows for freedom of technology options and does not interfere in the market supply of products and services. In India, the TSC guidelines now permit dry latrines, which increases the supply of low-cost options to poor households. In Madhya Pradesh, local governments continued to contract directly with the private sector, limiting the development of sustainable sanitation supply chains. In Tanzania, the program improved the availability of sanplats and latrine construction. However, only an estimated 25 percent of the trained masons are thought to be active.

Financing and incentives. Although the national government in India continues to provide impressive financing for rural sanitation, insufficient finance has been allocated to meet the rural sanitation MDGs in Indonesia and Tanzania. In Indonesia, substantial increases in local government allocations were observed in East Java. In addition, the development of medium-term strategic sanitation plans correlated with higher sanitation investment levels.

Cost-effective implementation. As of 2010, there is no agreement on the measures of program effectiveness for which cost information should be collected nor are there systems to collect this information. However, outcome-based goals are being increasingly used to assess effectiveness. HP has adopted a local government benchmarking system that includes several cost-effectiveness measures (e.g., cost per ODF community) and in East Java, an award system has encouraged the collection and use of cost-effectiveness data. The state government in MP collects some cost data, but does not use it to inform decision-making.

Monitoring and evaluation. India remains the only country with a functional national system for monitoring sanitation progress although it is primarily a supply-side monitoring system. All three countries rely on ad hoc surveys, periodic evaluations, and occasional studies to monitor progress in the absence of a national system that measures both inputs and outcomes.

Conclusions

Four overall conclusions emerge from the 2010 enabling environment endline assessments:

- Although state-of-the-art knowledge on how to strengthen the enabling environment for rural sanitation is still a work in progress, an assessment of progress between the 2007 baseline and the 2010 endline strongly suggests that the countries with the strongest enabling environment made the most progress. HP is a prime example.
- An explicit focus on the rural sanitation sub-sector focuses attention on the specific issues required to strengthen the enabling environment.
- The findings support the hypothesis that local government can serve as the centerpiece of an at-scale rural sanitation program.
- Although all components of the enabling environment are important, not all are equally amenable to external intervention and therefore take time to address. External agencies have less influence, for example, in strengthening political will than in strengthening implementation capacity.

Specific conclusions by dimension include the following:

Policy, strategy, and direction

- Policy frameworks and improved strategic planning will only have impact if accompanied by political commitment and the concomitant allocation of financial and organizational resources. Political commitment is, however, a reflection of wider governance issues that are often beyond the ability of one organization like WSP to influence and instead may require a more strategic approach in partnership with other key stakeholders.

Institutional arrangements

- Local government can serve as the centerpiece of the at-scale service delivery model for implementation arrangement for scaling up rural sanitation, but must operate within a supportive policy environment and have adequate financial resources.
- The ability of local government to be the centerpiece is linked to the overall decentralization process in a country, especially the degree to which local government has real authority and access to its own resources. If local government is inherently weak, strengthening its capacity in just one area (such as rural sanitation) will be challenging. Nevertheless, this is still a more promising approach than relying on NGOs, which do not work at large scale.
- Any national institutional arrangement must include a lead agency with responsibility for coordinating the efforts of other agencies and the capacity to play a leadership role.

Program methodology

- With the exception of Madhya Pradesh, there is broad acceptance of the total sanitation and sanitation marketing methodology in the project sites. The national polices and strategies in India, Indonesia, and Tanzania have all adopted the methodology due in part to the results achieved in the project.

- To reduce the lag time between getting the results of market research and launching supply and demand interventions, market research should take place at the very beginning of the programs.

Implementation capacity

- Although implementation capacity has improved significantly, only HP has begun to develop a sustainable capacity-development system. Without such a system, scaling up to other regions and districts will be difficult. The development of a capacity-development system will likely come later in the process, once there is sufficient support and momentum for implementation at scale.

Availability of products and services

- Supply improvement interventions including the training of masons should be planned only after consumer preference research and supply chain assessment. Consensus exists that the training of masons must be accompanied by the development of local supply chains and a business aggregator function that links demand creation to supply.

Financing and incentives

- Insufficient finance has been allocated to meet the rural sanitation MDG targets in Tanzania and Indonesia, despite the substantial increases in local government allocations to rural sanitation observed in East Java. The allocation of national resources is, of course, closely tied to the political commitment to rural sanitation.
- Development and implementation of medium-term strategic sanitation plans, rather than the usual annual development plans, correlated with higher sanitation investment levels and higher resource utilization.

Cost-effective implementation

- Progress in the dimension of cost effectiveness analysis remains elusive. There is neither a standard set of indicators to guide data collection nor as yet any system to collect the information.

Monitoring and evaluation

- A functioning national M&E system will likely be beyond the grasp of most countries in the near future. This should be a high priority for governments and all development partners to work on together. A more practical short-term approach might be an M&E strategy that uses ad hoc household surveys, district-level monitoring systems, evaluations, and annual reviews. This is by no means ideal, but perhaps realistic.

Recommendations

Sequencing of Enabling Environment Interventions

Experience and evidence from the three-year period between baseline and endline assessments indicates a logical sequencing of interventions when introducing the total sanitation and sanitation marketing approach in a country. The first phase includes developing country-specific models including the research required to inform these models and practical and workable M&E systems; building an evidence base and local political commitment that can be used to influence regional and central decision-makers to adopt the program approaches more widely; initiating supply chain development; and improving policy, strategy, and direction accordingly. A second phase would start once the local models have convinced central decision makers and other stakeholders to improve policy, strategy, and direction, and an effective national M&E system is being established. At this point, the other dimensions—finance to support the national strategic plan, institutional arrangements to encourage leadership and coordination, capacity development plans to fill gaps and strengthen weaknesses, and supply chain development and support—become important.

Role of WSP and Other Development Partners

In Indonesia and Tanzania especially, WSP played a lead role in supporting government efforts. Ideally, a scaling up rural sanitation program should be managed by the lead government agency responsible for rural sanitation from the outset. However, this is not a realistic goal in many countries in the early stages because lead agencies often lack the management and organizational capacity to manage a large-scale effort, including the financial management and procurement systems needed for efficient program implementation. In effect, the degree of support from WSP or another external agency can be viewed on a continuum and must be situation specific. The goal is for the lead government agency to manage the overall effort. In countries where the lead agency lacks staff capacity, systems, and resources, a focused effort should be made to develop this capacity, with WSP or other development partners transitioning to an advisory and coaching role. This process is now happening in India, Indonesia, and Tanzania where WSP's role has evolved as needed and appropriate.

Contents

Abbreviations and Glossary

APL	Above Poverty Line
BAPPENAS	National Planning Agency
BPL	Below Poverty Line
CBO	Community-Based Organization
CLTS	Community-Led Total Sanitation
CRSP	Central Rural Sanitation Program
DDWS	Department of Drinking Water Supply
DLM	District Level Monitoring (program of TSC)
GoI	Government of India
GP(s)	Gram Panchayat(s), local political body
HP	Himachal Pradesh
HWWS	Handwashing with Soap
IE	Impact evaluation
IEC	Information, Education and Communication
JMP	WHO-UNICEF Joint Monitoring Program for Water Supply and Sanitation
MDG	Millennium Developmental Goals
M&E	Monitoring and evaluation
MKUKUTA	Swahili acronym for National Strategy for Growth and Reduction of Poverty
MoHSW	Ministry of Health and Social Welfare
MP	Madhya Pradesh
NREGA	National Rural Employment Guarantee Act
NGO	Non-Governmental Organization
NGP	Nirmal Gram Puraskar (Clean village award)
ODF	Open Defecation Free
Panchayat	An elected body at village level
PHAST	Participatory Hygiene and Sanitation Transformation
PPSP	Accelerated Sanitation Development of Human Settlements (Bahasa acronym)
PRD	Panchayat and Rural Development Department
PRI	Panchayati Raj Institutions (local government system)
RDD	Rural Development Department
RSM	Rural Sanitary Mart
RSP	State Rural Sanitation Program
STBM	Community-Led Total Sanitation (Bahasa acronym)
SUSENAS	Indonesian National Socioeconomic Survey
SWSM	State Water and Sanitation Mission

TSC	Total Sanitation Campaign
TSSM	Total Sanitation and Sanitation Marketing
UNICEF	United Nations Children's Fund
WHO	World Health Organization
WASH	Water, Sanitation and Hygiene
WSDP	Water Sector Development Program
WSP	Water and Sanitation Program

References

This report synthesizes findings from enabling environment endline studies conducted in India, Indonesia, and Tanzania, and draws on enabling environment baseline studies and additional research conducted by WSP. These related reports are available at www.wsp.org/scalingupsanitation.

- *Building the Capacity of Local Governments to Scale Up Community-Led Total Sanitation and Sanitation Marketing in Rural Areas* (WSP: Rosensweig; 2010)
- *Enabling Environment Baseline Assessment: Three Country Synthesis* (WSP: Rosensweig; 2008)
- *Enabling Environment Endline Assessment: India* (WSP: Robinson; 2011)
- *Enabling Environment Endline Assessment: Indonesia* (WSP: Robinson; 2011)
- *Enabling Environment Endline Assessment: Tanzania* (WSP: Robinson; 2011)
- *Political Economy of Sanitation* (WSP Sanitation Global Practice Team; 2011)

I. Introduction

The Water and Sanitation Program (WSP) has provided technical assistance to support government efforts to scale up rural sanitation since 2007 through Scaling Up Rural Sanitation (TSSM). One of the central objectives of this initiative is to learn how to improve rural sanitation at a scale sufficient to meet the 2015 Millennium Development Goal for sanitation in Indonesia, Tanzania, and the states of Himachal Pradesh (HP) and Madhya Pradesh (MP) in India, and to then use the lessons learned to help replicate policy, programmatic, and service delivery approaches in other countries.

Endline assessments of the programmatic and institutional conditions (referred to by the project as the *enabling environment*) needed to scale up, sustain, and replicate the total sanitation and sanitation marketing approaches were conducted in all three countries: East Java province in Indonesia; ten districts in Tanzania; and Himachal Pradesh and Madhya Pradesh. Separate endline assessment reports have been completed on improvements in the enabling environment in all three countries.

Baseline assessments of the enabling environment were conducted in late 2007 during the start-up phase of the overall project. The baseline assessments identified weaknesses in the enabling environment in each country and made concrete recommendations for WSP technical support to help address these gaps. These recommendations were incorporated into WSP work plans in each of the countries. Although WSP facilitated the implementation of these recommendations, the process involved broad stakeholder involvement with the government and development partners involved in rural sanitation.

Enabling environment endline assessments were carried out three years later, between July and November 2010, following a one-year extension of the project from its original end date.

The purpose of the endline country assessments was to:

- Assess the extent to which the enabling environment for scale up and sustainability improved by 2010;
- Recommend what should be done to address any gaps identified by the assessment during the remainder of the project implementation period, or in the future if a follow-on project is undertaken; and
- Determine whether an appropriate enabling environment is in place to meet the 2015 MDG sanitation target, and assess whether these conditions are likely to be sustained.

The fundamental determination that the endline assessment should clarify is if the enabling environment in each country has been institutionalized to support scaling up in a sustainable manner, and whether that scale up can continue after 2010: without assistance, with less assistance, or with different assistance from the project.

The purpose of this report is to synthesize the key findings, conclusions, and recommendations from these three assessments to provide guidance and insight for other countries seeking to create large-scale sustainable rural sanitation programs.

II. Assessment Framework

To improve the comparability of the findings from the three country assessments, a common assessment framework was developed by WSP. The assessment framework consists of eight dimensions that were considered essential to scaling up, sustainability, and replication of the project approaches to sanitation improvement in rural areas:

- Policy, strategy, and direction
- Institutional arrangements
- Program methodology
- Implementation capacity
- Availability of products and services
- Financing and incentives
- Cost-effective implementation
- Monitoring and evaluation

2.1.1 Policy, Strategy, and Direction
Establishing a shared vision and strategy 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 at 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."[1]

2.1.2 Institutional Arrangements
In order for the total sanitation and sanitation marketing approaches to be scaled up, the right institutions must be in place with all key roles and functions covered and clearly understood. These institutions must also have the resources to carry out their roles. In addition to clear roles and responsibilities, institutional arrangements include the mechanisms for actors at all levels to coordinate their activities and establish partnerships between the public, private, and non-governmental organization (NGO) sectors, and between communities and local governments.

2.1.3 Program Methodology
The program methodology consists of the program rules along with specific activities and 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 programmatic condition.

2.1.4 Implementation Capacity
Institutions at all levels must have the capacity 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.

2.1.5 Availability of Products and Services
The ability of target consumers to adopt the promoted behavior(s) is highly dependent on the existence and availability of products and services that respond to consumer preferences and consumers' willingness and ability to pay for them. Any and all relevant products and services need to be considered, specific to each country situation. [NB: As each project area will be conducting market surveys and market analysis in conjunction with the private-sector partners, this assessment dimension will be dealt with in broad, general terms with a focus on the government's role and its policy implications.]

2.1.6 Financing and Incentives
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 line items in budgets for program and promotion activities.

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[1] Elledge M, F. Rosensweig, and D. Warner. 2002. *Guidelines for the Assessment of National Sanitation Policies,* EHP Strategic Report 2, July 2002.

2.1.7 Cost-Effective Implementation

While 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. Therefore, the focus in this assessment category is to ensure that systems and procedures for collecting cost information exist.

2.1.8 Monitoring and Evaluation

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.

Definition of Scale-up: Increase the scale, rate of provision, and sustainability of sanitation services to reach the project targets and help countries reach MDG targets for sanitation by 2015 (see Table 1).

The country assessments were carried out over a three-week in-country visit by a single consultant. The assessment methodology consisted of a review of documents, interviews with key informants, and field visits for reality testing. Terms of Reference for carrying out an enabling environment endline assessment are available from WSP.

TABLE 1: PROJECT AREAS AND NUMBER OF BENEFICIARIES

Program areas (population)	People without access to sanitation in (2006 estimate)*	People who will gain access to sanitation during three-year program (estimate)	Additional access to sanitation needed to meet 2015 MDG Targets**
Tanzania (26.7 million rural)	14.25 million	0.75 million	6.5 million
East Java, Indonesia (36.5 million)	18.60 million	1.40 million	10.0 million
HP, India (5.5 million rural)	4.30 million	0.70 million	1.2 million
MP, India (45 million rural)	43.60 million	1.10 million	20.0 million
Total	80.75 million	3.95 million	37.7 million

* Best estimates given poor data
** Allowance made for population growth

III. Summary of Country Projects

This section provides a brief summary of each country project and the baseline findings to establish the context for the enabling environment endline assessment findings and recommendations.

3.1 Indonesia—East Java

WSP supported local governments to implement TSSM in the province of East Java. East Java had a sizable population that made "at scale" meaningful by Indonesian standards and contained 20 percent of the country's poor population. If the approach proved successful in East Java, stakeholders could not easily dismiss the results, thus improving the prospects for countrywide scale-up. In 2007, Lumajang District in East Java was the most prominent success story of the CLTS experience in Indonesia, and key stakeholders from East Java (including several local doctors) were among the most prominent and vocal supporters of new approaches to sanitation development as a preventive health intervention.

In addition, East Java is not covered by the US$275 million World Bank-supported WSLIC-3 (PAMSIMAS)[2] project, currently the largest rural sanitation and hygiene improvement program in Indonesia. PAMSIMAS includes a US$25 million component for *improving sanitation and hygiene behavior and services*, based on a similar program design and methodology to TSSM. PAMSIMAS was originally intended as the vehicle for scaling up the implementation tools developed and field tested by TSSM.

The main findings of the 2007 baseline study were that CLTS interventions have built significant policy consensus and support for implementation, but that inter-ministerial issues had limited political commitment and impeded the scaling up of rural sanitation improvement. A draft rural sanitation strategy was under preparation and PAMSIMAS was due to introduce the project methodology in 15 provinces. While central ownership of rural sanitation activities appeared low, intensive promotional efforts at the district level in East Java had produced strong local commitment. The baseline assessment identified severe capacity constraints in the rural sanitation sub-sector— lack of capacity building sanitation facilities in rural areas, lack of knowledge of CLTS and sanitation marketing, and limited allocation of district finance for rural sanitation activities.

TSSM in Indonesia covers all 29 districts of East Java province. Building on prior CLTS successes in East Java, the WSP Indonesia team conducted a series of district TSSM roadshows to explain the project, generate demand, and encourage district administrations to commit resources to the project. Districts that wanted to participate in the project submitted formal letters of intent confirming that they would like to take part in the project and were willing to finance district implementation activities (beyond the training and support activities financed through the project).

The plan was to build institutional capacity of local government personnel in 29 district governments through hands-on CLTS triggering in 30 communities in each district (a total of 870 communities across the 29 districts) over the duration of the project, with the intention of achieving a minimum of 300 open defecation free communities. Between 2007 and 2010, local governments accepted TSSM interventions and triggered around 2,500 more communities than originally targeted. Approximately 1,500 communities became ODF by the 2010 endline.

Key project components were as follows:

1. Project roadshows and ownership workshops for selection of districts, sub-districts and villages.
2. Identification of project institutional framework and technical assistance agencies.
3. Sanitation market assessment, development of local supply improvement program, and implementation of supply improvements.
4. Capacity building of local government agencies, local sanitation service providers, community organizations to undertake their program roles.
5. Development and implementation of demand-generation activities for sanitation and hygiene improvement through both community-level initiatives and mass media channels.
6. Monitoring and evaluation, documentation, and dissemination of lessons learned.
7. Development of five-year strategic sanitation plans with districts for scaling up rural sanitation district wide.

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[2] Third Water and Sanitation for Low Income Communities Project (also known as PAMSIMAS)

3.2 India—Himachal Pradesh and Madhya Pradesh

In India, WSP supported the implementation of the Government of India's Total Sanitation Campaign (TSC) in the states of Himachal Pradesh and Madhya Pradesh, with the aim of achieving universal rural sanitation coverage. The intended project outcome was increased access to sustainable sanitation services for 700,000 people in HP and 1,200,000 people in MP.

The pre-existence of a large-scale, national rural sanitation program such as TSC was a key difference between the project methodology in India and that in Tanzania or Indonesia. TSC is a huge and ambitious program—the 2007 budget exceeded US$3.9 billion—with a goal of achieving open defecation free status across the country and providing toilets to 115 million households by 2012. TSC, which started in 1999, has provided broad financial, policy, and institutional framework for sanitation improvement in India, but allows individual states and districts the freedom to develop local policies and interventions according to their specific needs and priorities. This freedom limits central control of program methodology, but allows more progressive local governments to develop and implement new approaches and policies. As a result, there is a wide variation in the effectiveness and outcomes of TSC in different states.

The starting contexts were different, with HP recognized as a small, relatively progressive, and wealthy state, and MP as one of the largest and least developed states in India. Access to improved sanitation in HP was marginally above average prior to the program, with 28 percent sanitation coverage reported in 2001. About 380,000 toilets were built through subsidy-based programs in the 1990s: the Central Rural Sanitation Program (CRSP) and state Rural Sanitation Program (SRSP) provided up-front hardware subsidies of Rs 1,700–2,000 (US$34-40) per household toilet, but a 2003 rapid assessment in six districts[3] found that these supply-driven programs resulted in toilet usage of only 20-30 percent, with some surveys reporting usage as low as 15 percent,[4] indicating that there was little sustainable impact on sanitation coverage during this period. TSC online monitoring data suggest that sanitation coverage began to rise fairly rapidly from 2005 onward, reaching around 39 percent in mid-2007. While little large-scale latrine usage data were available at baseline, TSC district level monitoring surveys from early 2007 suggested

that latrine usage was above 90 percent in HP. It was therefore assumed that most of these new latrines provided sustainable access to improved sanitation.

Access to improved sanitation in MP was particularly low prior to TSC. The 2001 Census reported 8.9 percent rural sanitation coverage, while other surveys suggested that this figure may have been an overestimate. A number of districts in MP face water scarcity problems, which further inhibits sustainable use of sanitation facilities and improved hygiene behavior, as a reliable water supply is often required for anal cleansing, toilet flushing, and handwashing. In addition, the social and cultural challenges faced in the tribal belts have led to dependence on handouts and supply driven approaches that tend to be ineffective in generating sustainable sanitation behavior change. TSC online monitoring data suggest that sanitation coverage began to rise from 2002 onward, reaching around 30 percent in mid-2007. Although little large-scale latrine usage data were available at baseline, TSC district-level monitoring surveys found that latrine usage was only around 50 percent in MP. Both states faced a huge sanitation challenge, but it was clear that the larger challenge was in MP.

At the 2007 baseline, the institutional arrangements in MP were due to change with responsibility for the TSC planned to shift form the Public Health Engineering Department (PHED) to the Rural Development Department. This shift was aimed at increasing focus on collective sanitation outcomes and less the supply-driven and technology driven approaches favored by the engineers from PHED. UNICEF had been a significant partner in MP and was promoting somewhat different policies and programs. Sanitation marketing had been limited to the production of production centers and sanitary marts that supply government-designed latrine models based on the BPL cash incentive.

Although TSC has been operating since 1999, it has promoted the elimination of open defecation and the achievement of collective sanitation outcomes only since the introduction of the complementary *Nirmal Gram Puraskar* (NGP) awards in 2004. TSC and NGP guidelines have provided a well-understood framework for sanitation and hygiene improvement, with most state and district governments now actively engaged in rural sanitation promotion and sanitation-related activities.

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[3] Strategy for Total Sanitation in Himachal Pradesh, 2005.
[4] Ibid.

Prior to TSSM, WSP had already established a good relationship with the governments of HP and MP; through TSSM, WSP supported TSC in both states, working to leverage TSC resources and sector opportunities at the national level, extend pre-existing engagements at the state level, and facilitate achievement of TSC objectives and outcomes.

3.3 Tanzania

In Tanzania, TSSM supported implementation by the national government and local governments in ten project districts. TSSM worked through national programs such as the National Water Sector Development Program (WSDP). The intended outcome was increased access to sustainable sanitation services for 750,000 people in Tanzania.

Of the three countries, Tanzania is the only country where both TSSM and a second project managed by WSP, Global Scaling Up Handwashing with Soap (HWWS), were implemented in the same country. Further, of the three countries, Tanzania is the only country where WSP did not have a country office or previous engagements to build on (the WSP office was established in Tanzania in 2006). Thus, WSP spent time at the beginning of implementation to gain commitment and ownership of the TSSM program by national officials and to set up institutional and implementation arrangements.

Tanzania had a large-scale sanitation intervention during 1970's *Mtu ni Afya* (Healthy Man) campaign, which is largely credited with achieving high basic latrine coverage. The high coverage remains with about 88 percent of households having access to a latrine. However, most of these facilities are of low quality and do not meet today's JMP standards. Rural sanitation had been relatively neglected since the campaign ended although use of latrines is high where they exist. At the time of the baseline in 2007, the fragmented nature of subsector roles and responsibilities and the limited finance allocated resulted in relatively little progress or innovation.

Participatory Hygiene and Sanitation Transformation (PHAST) had been the main promotional tool used in Tanzania until 2007, but more targeted approaches such as Community Led Total Sanitation (CLTS), which was already commonplace in South Asia, were relatively unknown and unused. MoHSW has been one of the main implementers of PHAST, which was used in both its Health Village and Environmental Health and

Sanitation programs. By late 2007, international NGOs such as Plan and WaterAid had begun to pilot interventions using elements of the CLTS approach, and WaterAid also included elements of a sanitation marketing approach in its Mtumba interventions. However, there had been no large-scale efforts to implement either a total sanitation or sanitation marketing approach in Tanzania prior to 2007.

The enabling environment for rural sanitation was not well developed at the 2007 baseline. The national government allocated low priority to sanitation and hygiene. There was no national program for sanitation and hygiene improvement, although the first phase of the twenty-year Water Sector Development Program had been launched in 2007. Sanitation and hygiene components were in most integrated rural WASH interventions. Nor was there a policy framework or detailed guidelines for sanitation and hygiene improvement. The main strategic development document was MKUKUTA-1, which assumed 80 percent basic rural sanitation coverage in 2005, and set a target of 95 percent rural sanitation coverage, which could be improved or unimproved, to be achieved by 2010.

There was also no clear lead agency for sanitation and hygiene, and no effective single body to coordinate the activities of the four relevant ministries. District Water and Sanitation Teams had been established in most areas, usually under the chairmanship of the District Executive Director and managed by the District Water Engineer, but team activities were largely project-driven. NGOs were leading WASH activities in several districts, with local governments often highly dependent on these external agencies for finance, project supervision, and technical support.

The baseline assessment also found that, while PHAST and hygiene education capacity were extensive, it was not effective in promoting behavior change at scale. WSDP funds had not yet reached project districts, but it was expected that each district would receive US$20,000 per year for sanitation and hygiene promotion between 2007–2010, during first phase of TSSM. There was no sanitation incentive scheme in operation. Few sanitation or hygiene products and services were available in rural areas and, despite high coverage of traditional pit latrines, sanitation demand was low and sanitation markets were reported to be underdeveloped.

IV. Analysis by Dimension

The following section provides a synthesis of changes in the enabling environment between the baseline and endline assessment, reviewing progress in each of the three countries for each of the eight dimensions specified in the framework. The baseline assessments identified gaps and action steps for each country. The endline assessment assessed how well these gaps were addressed.

4.1 Policy, Strategy, and Direction

Description: Establishing a shared vision and strategy 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 at 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." [5]

Key Findings

- The most significant areas of change were the ongoing development of improved sanitation policy frameworks in Indonesia and Tanzania, and improved strategic planning for rural sanitation in Himachal Pradesh, Indonesia, and Tanzania.
- Limited impact on political commitment was evident, with rural sanitation remaining a relatively low government priority in all project areas with the notable exception of Himachal Pradesh
- Tanzania showed the most progress since baseline—improving vision, policy framework and strategic planning—but started from a low base and remains well behind both Himachal Pradesh and Indonesia.
- No progress in policy, strategy, or direction was evident in Madhya Pradesh.

4.1.1 Shared Vision for Rural Sanitation

India and Indonesia both had visions for 100 percent Open Defecation Free (ODF) status or universal latrine access at baseline, but Tanzania lacked a long-term vision for rural sanitation. Some improvements have taken place, including some extension and strengthening of the visions in India, Indonesia, and Tanzania.

The Government of India's *Nirmal Bharat* (Clean India) vision of access to toilets for all by 2012 drove the comprehensive and well-financed Total Sanitation Campaign (TSC) since before the 2007 baseline. However, sanitation is a state subject. At baseline, the Government of Himachal Pradesh was committed to achieving an Open Defecation Free (ODF) state, *Nirmal Himachal* (Clean Himachal), by 2009, but later extended the target date to the end of 2010 and pushed hard to realize this vision. The Government of Madhya Pradesh, recognizing its relatively low sanitation coverage at baseline, conformed to the national vision of access to toilets for all by 2012, but provided less direction and support than needed to realize this ambitious vision.

The Government of Indonesia has also recognized the importance of meeting sanitation targets, although its shared vision lacks the substance provided by a corresponding national sanitation program. At the baseline in 2007, the 2005–2009 National Development Plan reflected government enthusiasm for the newly introduced and promising total sanitation approaches, including the ambitious goal of becoming 100 percent ODF by 2009. The 2010–2014 national development plan includes the same goal—postponed by five years—but more substantive supporting policies, strategies, and programs now strengthen this shared vision.

At the time of the baseline in 2007, the Government of Tanzania reported 80 percent basic rural sanitation coverage, and had set a medium-term target of 95 percent access to basic sanitation by 2010. However, *basic* sanitation implies access to any facility and not necessarily an improved one. In addition, definitions used across the country varied and no specific mention was made of sanitation development goals in the Tanzania Development Vision for 2025. At endline in 2010, the recently released National Growth and Poverty Reduction Strategy 2011–2015 (MKUKUTA-2) included a national *improved* sanitation target of 23 percent, mentioned TSSM as a method, and was being used as a basis for the development of a new national sanitation campaign.

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[5] Elledge et al. 2002

4.1.2 Policy Framework

Significant improvements were found in the sanitation policy frameworks in Indonesia and Tanzania, building on a policy development processes in these countries that started before the baselines. Only minor improvements were visible in India, following successive revisions to the TSC and Nirmal Gram Puraskar (NGP) guidelines, which provide broad policy guidance in the absence of any formal rural sanitation policy.

Following extensive consultations in Indonesia, the draft National Operational Strategy for Rural Sanitation and Hygiene Improvement reviewed at baseline developed into the National Strategy for Community-Led Total Sanitation (STBM)[6], which was approved by the government in 2008. STBM adopts a broader concept of total sanitation than in the previous draft strategy, requiring a totally sanitized community to be open defecation free, but also that everyone washes hands with soap, treats drinking water and handles food safely, properly disposes of solid waste, and safely disposes of household wastewater. Nevertheless, STBM retained important elements of the previous draft strategy, including that no subsidies should be provided for the construction of basic sanitation facilities. The inclusive and open process generated good government ownership and commitment to the new policy framework, with the result that the STBM strategy has now been incorporated into the previously urban-focused US$1.6 billion Accelerated Sanitation Development Program (PPSP).

In Tanzania, a long policy development process led to the circulation of a draft National Sanitation and Hygiene Policy in mid-2010, with the policy still pending finalization at the time of the endline assessment. A key element of the draft policy is the definitions proposed for different types of improved sanitation facilities, which mirror the categorizations used by the UNICEF-WHO Joint Monitoring Program for Water Supply and Sanitation (JMP) although the JMP definition is now in use through its inclusion in MKUKUTA II. This should resolve previous monitoring issues caused by the inability of household sanitation surveys in Tanzania to differentiate between hygienic (improved) and unhygienic (unimproved) sanitation facilities. Importantly, the lower improved sanitation coverage implied by the draft policy has been recognized.

In India, minor revisions were made to the national TSC and NGP guidelines after the baseline assessment in 2007. Most significantly, the TSC latrine incentive available to below poverty line (BPL) households increased fourfold, from Rs 500 (US$12) in 2006 to Rs 2,200 (US$48) at endline. This dramatic increase had little impact in Himachal Pradesh, where the state government continued its policy of using BPL incentive funds to reward households after construction and usage, in addition to using its own funds to provide multiple incentives and awards for collective sanitation outcomes, school sanitation outcomes, and sanitation achievements by individuals and women's self-help groups. In contrast, the Government of Madhya Pradesh did not utilize the BPL incentive funds within the spirit of the TSC guidelines, which requires that incentives are only provided to BPL households after latrine construction. Instead funds were re-directed from other programs to enlarge the latrine construction subsidy and extend it to some above poverty line (APL) households. In part due to these policy differences, MP did not experience the same success as in HP.

4.1.3 Strategic Planning

Strategic planning was the most successful area of the policy, strategy, and direction dimension. Only Madhya Pradesh failed to make any significant progress in strategic planning for rural sanitation improvement. This is significant, since at baseline strategies to implement visions were generally lacking.

In Indonesia, STBM was incorporated into the current five-year national development plan, along with the target of reaching 100 percent ODF status by 2014. However, the development plan allowed for total sanitation interventions in only 27 percent of the 70,000 plus villages in Indonesia, and the draft sanitation roadmap—which maps out plans for reaching the 2014 ODF target and 2015 sanitation MDG—was not available at the time of the endline assessment in 2010.

Achievements in Tanzania include the setting of realistic coverage targets in the MKUKUTA-2 national development strategy using the JMP definition, and approval of funding

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[6] Bahasa Indonesia acronym (Sanitasi Total Berbasis Masyarakat).

for the Water Sector Development Program (WSDP) that will provide US$20 million for a national sanitation campaign and school sanitation program, with the aim of reaching 1.3 million households across the country by 2015.

Rapid sanitation progress in Himachal Pradesh has enabled a more strategic approach, as rising coverage has exposed pockets of poor governance, inaccessible communities, unusual physical conditions, and local resistance. The state government has learned from the cost-effective strategies developed by the more successful districts, and has encouraged a phased strategy to sanitation development: first focusing on achieving ODF status across sub-districts, then using the social and political capital from these successes to drive higher level sanitation improvements and encourage NGP applications. In Madhya Pradesh, a few districts have performed well, but there was no evidence of a statewide strategy or of any systematic replication or promotion of more effective policies and strategies for rural sanitation.

4.1.4 Political Commitment
Political commitment is critical to effective and large-scale progress in rural sanitation. A comprehensive enabling framework for rural sanitation is of limited value if senior government officials and their political chiefs have other priorities, and resource and finance allocations are independent of program performance. But while regularly cited as a key enabling (or disabling) factor, political commitment is difficult to identify or measure. The endline enabling environment assessments did not discover a definitive indicator of political commitment.

In general, the assessments found that there had been little change in political commitment to rural sanitation since the 2007 baseline. The national governments in all three project countries still attached a far higher priority to rural water supply than to rural sanitation, and valued primary health care, and other more high-profile aspects of preventive health care, above sanitation and hygiene improvement. Sector officials and their development partners had often worked hard to develop improved policy and strategy instruments, but had had little success in developing a strong enough evidence base or political argument for a shift in national priorities. More political success was apparent in Himachal Pradesh and in general at local levels, particularly where

decentralization had increased responsibilities for basic services, provided more discretionary funding, and made clear the benefits of more sustainable and cost-effective improvements to basic services.

Sanitation road shows, which highlighted the financial and economic costs of inaction, proved effective in generating local commitment and budget allocations for rural sanitation improvement in East Java province, Indonesia. The road shows are advocacy events conducted early in the program to explain the project, generate demand, and encourage district administrations to commit resources. Only ten districts committed local funds to implementation in the first year of the project, but by the 2010 endline, after seeing the results in the first 10 districts, all but one of the 29 districts in East Java had implemented interventions using their own funds, and most had committed to support further rural sanitation interventions without WSP or other assistance. An annual sanitation award presented to the elected leader of the best performing district, and widely publicized by the Java Post newspaper, was instrumental in spreading interest beyond the initial champions to capture the attention of influential local politicians.

However, after several years of successfully building political commitment and steadily raising the priority given to rural sanitation in East Java, another election cycle began, shifting attention and funds to more populist political agendas, and empowering new leaders who had little understanding of or interest in sanitation. A similar cycle occurred at national level. During the early phase of the project, growing evidence of the effectiveness and scalability of total sanitation approaches in Indonesia encouraged senior government officials to support progressive rural sanitation policies and strategies, and incorporate these new approaches into large-scale programs. But these national champions for rural sanitation were then promoted, or retired, and the sub-sector took a backward step as new individuals with different perspectives, experiences, and priorities assumed responsibility. In addition, there is growing political interest in improving urban sanitation, thus diluting the political commitment to rural sanitation.

In India, the large central programs for rural sanitation show national level political commitment to improved sanitation, but make political commitment at the state

level harder to discern. While increasingly large sums have been allocated to the TSC and NGP programs, these increases may reflect popular pressure for pro-poor subsidies more than priority for rural sanitation. State governments contribute to the TSC and NGP programs, but these contributions are fixed by central government with little flexibility, making them poor indicators of local political commitment.

The use of discretionary state and local government funds, and of regular and detailed performance monitoring, are better indicators of local commitment. The Government of Himachal Pradesh has spent US$500,000 on its successful state sanitation awards, and the Chief Minister holds weekly reviews of TSC progress; whereas the Madhya Pradesh state sanitation award has never been awarded, and state-level monitoring reviews are far less detailed and less frequent. In addition, the TSC was previously rated by the state government as the fourth most important rural development program in HP, but at the 2010 endline was considered second only to the National Rural Employment Guarantee Act (NREGA), whereas no change in priority for rural sanitation was evident in MP.

In Tanzania, little central government funding is earmarked for rural sanitation, and the government promptly reallocated some of the funds designated for rural sanitation to rural water supply activities when unexpected costs caused a financial shortfall. Sector commitment to rural sanitation is improving, as evidenced by stronger policy and coordination frameworks, but high-level political awareness and commitment remained limited at the time of the endline assessment.

4.2 Institutional Arrangements

Description: In order for the total sanitation and sanitation marketing approaches to be scaled up, the right institutions must be in place with all key roles and functions covered and clearly understood. These institutions must also have the resources to carry out their roles. In addition to clear roles and responsibilities, institutional arrangements include the mechanisms for actors at all levels to coordinate their activities and establish partnerships between the public, private and non-governmental organization (NGO) sectors, and between communities and local governments.

Key Findings
- Fragmented responsibility for rural sanitation and hygiene increased the importance of clearly defined roles and responsibilities, and of effective coordination between government and external support agencies.
- Local governments in all three countries, especially in East Java and Himachal Pradesh have demonstrated that they can serve as the focal point for a large-scale service delivery model for rural sanitation.
- Effective coordination was an important success factor, but was driven more by political priority than by the nature and composition of the coordination mechanisms.
- Annual strategic reviews were the biggest area of improvement, both because this area is trackable, and because joint strategic reviews had significant impacts on policy, programming and practice.
- The resource agencies contracted to provide support to the projects performed well, but were in short supply, indicating that similar support may not be available to larger-scale programs.
- Tanzania improved most since baseline, with evidence of progress in almost every aspect of the institutional arrangements, although its low starting position means that more work is needed to develop this area of the enabling environment.

4.2.1 Clear Roles and Responsibilities

The broad mix of health, infrastructure, behavior change, community development, and service delivery elements required for effective rural sanitation and hygiene improvement tend to result in highly fragmented institutional arrangements, with roles and responsibilities often split between several government ministries and departments. Furthermore, the limited historical priority given to rural sanitation means that these roles and responsibilities are rarely adequately defined or undertaken, leading to frequent gaps, overlaps, and coordination problems.

In India, the huge budget attached to the nationwide Total Sanitation Campaign (TSC) has encouraged well-defined roles and responsibilities, with the Department for Drinking Water and Sanitation (DDWS) allocating large sums to district projects according to detailed TSC guidelines. However, since sanitation remains a state responsibility, different institutional arrangements are found at state level depending on the historical context and the priority allocated to sanitation.

Increased central monitoring requirements encouraged the state governments in Himachal Pradesh and Madhya Pradesh to strengthen the TSC units at state and district level, but there remained some latitude in the institutional arrangements adopted by the district implementation projects. In Himachal Pradesh, the no-subsidy policy encouraged district governments to partner with local NGOs with experience in behavior change programs; whereas the more supply-driven policy adopted in Madhya Pradesh encouraged district governments to implement largely through local construction contractors. The TSC guidelines provide the flexibility for each district government to select the most cost-effective and appropriate implementation arrangements for its particular situation—in Himachal Pradesh, high political priority, close monitoring, and progressive policy led most districts to develop effective arrangements and surpass targets; whereas the lower priority, less reliable monitoring, and less effective policy in Madhya Pradesh resulted in supply-driven arrangements with disappointing results.

Less progress was made on developing the institutional arrangements for rural sanitation in Indonesia. Both at the 2007 baseline and at the 2010 endline, the Ministry of Health held the main responsibility for rural sanitation improvement, with the national sanitation working group the main coordination mechanism. The Ministry of Public Works manages several important rural WASH programs, yet policy alignment and effective coordination between the two ministries remains limited. Primary responsibility for rural sanitation has been delegated to district governments. The project has therefore focused largely on improving institutional arrangements at district level, using provincial resource agencies to build local capacity for rural sanitation improvement.

At baseline, the Water Sector Development Program (WSDP) provided the main institutional framework for rural sanitation improvement in Tanzania. Despite the sector-wide approach encouraged by the WSDP, rural sanitation responsibilities were split across four ministries. One of the biggest improvements in the enabling environment resulted from a Memorandum of Understanding signed by these four ministries in 2010, establishing a comprehensive national coordination structure and clarifying the roles and responsibilities of each agency.

Two specific institutional issues that were observed are the need for a designated lead agency with the capacity to carry out its mandate and the potential for conflict of interest.

Lead Sanitation Agency

Explicit designation of a lead agency for rural sanitation can be considered an objective indicator of the enabling environment. Without a designated lead agency, there is unlikely to be a driving force that holds people accountable and monitors progress. It is presumed that a designated lead agency in turn will be held accountable by government and its development partners for progress on rural sanitation improvement, and will assume leadership in *inter alia* coordination bodies, policy and strategy development, and monitoring.

The enabling environment endline assessments suggest that projects such as TSSM often have little influence over high-level institutional arrangements, and that processes to designate or to change designation of a lead agency for rural sanitation are lengthy and difficult. These types of institutional reforms often touch on vested interests and power structures, thus requiring high-level political engagement to change. A shift in rural sanitation leadership was observed in Tanzania, and the implementing agency was changed in Madhya Pradesh. However, both of these reforms were partial, in that other agencies still retain control over important rural sanitation functions, and the new leadership powers have not yet been fully tested.

Conflicts of Interest

Several of the assessments found conflict of interest problems at local levels. In Indonesia, government sanitarians working in rural health posts are tasked with sanitation and hygiene promotion, and with monitoring of sanitation outcomes and disease surveillance. The project also encouraged and trained some of the sanitarians in East Java to become service providers, using their sanitation knowledge and experience to market and sell sanitation products and services to rural households. In Indonesia, government staff is allowed by law to operate businesses. While this approach was welcomed by active sanitarians as a practical way of improving local sanitation outcomes, concerns were raised that the profit motive associated with service provision may conflict with their government responsibility to monitor

and regulate sanitation services, and may result in the promotion of more expensive sanitation options. The project in East Java is now encouraging other local entrepreneurs to become rural sanitation service providers, and is working to develop institutional arrangements that provide adequate separation between the different local functions.

In Madhya Pradesh, the district and block TSC coordinators face constant pressure to achieve ambitious implementation targets set by the state and district governments. These coordinators are also responsible for collecting and entering progress monitoring data into the online TSC system. In the absence of regular or effective checks on the reliability of the monitoring data, village governments and coordinators may either over-report progress in order to meet targets or build latrines that are not used.

4.2.2 Coordination

Effective coordination is important to rural sanitation improvement because of the fragmented nature of the sector. One of the key challenges for the coordination of rural sanitation activities is to integrate coordination mechanisms into formal government systems. Rural sanitation has a relatively low priority in most governments, and usually is a sub-component of larger infrastructure, health or WASH coordination mechanisms. As a result, informal coordination through working groups, donor review mechanisms and program management structures is often the norm. While government generally leads these forms of coordination, the drive and sustainability of the coordination bodies is variable, as is their influence on government policy, strategy and practice.

Formal sanitation coordination mechanisms were operational in both Indian states, but the outcomes were heavily influenced by political priority. In Himachal Pradesh, where the Chief Minister had given priority and specific attention to the TSC in his weekly videoconferences with district administrators, coordination was comprehensive and highly effective. In contrast, the lower priority and attention accorded to the TSC in Madhya Pradesh translated into irregular and ill-attended meetings, many of which were combined WASH meetings that focused largely on water supply issues.

In Tanzania, a new national coordination structure for sanitation and hygiene was approved in 2010, with explicit linkages to formal health, education, and WSDP coordination bodies. While clearly an improvement on the previous coordination arrangements, it remains to be seen how effective and sustainable this coordination structure will be in practice given the limited priority shown to sanitation and hygiene by high-level officials in the lead agency (MoHSW).

The key challenge in Indonesia is coordination between the large central programs managed by different ministries. While there has been some improvement in informal coordination through the sanitation working group, with many sub-sector activities and lessons now planned, monitored and shared through this group, the large programs continue to operate with different objectives, policies, project areas, implementation plans and resource usage. The lack of donor Sector Wide Approach (SWAp) for WASH results in uncoordinated and unharmonized donor programs and contributes to coordination issues by government.

4.2.3 Stakeholder Strategic Reviews

Regular multi-stakeholder strategic reviews are an important way to engage stakeholders. Multi-stakeholder reviews help to build consensus on what is working and what needs to change, and provide critical and timely feedback on progress towards strategic targets.

A recent joint sector review in Tanzania found that the Ministry of Water and Irrigation (MoWI), the main executing agency of the WSDP, was giving insufficient priority and attention to rural sanitation and hygiene due to its primary focus on water supply development, and persuaded the government to transfer responsibility for rural sanitation and hygiene to the Ministry of Health & Social Welfare (MoHSW), including the task of managing the forthcoming national sanitation campaign.

In Himachal Pradesh, WSP supported the state government in the development of a benchmarking system that enabled easy comparison of the rural sanitation performance of the twelve districts. Regular dissemination of the benchmarking reports to the district governments encouraged competition among the best performing districts, and applied pressure to the low performing districts.

In Indonesia, annual cross-district stakeholder learning reviews organized by WSP raised district government awareness of what constituted good and poor performance. Both annual benchmarking evaluations and stakeholder learning reviews were continuing with Java Post and local government funding.

4.2.4 Institutional Incentives

Institutional incentives, including annual awards and performance grants, improved the enabling environment in both India and Indonesia. However, some stakeholders expressed concern about the short-term nature of the benefits of these incentives. The continuing lack of consensus on institutional incentives suggests that more evidence is needed on the short- and long-term effects of different incentive systems.

The *Nirmal Gram Puraskar* (NGP) Clean Village Award is an important element of the enabling environment for rural sanitation in India, encouraging state, district, and village governments to strive for the comprehensive "total sanitation" outcomes required by the NGP criteria.[7] The NGP awards existed at baseline, but the application criteria have since been broadened and improved, and the verification system has been strengthened. Concerns were raised that some villages made short-term efforts to achieve the NGP criteria but that these improved outcomes were not sustained once the awards were made. The incentive payment linked to the NGP award is now made in two installments, with the second installment only released following verification of continued NGP status after six months. The NGP award process is now a huge undertaking, with thousands of applications to be processed and verified every year, and constant improvements and revisions required to tighten the NGP process. Nevertheless, the NGP award process remains the most high profile and important rural sanitation institution in India, with competition over the number of NGP awards received a key driver of political support and interest in rural sanitation.

One of the challenges of the NGP award process is the high standards required by the NGP criteria—village governments have to stop open defecation, achieve 100 percent latrine coverage, provide toilets in all public and private schools, and have functional drainage and solid waste disposal systems.

The Government of Himachal Pradesh decided to focus first on achieving open defecation free (ODF) status and then to work on the higher NGP requirements. As a result of this two-stage process, and the slower demand-led approaches adopted, the NGP success rate has been twice as high in Himachal Pradesh as in Madhya Pradesh, and the sustainability of outcomes has also been higher.

There is no national framework for rural sanitation incentives in Indonesia, although the project was successful in introducing a provincial sanitation award in East Java based on benchmarking data collected from the district governments. Starting in 2009, the Java Post Institute for Pro-Autonomy (JPIP) has made an annual rural sanitation award to the head of the best performing district in the province. The award received significant press coverage through the popular Java Post, and has become an important factor in persuading elected district representatives to give higher priority and attention to rural sanitation improvement.

4.2.5 Resource Agencies

National and regional resource agencies were a strategic input in building local government capacity to implement TSSM in each country. These agencies were typically consulting firms or NGOs that had experience in rural sanitation and the capacity to provide technical assistance and training. The basic approach was for WSP to contract these agencies to build capacity—including efforts to support implementation, extend outreach, develop monitoring systems, and provide specialized activities (such as designing communication strategies and marketing tools). The resource agencies would gradually withdraw support as government capacity increased and/or as governments contracted directly for services from resource agencies. In countries such as Indonesia and Tanzania, where there were few suitable resource agencies, WSP provided some specialized training to develop the capacity of resource agencies.

In Indonesia, as contracts with resource agencies were ending in 2010, districts were coping well with the reduced support, with no discernible slowing of implementation or narrowing of scope, although it was noted that

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[7] All households must have access to and all household members should be using individual toilets or community toilet complexes; all schools and nursery schools must have functional and clean toilets and urinals; open defecation must be eliminated; all public water sources should have proper platforms and drainage around them; and functional systems for solid waste disposal and drainage shall be maintained.

the collection and reporting of monitoring and bench-marking data were less regular without the support of the district coordinators previously provided by the resource agencies. The district governments reported that sufficient finance and capacity were available for implementation, with the challenge being how best to use these resources effectively. Several districts had already used their development budgets to contract private consultants to provide technical assistance and support, which is a very positive development.

In India, district-level TSC projects received sufficient funding to contract support organizations directly, and were able to continue to use grass root NGOs as support organizations, independent of TSSM activities.

4.3 Program Methodology

Description: The program methodology consists of the program rules, specific activities, and 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 programmatic condition.

Key Findings

- Workable program methodologies were demonstrated in all project areas except Madhya Pradesh.
- Evidence is mixed on the effectiveness of program methodologies yet such evidence is critical to building consensus to invest in scaling up and improving these methodologies.
- Tanzania: the 132-district national sanitation campaign will adopt total sanitation and sanitation marketing developed through the 10-district project.
- Indonesia: the 2008 national strategy for community-led total sanitation (STBM) has mainstreamed a broader conception of total sanitation; and key stakeholders such as UNICEF and Plan Indonesia are now developing sanitation marketing interventions.
- India: growing support since baseline for total sanitation and behavior change focused approaches within the sector, but political resistance remains strong in many poorer states, including Madhya Pradesh.
- The greatest progress was made in Tanzania, which developed, implemented and adapted a new program methodology from scratch and, despite only perceived moderate results, succeeded in building support for its adoption by the national program.

4.3.1 Acceptance of Program Methodology

Between 2007 and 2010, improved program methodologies were used in all project areas, with the exception of Madhya Pradesh, where the majority of districts continue to use a supply-driven approach to build toilets through local contractors. In all other project areas, the basic concepts of the program methodology are understood and well accepted by program implementers. In 2007, there was far less acceptance of a demand-responsive approach. Several other states in India continue to resist the total sanitation methodology because the current BPL incentives are considered inadequate.

In Tanzania, TSSM was successful in transforming the dominant program methodology from PHAST (Participatory Hygiene and Sanitation Transformation), which had been shown to have only limited effectiveness, to a combined CLTS and sanitation marketing approach. As noted, a 2010 joint sector review of the most promising methodologies was instrumental in convincing key national stakeholders that the new program methodology was suitable for adoption by the national sanitation campaign.

In Indonesia, support for and implementation of total sanitation approaches had expanded. By 2010, the national strategy for community-led total sanitation (STBM), started in 2008, was informing investment programs and encouraging a mainstreaming of the methodology across all programs. Sanitation marketing remained a less well-known or accepted methodology, but the approach is developing fast and attracting support from key stakeholders such as UNICEF and Plan Indonesia.

4.3.2 Building Consensus on Program Methodology

Credible evidence of the effectiveness of program methodologies is critical to building consensus to invest in scaling up implementation and improving these methodologies.

By 2010, district governments in East Java were using their own budgets to finance implementation of rural sanitation activities, which create incentives for these governments to search out the most cost-effective and sustainable program methodology. The performance benchmarking system in East Java was important in convincing district governments of the advantages of more progressive approaches, which

were further encouraged by annual horizontal learning events that allowed successful district practitioners to share lessons and innovations with their peers.

Despite the strong policy and financing framework provided by the TSC and NGP in India, there remains limited consensus on program methodology among national and state stakeholders. This was evident in moves to increase the already significant latrine subsidies to poor households using funds from other programs, and in suggestions that different approaches would be needed in poorer and more disadvantaged states. Good governance played an important part in the effectiveness of the program methodology in Himachal Pradesh, and poorer states like Madhya Pradesh were reluctant to accept that a similar methodology might work in their less developed and less supportive contexts.

At the time of the endline assessment, no rigorous evaluation of the program methodology had yet been undertaken in Tanzania, and since an effective monitoring system had also not yet been developed, there was limited evidence on effectiveness or sustainability of TSSM approaches. Nevertheless, consensus from a joint sector review that included field trips to TSSM communities was that TSSM approaches had produced significantly better outcomes than previous approaches. The program methodology still needs to be adapted to cover the wide range of circumstances that will be encountered in the 132-district National Sanitation Campaign. In addition, the joint sector review expressed concern that the current sanitation marketing approach was based around one latrine product, suggesting that a broader product range should be incorporated into the program methodology for the national campaign.

4.3.3 Sanitation Marketing

While significant progress was made between 2007 and 2010, the methodology for sanitation marketing continues to lag behind that for total sanitation. In all three countries, the main focus was initially on the training of masons. In India, few of the masons trained emerged as entrepreneurs with the skills to market their services and innovate new products. This was especially true in MP where there was a lack of end-user involvement in design and almost no marketing by the private sector. In HP, a combination of

existing local services and self-supply was sufficient to enable most households to build acceptable latrines.

Similarly, in Tanzania, the focus was on training masons, but few of the masons trained developed the business skills needed to market sanitation products. At the time of the endline, however, a new approach to engage existing hardware businesses that source cement and other materials was being designed.

In Indonesia, 97 percent of the 1,700 masons trained were reported to be inactive or using their skills in other areas. Few of the masons were able to tap into the potential for latrine construction as a business. This may be in part due to the selection process and training, but it is more likely a methodological weakness. The sanitation-entrepreneur model uses a business aggregator approach to connect household demand with material suppliers and service providers. These entrepreneurs employ trained masons to install latrines. This model is new but if successful would be a significant step forward in the development of the sanitation marketing methodology.

From these experiences, several key lessons emerge. First, before supply improvement interventions are implemented, they must be informed by market research. This did not happen in any of the TSSM countries, however. In both India and Indonesia market research results were available about two years after the project began, by which time it was too late. A constraining factor was the cost of carrying out market research and developing a behavior change communication campaign. In East Java, this cost US$200,000. Second, the focus needs to be on developing the supply chain and this is only possible after the market research has taken place, which makes the process fairly long. Third, masons must be linked to the supply chain to be effective.

4.3.4 Methodological Gaps

While the methodology improved between 2007 and 2010, some gaps nevertheless remain. One gap is adapting the methodology to cover a wide range of situations that are encountered in a large-scale program. In Tanzania, an example is how to serve nomadic or semi-nomadic communities such as the fishing camps found along Lake Rukwa and the coast in Rufiji District. In these camps, open defecation

is common and regular outbreaks of diarrheal disease and cholera occur that often spread to nearby communities.

Another example is the safe disposal of infant excreta. In Indonesia, the 2007 baseline assessment identified this issue and at endline the issue had not been addressed, perhaps due to the fact that there was no monitoring of critical hygiene practices. The focus of total sanitation and sanitation marketing was on improved household sanitation facilities and very little, if any, emphasis on safe child-excreta disposal.

4.4 Implementation Capacity

Description: At all levels institutions must have the capacity 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 both monitor program effectiveness and make continual adjustments.

Key Findings
- National level implementation capacity has improved in all three countries although gaps still remain.
- The state governments in Himachal Pradesh and Madhya Pradesh had to develop increased program management capacity as rural sanitation programs scaled up.
- District government capacity in rural sanitation has significantly increased, especially in HP and East Java. Capacity in the ten districts in Tanzania has also increased but this capacity has not always been fully utilized.
- Institutionalized effective and at scale capacity development systems have not yet been developed to enable the scale up to other provinces/states and districts with the notable exception of HP. Large-scale training programs in Madhya Pradesh and Tanzania have produced highly variable results, with the lack of support and monitoring identified as key constraints.

4.4.1 National Level Capacity
National capacity for rural sanitation has improved in all three project countries. However, rural sanitation continues to attract only limited priority and resources within health ministries. National capacity is often constrained by the lack of an institutional home within environmental and preventive health departments that struggle for influence in agencies with a curative and primary health care focus.

In Indonesia, despite the establishment of an STBM secretariat, there remains a shortage of central staff dedicated to rural sanitation. The enormous requirements associated with developing policies, strategies, investment plans, implementation programs, and managing monitoring and evaluation across the huge expanse of Indonesia are beyond the capacity of the handful of dedicated staff working in the Ministry of Health and BAPPENAS, and the limited budget allocated to the STBM secretariat continues to constrain its activities.

The situation is similar in Tanzania, where Environmental Health is one of four preventive health departments in the Ministry of Health; sanitation and hygiene is a division managed by a small overburdened office operating at the lowest level of the organizational hierarchy. The MOHSW focus is on strengthening the health system's capacity to address specific diseases such as HIV/AIDS, malaria, and tuberculosis.

4.4.2 State and Provincial Capacity
In India, the situation is different because of the substantial responsibilities that states have. Few countries have rural sanitation programs that match the scale and scope of TSC and NGP. States have the discretion to use the resources provided by the national level as they want. The significant finance provided by TSC and NGP programs combine with the extensive local government system in India to ensure that both human and implementation resources are more than adequate. State governments in HP and MP have recognized the need for increased management capacity at state level. In part, this reflects increased monitoring and evaluation requirements from the national level. States are responsible for compiling district plans into an annual state implementation plan that is submitted to the national level for approval. In HP there is a dedicated unit in the Rural Development Department (RDD) that manages TSC with an assistant director and five technical and two administrative staff. In MP, the TSC unit has seven technical and 20 administrative staff. In addition, a team of state quality monitors further supports the TSC unit although there is little evidence that these monitors are well used. In addition, three state resource centers in MP have trained large numbers of stakeholders although there is limited evidence these training centers were used effectively.

Although provinces in Indonesia do not have the same level of authority as states in India, provinces are now supporting a

wide range of activities including preparation of district strategies, CLTS refresher training, coordination, monitoring, and financial support of horizontal learning events. In Tanzania, the regions have had virtually no role in rural sanitation.

4.4.3 District Level Capacity

Local government is the centerpiece of implementation in the TSSM approach. Local government is the only structure that covers the entire country, thus making it ideal as a service delivery mechanism for scaling up a national program. However, strengthening the capacity of a local government for a specific function such as rural sanitation must be done within the context of decentralization and the overall capacity of local government. Implementing TSSM in a country like India where local government is generally strong is a very different context from in Tanzania, where local governments are weaker. This is not to say that the approach is only valid in countries where local government is strong. Rather, it is to say that the context must be taken into account as specific local government plans are developed and that these plans must be realistic in what they can accomplish.

In order for local governments to serve as the primary implementation vehicle, their capacity must be developed. Without capable local governments with dedicated staff and adequate resources, the approach will not be successful. Implementation capacity was generally found to be better at sub-national and local levels through significant capacity development efforts through the project. Few local governments started TSSM with the skills and experience to undertake behavior change, total sanitation, and sanitation marketing interventions across their jurisdictions. Consequently, capacity development and additional support were provided in all three countries, primarily through private resource agencies.

WSP has identified seven roles and functions that a local government must carry out to fully support the total sanitation and sanitation marketing approach. These include the following:

- Strategy and planning – development of strategies and operational plans
- Advocacy and promotion – advocacy within the local government, elected officials, community leaders, and local NGOs
- Capacity-building – ensuring that skills are built at all levels
- Supervision – following up on CLTS facilitators and masons and providing support to improve performance
- Monitoring and evaluation/reporting – collecting information on inputs and outcomes and reporting based on agreed upon formats
- Regulation – regulation of private providers of sanitation products and services
- Coordination – ensuring coordination across local government departments and between levels of local government[8]

In Indonesia, by the 2010 endline, many districts had a clear vision and commitment to rural sanitation and had allocated a proportion of their own budgets to rural sanitation, even though it is still a relatively small proportion of their total budgets. Two resource agencies provided training and support in all 29 districts. Districts believed that the capacity development and training provided had been sufficient to generate the core systems and skills required and that they now have sufficient finance and human resources for implementation of rural sanitation activities. However, only a few districts had made a strategic assessment of the resource and capacity requirements required to meet their sanitation targets.

Capacity constraints in East Java remained, however. The key government position of sanitarian to the local health post, with responsibility for sanitation promotion, monitoring, and regulation was understaffed. Provincial health systems suggested that less than 75 percent of sanitarian positions were filled in 2010, putting pressure on community midwives and other health post staff to undertake additional roles. A second capacity constraint is the shortage of sanitation entrepreneurs. The project trained more than 1,700 masons to produce and market sanitation products and services, but only three percent were subsequently found to be active in the sanitation sector, and few of these had developed viable sanitation businesses. A second phase of capacity building focused on developing a cadre of sanitation entrepreneurs with the mix of business skills, technical competence, and dynamism needed to start sanitation businesses and make them successful, but less than ten sanitation businesses had been started at the time of the endline assessment.

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[8] Rosensweig, F. and D. Kopitopoulos. 2010. *Building the Capacity of Local Government to Scale Up Community-Led Total Sanitation and Sanitation Marketing in Rural Areas.* WSP.

Extensive capacity development was undertaken at district and village level in Tanzania, with variable results due to insufficient supporting resources, such as the transport and fuel, to encourage the use of the capacity developed. WSP trained resource agencies and also introduced CLTS and sanitation marketing to the district water and sanitation teams. The resource agencies then trained district government staff as CLTS facilitators and for sanitation supply they trained masons. However, funding released to local government was lower than anticipated, meaning that district and sub-district authorities struggled to conduct progress monitoring or follow-up visits, which eroded the initial enthusiasm of the trained volunteers. In addition, the initial capacity development activities did not provide training to the sub-district or village executive officers, which limited their support until the situation was corrected through efforts to include them in all project activities. And, in the case of masons, only some were actively using their skills to install latrines for households.

In India, in HP and MP, WSP contracted with two experienced national NGOs as resource agencies to build capacity at the state level. Each one was contracted to work in one state and their roles were to train master trainers and district government staff in CLTS. Master trainers were from the district and block level governments and local NGOs.

In Himachal Pradesh, TSC district projects allowed well-established grass roots NGOs to be contracted as support organizations for the duration of the TSC projects.[9] The best of the NGO support organizations had significant community development and behavior change experience from previous literacy campaigns, and at endline were being asked to provide support to nearby districts that had been unable to find comparable local NGOs. The state government also transferred successful rural development officials from high performing TSC districts to low performing districts, tasking them with transferring more progressive and effective approaches into their new districts.

A large network of district and block TSC coordinators provided technical assistance in Madhya Pradesh, but much of their time was taken up with administrative tasks, and most

lacked the outreach capacity to provide regular support and monitoring across the large number of villages within their jurisdiction. The state government was also asking districts to identify "reform champions" among local activists and to select "brand ambassadors" from the village heads in NGP-winning communities. These experienced and motivated individuals were slated to support behavior change efforts in nearby areas, but there was little evidence at the time of the endline that these initiatives had been able to increase implementation capacity or improve outcomes.

Resource agencies were also used in Tanzania to train CLTS facilitators and sanplat masons. While this approach was successful in building local capacity, the mason training focused on production capacity and was largely ineffective in introducing sales and marketing techniques or business development skills. Few sector agencies had the specialist skills or experience with these approaches to develop appropriate training materials at the outset, but significant learning was gained from this process, which will inform the far greater challenge of developing capacity across 132 districts under the national sanitation campaign.

4.4.4 Sustainable Capacity Development Systems

The scale up of the total sanitation and sanitation marketing approach requires the institutionalization of a capacity-building system. A sustainable capacity development system using government and private sector institutions would be able to sustain the capacity-development activities at the district level with limited or no outside support. At the time of the 2010 endline assessment, no country had developed an effective and sustainable capacity development system.

In Indonesia, the STBM secretariat[10] housed a core team of master trainers for CLTS training, but this central team was unable to keep up with training demands from across the country. At the time of the endline evaluation, experienced districts like Lumajang in East Java were offering training services: the Lumajang district environmental health team had provided six World Vision teams with training on CLTS facilitation and the development of sustainable rural sanitation businesses. This horizontal

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[9] TSC district projects include funding to achieve 100 percent improved sanitation coverage among below poverty line households.
[10] At the time of the original TSSM project, there was no STBM Secretariat. It was called the MOH-CLTS Working Group.

training model appears more cost-effective and sustainable than the vertical "center down to district" model previously utilized, as it allows competent and experienced district teams to compete for the provision of training services rather than relying on a central service which has few incentives to maintain training quality and minimize costs. This new approach also allows practitioners to select training partners with practical experience of comparable contexts and conditions. However, it should be noted that Lumajang or any other district will never have the capacity to become a training supplier for Indonesia's 33 provinces and over 400 districts.

Effective capacity development mechanisms had been established in Himachal Pradesh, with the state government proactive in asking for technical support from development partners to build capacity and experience in new and strategic areas such as solid and liquid waste management. Senior officials in the state government noted that an exposure visit to Bangladesh in 2009 was instrumental in persuading them of the value of investing in a large-scale and comprehensive capacity development program, and that recent implementation successes derived from these long-term investments.

Huge amounts of training were undertaken by the three state resource centers and twenty NGOs operating regional training centers in Madhya Pradesh, but little of the trained capacity was utilized effectively. For instance, 150 master masons were trained across the state but few of the districts were reported to be using these master masons to train up a cadre of local masons as intended, in part because the capacity development program is not well aligned with state policies that encourage districts to contract local contractors directly to build toilets.

In Tanzania, the national sanitation campaign aims to develop implementation capacity in 132 districts for CLTS and sanitation marketing. To date, virtually all capacity building has been supported through WSP and the resource agencies that it contracted. Given the lack of qualified resource agencies, this approach will not work for scaling up to 132 districts. Experience from implementing TSSM in 10 districts suggests that, in order to meet the ambitious campaign target of around 15,000 new improved sanitation facilities in each district, national capacity must be built to provide the significant level

of activity that will be needed to support community interventions, progress monitoring and follow-up visits by the local government staff and community volunteers trained under the campaign. At the time of the endline, the project was working on introducing incentives that could make more efficient use of existing capacity such as linking CLTS facilitator payments to triggering and ODF declarations.

4.5 Availability of Products and Services

Description: The sanitation marketing approach is predicated on the existence of the sanitation services and products that respond to consumer preferences and consumers' willingness and ability to pay for them. The focus of this dimension of the assessment should be on the role of government in creating an enabling environment for the private sector. The role of government is not to contract directly with the private sector, but rather to assist in creating a market for sanitation products and services, and build the capacity of private providers.

Key Findings

- TSC guidelines in India now permit dry latrines, with potential for improved supply of low-cost options to poor households and in remote and difficult to serve areas.
- Rural sanitation strategy in Himachal Pradesh allows freedom of technology options and avoids interference with market supply of products and services.
- Local governments in Madhya Pradesh continue to contract directly with the private sector, limiting the development of sustainable local sanitation supply chains.
- Formative research in Indonesia led to the promotion of "one stop" sanitation shops from which customers can organize latrine installation in one visit (where previously several suppliers had to be visited to arrange construction materials, sanitary wares, transport, and installation).

4.5.1 Availability of Sanitation Products and Services

The 2007 baseline assessment determined that the availability of sanitation products and services was not a widespread problem in India and Indonesia. East Java had a relatively well-developed market system with affordable prices. Similarly, in both HP and MP the supply of products from the private sector appeared adequate with wholesale providers found in most large towns and retailers with reasonable prices. Tanzania, however, did not have a developed supply of sanitation products and services.

By the 2010 endline, HP had developed a strategy that allows for freedom of technology options and non-interference with the market. Most stakeholders believed that the market supply was working well with reasonably priced products (e.g. US$4–6 for a ceramic latrine pan) that are widely available. Most notably, local government officials, service providers, and households are much better informed about the range of possible latrine options. In contrast, while the availability of products and services is not a problem, local governments in MP continue to promote the construction of standard latrines that meet PRD specifications and contract directly with the private sector, thus limiting the development of local supply chains. The systematic use of government-determined latrine components and design has been a brake on innovation and on household use of the facilities.

In Indonesia, between 2007 and 2010, the focus had been on improving the quality, availability, and affordability of existing products and services and on linking demand creation with marketing activities. The project undertook a number of activities to strengthen the supply of products and services. These included consumer research, training of masons, a communications strategy and marketing of products, and promotion of the use of the trained masons and communication materials. As discussed earlier, these efforts led to the development of a sanitation entrepreneur model that offers a one-stop shop where customers can organize latrine construction in one visit, making the shop responsible for the purchase and delivery of materials, and supervision of the installation of the selected latrine model. As of 2010, this model was still at the beginning stages, with only 10 sanitarians trained in entrepreneur skills and only six having started active businesses.

In Tanzania, between 2007 and 2010, the program had improved the availability of sanplats and latrine construction services through the training of masons. However, only 25 percent of the trained masons covering 40 percent of the population were thought to be active at the time of the endline assessment. Sanplats are very reasonably priced—less than US$6 per sanplat—yet most stakeholders still report that affordability is a constraint to large-scale implementation. Sanplat sales remain low despite the project's effort to generate increased sales. The problem does not appear to be the lack of appropriate products, but could be the lack of demand from households for the products even though many households appear to be making their own improvements to their existing latrines.

4.5.2 Constraints to Sanitation Marketing

As discussed previously, mason training was not nearly sufficient to strengthen the sanitation-marketing component of the project. As the project evolved the focus switched to creating an enabling environment for sanitation marketing.

In Tanzania, a range of other factors proved to be important to the creation of an enabling environment for sanitation marketing. Access to capital was a constraint since masons were not individually able to buy in bulk. Efforts were made to establish a mason fund in one district, but met with limited response from masons. Another constraint was that the masons who were trained in the ward center lacked transportation to visit the villages that were at some distance. Also, to date the focus has been on sanplats, which could be limiting the range of products that might improve market penetration.

In Indonesia the main constraint was the lack of a way to link the demand creation with the marketing efforts. The sanitation entrepreneur model discussed in Section 4.5.1 appears to be a promising way to address this constraint.

In India, new TSC guidelines allow dry latrines (specifically composting latrines), thus encouraging the development of more low-cost designs and more appropriate options in water-scarce areas. Despite this strong policy incentive, the primary constraint in MP in sanitation marketing is the temporary and program-driven supply chain that runs counter to the development of a sanitation market. In most districts in MP, the local government orders latrine material in bulk from local suppliers and then pays a local contractor to build the facilities. In contrast in HP, the market-based demand-responsive approach has led to the development of local supply chains that have resulted in the availability of latrine options at an affordable price.

A longer-term issue is the role of the local government in regulating the local market to assure quality of services from the local private sector. There was little evidence of local

government playing a regulatory role in any country. Rather the focus of local government was on program implementation. A key task in the future is to help local governments understand how they can facilitate the development of a local sanitation market including cost effective ways to generate awareness of the need for sanitation improvements.

4.6 Financing and Incentives

Description: This dimension assesses the adequacy of arrangements for financing the programmatic costs of a scaled up program. These costs include social mobilization such as training, staff salaries, transportation, office equipment and supplies, and the development of communication and education materials. In addition, programs must establish mechanisms that enable communities to achieve improved and total sanitation and ensure that individual households have the means to pay for on-site sanitation facilities. This is especially important to ensure that the poorest members of the community can afford sanitation facilities and therefore help communities to achieve open defecation free status.

Key Findings
- Only limited changes were observed in the already impressive sanitation finance arrangements in India, with funds now also available for solid and liquid waste management.
- Unexpected side effects of the NGP success included difficulties of processing, validating and verifying more than 12,000 applications in 2008, which led to reductions in the size of the NGP awards and questions about the validity and sustainability of some of the apparent NGP outcomes.
- Insufficient finance has been allocated to meet the rural sanitation MDG targets in Tanzania and Indonesia.
- Substantial increases in local government allocations to rural sanitation were observed in East Java, with US$1.6 million provided by local governments between 2007 and 2010.
- Development and implementation of medium-term strategic sanitation plans, rather than the usual annual development plans, was correlated with higher sanitation investment levels and higher resource utilization.
- Inadequate credit options for sanitation entrepreneurs were identified as a key constraint in East Java.

4.6.1 Adequacy of Central Government Resources
As at the 2007 baseline, India continues to provide significant national resources for rural sanitation. Impressively,

25 percent of the total TSC budget is earmarked for total sanitation, sanitation marketing, and the enabling environment. Substantial sums are available for creating sanitation demand and increasing the supply of sanitation products and services. The other 75 percent is used for cash incentives for households below the poverty line (BPL) and for facility construction. While the budget is more than adequate, it is not well used in MP because of the continued use of a government led supply-driven approach. Despite massive resources rural sanitation coverage in MP barely changed from 2001 to 2008.

In contrast, the national government budget for rural sanitation in Tanzania and Indonesia remains inadequate. In Tanzania, this is due in part to the emphasis on water supply. Of the US$303 million under WSDP, it is estimated that 92 percent is for rural water supply and eight percent for sanitation and hygiene although the planned national campaign could meet the MKUKUTA II target if a unit cost of US$10 per household (for program costs and not including household hardware investment) is achieved.

In Indonesia, while more central funds have been committed to sanitation than to water supply, these investments are earmarked for urban sanitation. What has been especially promising in Indonesia is the increase in provincial and district level financing for rural sanitation in East Java. Together the provincial government and 29 districts contributed US$1.6 million. Despite this positive development, financing to achieve the sanitation MDG is not sufficient in East Java and more importantly in Indonesia as a whole. Indonesia is starting up a national program but it does not appear that sufficient finance has been allocated for comprehensive national scaling up of rural sanitation improvement.

4.6.2 Utilization of Financial Resources
A key learning from the 2010 endline assessment is that available budgets are not always well used. At baseline in Tanzania, each project district was supposed to receive US$20,000 per year for rural sanitation from government, a modest sum but still a major improvement than the past. In reality these funds were reduced after 2008 due in large part to cost overruns in the rural water supply component. In addition, in some districts the funds were not used to

finance capacity building and other enabling environment activities as originally intended, but instead were used for demonstration latrines, sanplat molds, and travel allowances. This left local government with few resources to support field implementation and monitoring.

In HP the state decided not to utilize latrine incentive funds available to them. HP initially proposed to use these funds for collective incentive payments to villages that achieve ODF status, but the Government of India blocked this proposal as the funds were intended only for BPL households. As a result, the funds went unused, but the GoHP is now considering providing all toilet-owning BPL households with the incentive in order that it does not go to waste. This has raised problems about the different levels of the incentive, which was substantially raised over the last three years, so that those slowest to build a latrine were—theoretically—rewarded by a higher subsidy than those early adopters that built a latrine at the outset.

As discussed previously, in MP, significant TSC and NREGA investment in latrine building has not been well utilized because of the supply driven nature of the program. Households have little choice in how the money is used since local government controls the funds and monies are paid directly to contractors.

These examples point to the need to focus not only on the amount of financial resources, but also whether these resources are used efficiently and in ways that maximize consumer involvement and ownership. Experience from some districts in East Java and in HP indicates that those districts that have strategic plans make more efficient use of the resources they have. If used as management tools, strategic plans have the potential to enhance to the efficiency of the use of resources.

4.6.3 Credit
The lack of credit availability was observed in Indonesia and Tanzania. In East Java the sanitation entrepreneurs reported that the poorer households had asked to pay in installments. While the sanitarians agreed to the request, their suppliers could only provide one month of credit whereas most consumers want to pay over a three to nine month period. This led to cash flow problems and most sanitarians stopped offering credit. Some informal credit mechanisms

have developed such as loans from private businessmen with a fixed interest rate and in one case a revolving fund where households pay a fixed amount each month and one household per month is given the money for a latrine. None of these schemes operates at scale.

Similarly, no credit or microfinance mechanism is available to rural households in Tanzania. This is in part due to the perception of a limited market for improved sanitation facilities because of the high coverage of basic or traditional pit latrines. Another factor is the cost of an improved latrine, estimated at US$40-80. Sanplat producers also lack access to credit, but there is little evidence that this is a major constraint.

4.6.4 Role of Incentive Frameworks
As discussed in Section 4.2.4, the NGP in India provides a strong example of the power of incentive frameworks. In fact, the program is so successful that it has strained the resources available to process, validate, and verify the applications. This resulted in a reduction in the amount of the award to smaller GPs and made it impossible for the President to publicly congratulate each recipient personally. The applicants must show 100 percent latrine coverage in the online monitoring system before the application is accepted. The award is given in two equal installments, the second of which is paid only when the sustainability of the achievements is confirmed six months after the initial award. This focus on outcomes and sustainability is noteworthy, but has also led to pressure to exaggerate progress and some false reporting.

In 2010, the Government of Himachal Pradesh received more than 1,000 applications for the US$500,000 allocated to its state sanitation award schemes, up from only four applications in 2007. More than half the award amount had been disbursed by September 2010. Madhya Pradesh launched its state sanitation award at a similar time, but only 40 applications were received in 2009, and no awards were made between 2007, when the award was launched, and 2010.

There were no award schemes operating in Tanzania at the time of the endline assessment in 2010. The MOHSW had initiated an environmental health and sanitation competition, but there was no evidence of it in the districts visited. Most stakeholders agreed that awards, competitions, and non-financial incentives were important to scale up

and sustain rural sanitation efforts. The major obstacle to implementing an incentive framework is the lack of reliable monitoring or performance data (see Section 4.8).

Similarly, as of 2010, no national incentive framework existed in Indonesia and there was limited support in central government due to the concern that these incentive systems can encourage coercive interventions that are not sustained. However, TSSM introduced a promising provincial-level sanitation award that was linked to district level outcomes. The top performing districts were identified by the benchmarking system developed by the project. The JPIP award, implemented by the Java Post,[11] is based on eight indicators (see Box 1). The award scheme generated unusual interest, even though the award was a modest US$560 per village.

BOX 1: JPIP AWARD INDICATORS

1. Local government sanitation budget allocation per unserved household 10%
2. Proportion of local government sanitation budget used for software 10%
3. Number of communities triggered in last year
4. Number of trained and accredited masons per sub-district* 5%
5. Number of accredited sanitation vendors per sub-district* 5%
6. ODF success rate 15%
7. Proportion of population gaining access to improved sanitation 15%
8. Leverage ratio: US$ household investment per US$ LG invested 10%
9. Cost of ODF community 10%
10. Number people with improved access to sanitation per US$110 LG investment 10%

*Indicators 4 & 5 have not yet been utilized due to insufficient monitoring data

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4.7 Cost-Effective Implementation

Description: The potentially high costs of social intermediation at scale make cost-effective implementation a key dimension of the enabling environment. It is essential to understand how the unit costs change as activities are scaled up. Although it will not be possible to assess the cost effectiveness of the approach and how best to achieve economies of scale until the end of the project, data must still be collected during implementation. Therefore the focus in this assessment is on ensuring that information will be collected from the outset and that the capacity to collect the information is in place.

Key Findings
- As of 2010, there is no agreement on the measures of program effectiveness for which cost information should be collected nor are there systems to collect this information.
- Outcome-based goals were increasingly being used to assess effectiveness. For example, HP had adopted a local government benchmarking system that includes several simple cost-effectiveness measures (e.g., cost per ODF community) based entirely on data from government monitoring and evaluation systems.
- The JPIP award in East Java included several cost-effectiveness measures that had encouraged the collection and analysis of both cost and effectiveness data.
- In both HP and East Java, the cost-effectiveness data were used to inform sanitation policy, programming and practice.
- Some data were collected in MP, but were not utilized by the state government.

4.7.1 Program Effectiveness
The starting point for this dimension is determining the measures of program effectiveness for which cost information should be collected. Currently there is no agreement on these measures although both India and Indonesia have reported on some of these measures. India reports, for example, on the cost per ODF community and the cost per latrine in use. In East Java, the JPIP award (see Section 4.6.4) contains a number of cost measures linked to sanitation outcomes. A difficulty in all three countries is the lack of mechanisms for capturing the cost of government involvement, especially for labor and in-kind contributions.

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[11] JPIP is an institute financed by the Java Post daily newspaper.

4.7.2 Systems to Collect Cost-Effective Implementation Data

The dimension of cost-effective implementation remains a major gap in large measure because of the lack of systems to collect program cost data. Even in India, where the TSC and NGP encourage the development of performance monitoring systems, data to inform cost-effective implementation are not collected. The only measure used is cost per ODF community, which, while a useful measure, does not provide the detailed information to inform specific program decisions.

The JPIP award in East Java includes measures of cost-effective implementation (cost per ODF community, program cost per latrine in use, and leverage—ratio household: program). However, the WSP provincial coordinator is the driving force behind the collection of these data as there is no system in place to collect this information. In Tanzania, as of 2010, no system is in place to collect this information.

Given the difficulty of developing systems to collect cost information on a regular basis, a short and medium-term solution might be to commission ad hoc studies periodically to determine costs such as WSP did in East Java. This would require a closer examination of district budgets and household contributions. While by no means ideal, it may be a practical solution in the medium term to address this issue.

4.7.3 Use of Cost-Effectiveness Information

Cost effectiveness can be a powerful way to influence decision makers at the national and local government level. When confronted with cost information linked to program effectiveness, decision makers often rethink priorities. During the 2010 endline assessment in India, when decision makers at the state level were presented this kind of information, there was considerable interest in the data from which they were derived.

Even in Tanzania, where there is no system in place to collect cost information, there is a widespread perception that CLTS and sanitation marketing are more cost-effective than other rural sanitation approaches. This perception contributed directly to the decision to adopt the project approaches in the National Sanitation Campaign. WSP plans to conduct a cost study that will provide a snapshot of cost-effectiveness for this project.

4.8 Monitoring and Evaluation

Description: A large-scale sustainable sanitation program requires regular monitoring and perhaps more importantly, the willingness and ability to use the monitoring process to make adjustments to improve and strengthen 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.

Key Findings
- India is the only one of the three countries to have a functional national system for monitoring sanitation progress.
- TSC on-line monitoring system now records latrine provision data by village, but remains a supply-side monitoring system (i.e., it does not report demand-side data on household sanitation practices).
- Household survey data demonstrate that the current TSC monitoring and NGP verification processes in India may not capture poor latrine usage and sustainability outcomes in states where governance problems affect the quality of monitoring and evaluation processes.
- All three countries rely on ad hoc surveys, evaluations, and studies to monitor progress in the absence of a national system that measures both inputs and outcomes.
- Big gaps remain between periodic household surveys, held every two or three years, and the less reliable data available from routine monitoring systems.

4.8.1 National Monitoring and Evaluation System

Monitoring and evaluation remains a difficult area in which to make progress. India is the only country with a functional national system for monitoring sanitation progress, driven in large measure by the well funded TSC and NGP. Tanzania has been unable to report even basic performance data and has therefore made limited progress in this area. Indonesia also has no functional national monitoring system for rural sanitation although the MOH is planning to introduce an STBM monitoring system designed to monitor progress against the national strategy for total sanitation. However, this system is intended to focus on inputs (e.g., number of village plans formulated) rather than outcomes. An essential point to recognize is that national systems are dependent on the data collected at the provincial/state, district and village levels and that the system must therefore be integrated. An M&E system developed at the local level will not serve

the goal of a national system because of differing reporting systems. Furthermore, the subnational level will only have the motivation to collect data if the data are useful to them at their level. Without demand for the information at each level, even a well-designed system will probably fail.

The starting point for developing a national M&E system is agreement on the program indicators—in other words, agreement on what should be monitored and evaluated. An agreed upon harmonized list of indicators and definitions developed in consultation with stakeholders would provide the basis for determining what data needs to be collected and at what level. Only in India is there an agreed upon list of national level indicators that are reported on. A review of TSC indicators, however, shows that the focus of the M&E system is on measuring physical progress such as latrine construction and number of ODF communities rather than the monitoring of sanitation outcomes such as latrine usage. The MIS also does not monitor the sustainability of the use of the sanitation facilities.

The endline assessment reports for Indonesia and Tanzania point out the lack of alignment with JMP indicators, the body tasked by the UN with monitoring MDG progress for water supply and sanitation. For example, JMP does not count the use of shared sanitation facilities. In Indonesia, the SUSENAS surveys do not differentiate between an improved pit latrine with slab and an unimproved pit latrine without slab. The JMP classification for an improved pit latrine with slab does not require that the squat-hole be covered or that the slab is concrete. These definitions become exceedingly important when measuring national progress against international standards. The MKUKUTA II in Tanzania now uses the JMP definitions, and the draft sanitation policy uses JMP definitions as well.

4.8.2 Monitoring and Evaluation Strategies

The difficulty of establishing a national M&E system is clear from the endline assessments. Differing indicators, parallel reporting systems, lack of demand for data, problems with technology, and lack of a culture of information all contribute to the problem. What is equally clear is that all three countries rely on a mix of M&E methods. What may be the problem is that establishing a national M&E system may be too ambitious a goal for most countries with India perhaps being a notable exception. This issue is particularly important as the total sanitation and sanitation marketing approach spreads to

other countries, most of which are more like Tanzania than India and Indonesia in their level of development.

All countries rely on rapid assessments, annual reviews, and periodic household surveys. These are one-time efforts and are therefore easier to implement than a disciplined, integrated national system that collects information at all levels according to an agreed upon system. Demand from a national system is needed to sustain regular data reporting, consolidation, and analysis.

Examples of the use of ad hoc but useful M&E methods include the following:

- WSP assessments such as the one carried out in India in HP and MP in 2010 to determine usage rates and quality of recently constructed latrines.
- Household surveys such as the DDWS-managed DLM survey in India undertaken last in 2007 to provide a randomized check on achievements claimed by districts on the online TSC database. Tanzania has also used household surveys through the census, which although of limited use for detailed program monitoring, do allow the JMP to estimate annual progress towards the 2015 MDG sanitation target.
- Local monitoring systems, which may or may not feed into a national system, may nevertheless be useful at the local level. WSP piloted a local monitoring system in Tanzania in several districts based on the use of village registers. At endline, the system remained problematic because of the difficulty in motivating data collectors and aggregators to routinely pass the data up the system and lack of demand for the data from managers and decision-makers at each level, though incentives for improving this were being developed. East Java also had a TSSM-introduced community-based system that demonstrated that communities were able to monitor progress and report JMP-compliant data.
- State level performance benchmarking systems have proved effective in Himachal Pradesh and East Java.
- Evaluations such as one in Indonesia aimed at determining the factors that influence the achievement of ODF status.
- Impact evaluations such as the one conducted by WSP.

- Annual reviews that can be a useful interim source of performance data and be more detailed than routine monitoring data when independent assessors conduct them. The Joint Sector Review in Tanzania proved to be a useful event in building national consensus on sanitation policy and program methodology.

4.8.3 Use of Monitoring and Evaluation Data to Improve Policy and Programming

Despite the difficulties in establishing a national M&E system, there has been some progress in using M&E data to improve policy and program decision-making.

In HP, benchmarking district performance is proving effective in generating commitment and improving policy and programming. The system is putting pressure on lagging districts and encouraging average performing districts to strive to join the high performers.

In East Java, a notable success was the use of horizontal learning in which districts can share experiences with one another. The annual stakeholder reviews were hugely successful. These events encouraged local governments to report on progress and share learning and innovations with each other on a regular basis. District governments reported that learning and sharing by their peers were far more powerful and useful than conventional learning events because the progress and innovations were achieved using similar resources and capacity, and facing similar constraints, to those faced by other local governments. The reviews resulted in several district governments contacting other districts to arrange exchange visits and training events without any external assistance or support.

In Tanzania, the village register system measuring latrine components and the presence of handwashing stations was piloted and is being incorporated into national monitoring systems.

V. Conclusions

One of the central hypotheses of TSSM was that a supportive enabling environment was an essential element of large-scale rural sanitation programs. While the state-of-the-art on how to strengthen the enabling environment for rural sanitation is still a work in progress, WSP's experience between 2007 and 2010 strongly supports this hypothesis. The countries with the strongest enabling environment made the most progress. HP is an excellent example. At the same time, WSP's experience indicates that while all components of the enabling environment are important, not all are equally amenable to external intervention and therefore take time to address. External agencies have less influence, for example, in strengthening political will than in strengthening implementation capacity.

5.1 Overall Country Level Conclusions

5.1.1 Progress in Achieving MDGs

Indonesia is not on track to achieve its sanitation MDG. Government investment including donor funds have remained around US$27 million annually for the past 30 years while estimates state that US$600 million per year is required until 2015 to meet the MDG target. JMP progress estimates that rural sanitation coverage was 36 percent in 2008, up from 22 percent in 1990. The rural sanitation MDG is 61 percent and the total sanitation MDG 67 percent. At the current rate of progress, 41 percent of the rural population will be using improved sanitation by 2015. Still, the 2010 JMP report noted that more people (59.7 million) gained access to improved sanitation in Indonesia than any country other than China and India.

In Tanzania, using 2008 data, the JMP estimated that only 21 percent of the rural population use improved sanitation facilities with another 21 percent sharing their sanitation facilities with others and another 41 percent using unimproved facilities. The government has contested the JMP coverage estimates because of the lack of disaggregated data on the quality and functionality of pit latrines. In the absence of data, JMP assumes that only 50 percent of facilities classified as pit latrines are improved sanitation facilities. In 2010 using that assumption, the JMP estimated the MDG baseline as 23 percent in 1990 and the 2015 MDG target as 62 percent.

In India, although the lack of sanitation data disaggregated by state make it difficult to estimate the 1990 baseline, it was assumed the 1990 rural sanitation coverage in MP was close to the national average of 7 percent, which would set the 2015 MDG at 54 percent. In HP the baseline was 15 percent and the MDG at 58 percent. HP has already surpassed the 2015 MDG target with recent estimates suggesting coverage at 80 percent in 2010. In MP rural sanitation coverage had increased to only 10 percent in 2001 and in 2010 to 17 percent. At the current rate of 2.5 percent increase per year, MP will not reach its MDG until 2025.

5.1.2 Progress in Each Dimension of the Enabling Environment Framework

Table 6 on page 30 rates each project site at baseline and endline in each of the eight dimensions of the enabling framework. The table highlights the low starting position in Tanzania, as well as the different scale of the challenges in Madhya Pradesh and Himachal Pradesh due to the more difficult context in MP. Overall the most significant progress was made in four areas of the enabling environment: program methodology, implementation capacity, availability of products and services, and monitoring and evaluation. These four areas were directly and strongly influenced by project activities, whereas the other areas (policy, strategy, and direction; institutional arrangements; financing and incentives; cost-effective implementation) proved more difficult to influence during the three-year interval between baseline and endline assessments.

Indonesia

The enabling environment has been significantly improved, especially at the provincial level in East Java and the district governments (see Table 2). The development of a national strategy for community-led total sanitation (STBM) in 2008 led to the inclusion of such a program in the five-year national development plan for 2010–2014. However, these promising developments have yet to be institutionalized, and as of August 2010, there were inadequate budget allocations to meet the ambitious STBM targets, and the STBM secretariat was largely reliant on

TABLE 2: RATING DIMENSIONS—INDONESIA

DIMENSION	Indonesia	
	2007	2010
Policy, strategy, and direction	Medium	High
Institutional arrangements	Low	Medium
Program methodology	Low	High
Implementation capacity	Low	High
Availability of products and services	Low	High
Financing and incentives	Low	Medium
Cost-effective implementation	Low	Medium
Monitoring and evaluation	Low	High

Key:

Low — Needs improvement

Medium — Progress made, but still not high performing

High — Performing at a high level

TABLE 3: RATING DIMENSIONS—INDIA (HP)

DIMENSION	India-HP	
	2007	2010
Policy, strategy, and direction	Medium	High
Institutional arrangements	High	High
Program methodology	Medium	High
Implementation capacity	Medium	High
Availability of products and services	Low	High
Financing and incentives	High	High
Cost-effective implementation	Low	Medium
Monitoring and evaluation	Low	High

Key:

Low — Needs improvement

Medium — Progress made, but still not high performing

High — Performing at a high level

TABLE 4: RATING DIMENSIONS—INDIA (MP)

DIMENSION	India-MP	
	2007	2010
Policy, strategy, and direction	Low	Low
Institutional arrangements	Medium	Medium
Program methodology	Low	Low
Implementation capacity	Low	Medium
Availability of products and services	Low	Low
Financing and incentives	High	High
Cost-effective implementation	Low	Low
Monitoring and evaluation	Low	Medium

Key:

Low — Needs improvement

Medium — Progress made, but still not high performing

High — Performing at a high level

development partners to finance its activities. At the provincial level and especially at the district level, local governments have developed significant implementation capacity and demonstrated their commitment through increased allocations of their own funds. At endline, district governments believed that they had the capacity to continue implementation of rural sanitation activities.

India

The national enabling environment remains exceptionally strong as evidenced by the well funded TSC and NGP programs. However, because of the highly decentralized system and the authority that each state government has, on-the-ground results are dependent on the policies, strategies, and capacity of each state (see Tables 3 and 4). Himachal Pradesh is a major success story due in large measure to strong political support at the state level. While the reasons for the development of this political support are complex, it seems likely that the early successes provided by a combination of progressive state sanitation policies and exceptional leadership in Mandi District were sufficient to demonstrate that new approaches worked, and that rapid sanitation approaches were possible. In addition, there was convergence between the aims of the TSC, local cultural mores and a growing environmental movement, which made sanita-

tion improvement a politically viable and attractive cause for local leaders.

By contrast, in Madhya Pradesh the state has not embraced a demand-responsive approach and the program methodology of total sanitation and sanitation marketing. The program remains a supply-driven one with the state contracting

with the private sector to construct latrines using standard designs. MP is a much bigger and poorer state than HP and as a result, can legitimately say that what works in HP may not work in MP. However, the endline assessment concludes that MP has not progressed in large part because it has not accepted the fundamental principles of a demand-responsive approach.

Tanzania

Without a national policy for sanitation, clear institutional home, or major program in place, efforts to scale up rural sanitation in Tanzania were in a very low starting position in 2007, especially when compared to conditions in India and Indonesia. However, significant improvements in the national enabling environment for rural sanitation were achieved between 2007 and 2010 (see Table 5). Investments in long-term enabling processes resulted in a strong national framework for rural sanitation improvement by 2010, but have not yet translated into large-scale implementation or improved sanitation outcomes. The decision to designate the MOHSW as the lead agency is a positive development even though it still lacks capacity to carry out its functions. Implementation capacity has been strengthened in the 10 project districts although it has not been effectively used, largely because of resource constraints.

TABLE 5: RATING DIMENSIONS—TANZANIA

DIMENSION	Tanzania	
	2007	2010
Policy, strategy, and direction	Low	Low
Institutional arrangements	Low	Medium
Program methodology	Low	Medium
Implementation capacity	Low	Medium
Availability of products and services	Low	Medium
Financing and incentives	Low	Low
Cost-effective implementation	Low	Low
Monitoring and evaluation	Low	Low

Key:

Low — Needs improvement

Medium — Progress made, but still not high performing

High — Performing at a high level

5.2 Specific Enabling Environment Lessons

This section contains core lessons learned in each dimension of the enabling environment framework.

Policy, strategy, and direction

- Policy frameworks and improved strategic planning will only have impact if accompanied by political commitment and the concomitant allocation of financial and organizational resources. Political commitment is, however, a reflection of wider governance issues that are often beyond the ability of one organization like WSP to influence and instead may require a more strategic approach in partnership with other key stakeholders.

Institutional arrangements

- Local government can serve as the centerpiece of the at-scale service delivery model for implementation arrangement for scaling up rural sanitation, but must operate within a supportive policy environment and have adequate financial resources.
- The ability of local government to be the centerpiece is linked to the overall decentralization process in a country, especially the degree to which local government has real authority and access to its own resources. If local government is inherently weak, strengthening their capacity in just one area like rural sanitation will be challenging. Nevertheless, this is still a more promising approach than relying on NGOs, which do not work at large scale.
- Any national institutional arrangement must include a lead agency with responsibility for coordinating the efforts of other agencies and the capacity to play a leadership role.

Program methodology

- With the exception of Madhya Pradesh, there is broad acceptance of the total sanitation and sanitation marketing methodology in the project sites. The national polices and strategies in India, Indonesia,

TABLE 6: RATING DIMENSIONS AT BASELINE AND ENDLINE

2007 BASELINE	India-HP	India-MP	Indonesia	Tanzania
Policy, strategy, and direction	Medium	Low	Medium	Low
Institutional arrangements	High	Medium	Low	Low
Program methodology	Medium	Low	Low	Low
Implementation capacity	Medium	Low	Low	Low
Availability of products and services	Low	Low	Low	Low
Financing and incentives	High	High	Low	Low
Cost-effective implementation	Low	Low	Low	Low
Monitoring and evaluation	Low	Low	Low	Low

2010 ENDLINE	India-HP	India-MP	Indonesia	Tanzania
Policy, strategy, and direction	High	Low	High	Low
Institutional arrangements	High	Medium	Medium	Medium
Program methodology	High	Low	High	Medium
Implementation capacity	High	Medium	High	Medium
Availability of products and services	High	Low	High	Medium
Financing and incentives	High	High	Medium	Low
Cost-effective implementation	Medium	Low	Medium	Low
Monitoring and evaluation	High	Medium	High	Low

Key:

Low   Needs improvement

Medium   Progress made, but still not high performing

High   Performing at a high level

and Tanzania have all adopted the methodology due in part to the results achieved in the project.

- To reduce the lag time between getting the results of market research and launching supply and demand interventions, market research should take place at the very beginning of the programs.

Implementation capacity

- While implementation capacity has improved significantly, only HP has begun to develop a sustainable capacity development system. Without such a system, scale up to other regions and districts will be difficult. The development of a capacity development system is likely to come later in the process once there is sufficient support and momentum for implementation at scale.

Availability of products and services

- The methodology for sanitation marketing continues to lag behind that for CLTS/demand creation and behavior change. Significant learning has nevertheless taken place in this area and it is expected to continue emerging as WSP and an increasing number of development partners work in this area and keep creating evidenced-based knowledge.
- Supply improvement interventions, including the training of masons, should be planned only after consumer preference research and supply chain assessment. Consensus exists that the training of masons must be accompanied by the development of local supply chains and a business aggregator function that links demand creation to supply.

Financing and incentives

- Insufficient finance has been allocated to meet the rural sanitation MDG targets in Tanzania and Indonesia, despite the substantial increases in local government allocations to rural sanitation observed in East Java. The allocation of national resources is, of course, tied closely to the political commitment to rural sanitation.
- Development and implementation of medium-term strategic sanitation plans, rather than the usual annual

development plans, was correlated with higher sanitation investment levels and higher resource utilization.

Cost-effective implementation

- Progress in the dimension of cost effect analysis remains elusive. There is neither a standard set of indicators to guide data collection nor as yet any system to collect the information.

Monitoring and evaluation

- A functioning national M&E system is likely beyond the grasp of most countries in the near future. This should be a high priority for governments and all development partners to work on together. A more practical short-term approach might be an M&E strategy that makes use of ad hoc household surveys, district level monitoring systems, evaluations, and annual reviews. This is by no means ideal, but perhaps realistic.
- Horizontal learning in which learning is shared among peers is a highly effective capacity-building approach.

5.3 Enabling Environment Framework Lessons

The enabling environment framework has proven to be a useful and easily understood tool. It has provided a common definition for WSP and host country counterparts, the basis for the baseline and endline assessments, and a way to select specific interventions to improve the enabling environment. Like all frameworks, however, it is not perfect. There are several lessons learned from using this framework:

Lesson: All eight dimensions are not equally important to strengthening the enabling environment. Weakness in some dimensions may have a negative effect on other dimensions. In particular, three of the dimensions stand out as critical to overall performance and outcomes: 1) policy, strategy, and direction 2) institutional arrangements, and 3) monitoring and evaluation.

The assessments in the two states in India highlighted very different outcomes despite similar central policies, programs, institutional arrangements, implementation capacity, financing, and monitoring systems. The key differences identified by the enabling environment assessments were

in the level of political commitment and involvement, the adoption and interpretation of progressive policies, the development of effective local strategies, and in the close monitoring and evaluation of performance—all of which fall under two of the dimensions identified above.

Large-scale implementation is also dependent on effective institutional arrangements. In Tanzania, the lack of a well-resourced and effective lead agency proved to be an inhibiting factor to scale up. While all countries have established coordination mechanisms, it remains to be seen if these mechanisms will be effective and sustainable. Also, Tanzania, and other countries where total sanitation and sanitation marketing will likely be implemented in the future, may not have qualified resource agencies they can call up to develop implementation capacity of regional and local governments at scale.

Where M&E systems were well utilized, the data from these systems provided the evidence needed to develop consensus on improved policy and strategy, which in turn enabled efficient use of finance and capacity. In contrast, where genuine political commitment and involvement were lacking, as in Madhya Pradesh, M&E systems were not well utilized and produced unreliable data, which in turn limited the development of consensus on the relative costs and benefits of different policies and strategies.

Where M&E systems were not well developed or were not functioning well, as in Tanzania, the lack of performance data greatly limited the ability of managers and decision-makers to review progress, improve policies, and highlight or reward good performance.

Lesson: Some elements of the enabling environment framework are less responsive to interventions by one external support agency. Political will is of overriding importance since it is a precondition for resource allocation and accountability. Yet despite the benefits of advocacy efforts, political will is not something that can be turned on easily because of the competing priorities that all politicians have to weigh. Policies and strategic plans can be developed, but without political commitment, their implementation will be negatively affected. Financing from national budgets is also difficult to influence through project interventions since the political process, competing priorities, and the availability of resources heavily influence all national budget decisions.[12]

Lesson: The dimensions of cost-effective implementation and monitoring and evaluation are especially difficult areas in which to make progress. The 2010 endline assessments indicated difficulties in making progress in these areas with the exception of HP. Both require the development of an integrated system, institutional capacity to use the system, and the motivation at all levels to provide the information. The difficulty in making progress in these areas is not a reason to delete them from the framework, but rather an indication that new approaches need to be found.

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[12] For further exploration of political commitment and political economy issues, see *Evaluating the Political Economy for Pro-Poor Sanitation Investments. WSP: 2011.*

VI. Recommendations

The recommendations in this section are intended for WSP, other development partners, and host country planners responsible for rural sanitation. These recommendations follow directly from the conclusions in Chapter V and address some of the major challenges that have arisen since the beginning of the project.

6.1 Sequencing of Enabling Environment Interventions

Experience gained over the 2007–2010 period indicates a logical sequencing of interventions when introducing the total sanitation and sanitation marketing approach in a country.

- Phase one: This phase would include developing country specific models, including the research required to inform these models, and practical and workable M&E systems; building an evidence base and local political commitment that can be used to influence regional and central decision-makers to adopt the program approaches more widely; initiating supply chain development; and improving policy, strategy and direction accordingly.
- Phase two: Once the local models have convinced central decision-makers and other stakeholders to improve policy, strategy and direction, and an effective national M&E system is being established, then the other dimensions—finance to support the national strategic plan, institutional arrangements to encourage leadership and coordination, capacity development plans to fill gaps and strengthen weaknesses and supply chain development and support—become important.

6.2 Role of WSP

Especially in Indonesia and Tanzania, WSP played a lead role in supporting government efforts. Ideally a scaling up rural sanitation project should be managed by the lead government agency responsible for rural sanitation from the outset. However, this is not a realistic goal in many countries in the early stages as lead agencies often lack the management and organizational capacity to manage a large-scale effort including the financial management and procurement systems needed for efficient project implementation. In effect, the degree of support from WSP or another external agency can be viewed on a continuum and must be situation specific. The goal is for the lead government agency to manage the overall effort. In countries where the lead agency lacks staff capacity, systems, and resources, a focused effort should be made to develop this capacity with WSP or other development partners transitioning to an advisory and coaching role.

6.3 Recommendations Related to Specific Dimensions

- *Develop focused strategies to increase political commitment to rural sanitation.* The starting point for increasing political commitment is to understand how political commitment can be influenced in a specific country context. There is no one blueprint for increasing political will. Political will can be increased through a mix of methods including but not limited to advocacy, pressure from donors, international agendas, periodic summits to highlight problems and solutions, donor funding, evidence of cost effectiveness and outcomes, and personal contact. These strategies must also take elections into account, when there is turnover and budget cycles that influence the timing of decisions. A prime example of gaining political commitment can be found in the HIV/AIDS area. The combination of massive international funding, significant donor interest and mechanisms to channel the resources, evidence on the impact of the epidemic, and international summits that brought attention to the problem have resulted in HIV/AIDS being the number one health priority in many countries.
- *Policy development must be accompanied by monitoring of policy usage. Without mechanisms for policy alignment and enforcement, well-designed policies may not lead to improvement in rural sanitation.* Policy

usage refers to whether the policy is being followed at each level of government and whether it is having the desired effects. This requires a focused M&E strategy that will produce evidence on the effects of the policy.

- *Each country should have a lead agency responsible for rural sanitation with the official mandate, adequate staff and resources, and institutional capacity to carry out its functions.* The agency must also be the right agency, meaning that the functions, culture, and capacity of the agency are in line with what is needed to lead a national effort to improve rural sanitation.

- *Capacity-development systems need to be developed in each country to have a sustainable program.* The system would normally be overseen by a government entity but implemented by a mix of private or public sector agencies. Capacity development is a continuous process and needs a permanent and financially sustainable system. A capacity development system would be headed by a single organizational entity that would identify the capacity needs for both individuals and organizations and ensure the development, implementation, and monitoring and evaluation of capacity-building activities according to an agreed upon set of standards. With the exception of HP, WSP and other development partners have played this role, which is not a particularly sustainable approach. Such a system would provide information on whether skills were built and whether they are utilized.

- *Market research to identify consumer preferences should be carried out as early as possible in the project.* This research will inform the development and implementation of interventions to improve the supply of sanitation and products and services. In addition, an assessment of the supply chain and the strengthening of the enabling environment at the local government level will inform how best to develop and use the local private sector to supply sanitation products and services. The role of local government in actively promoting the use of the private sector and regulating the services it provides is an area that needs further exploration.

- *National strategies should be closely linked to available resources.* A common mistake that countries make is

the development of national strategies without taking into account the realities of available financial resources. These resources can come from national, private, or donor sources. To plan without taking likely resources into account is a prescription for disappointment, but to plan based on available resources means making the kinds of hard choices that any strategy should require. If a country has funds to scale up rural sanitation to only two of ten regions, which regions should they choose and what should the criteria be for deciding? Costing of national strategies should be a requirement to ensure they match financial realities.

- *Despite the difficulty in measuring cost-effective implementation, this remains an area of need.* Measures of program effectiveness that require cost information should first be identified and from those measures templates developed for collecting the information. In countries where public financial management is weak, this information can be collected on an ad hoc basis through special studies. The value of this information in increasing political will and building support among all levels of government is of special importance.

    The endline assessments from the three countries suggest the following possible measures:
    - *ODF success rate.* This measure places emphasis on collective outcomes rather than the number of latrines and provides an outcome measure against which to assess costs.
    - *Cost per ODF community.* This measure determines the average cost of achieving an ODF community.
    - *Leverage ratio.* This ratio measures the investment cost by the project and government against the household investments.
    - *Cost per latrine in use.* This measure averages the cost to the individual household.
    - *Cost per person that gained access to sanitation.* This will determine the cost per beneficiary.
    - *Total amount of local government contribution.*

- *Given the lack of progress in developing national M&E systems, develop interim strategies that take this reality into account.* These strategies would rely on one-time

or periodic household surveys, rapid assessments, evaluations, and annual reviews. This is by no means an abandonment of the goal of developing robust M&E systems, but rather a recognition of the difficulty of developing these in most countries. A case in point is national health information systems, which in most countries are typically weak and produce unreliable information. Developing these systems is a long-term and complicated endeavor, suggesting that adopting more modest goals may be a better strategy in the short and medium term.

- *Develop guidelines for the horizontal learning approach where countries, states, and districts can learn from one another*. There is widespread agreement on the utility of horizontal learning, but not very much exists on exactly how to do it effectively. A guidance document would greatly facilitate the wider use of horizontal learning.

6.4 Emerging Learning Questions for the Enabling Environment

Experience in strengthening the enabling environment between 2007 and 2010 has led to significant learning, much of which this report has tried to capture. However, there are important learning questions that are not yet answered.

- How can political commitment for rural sanitation be developed? What techniques have been successfully used? What generic lessons can be drawn from the success and failures?
- What would be a successful approach to developing the capacity of an agency to lead a large-scale rural sanitation effort? What are the characteristics a lead agency needs to have, e.g., core competencies, institutional profile, mandate, resources, and effective leadership?
- What is the appropriate sequence of interventions for a specific country while planning to scale up a national rural sanitation activity?
- How can a sustainable capacity-development system be established to support total sanitation and sanitation marketing?
- What are the elements of a successful sanitation marketing component using a business aggregator model? How can successful sanitation entrepreneurs be identified?
- If funds and capacity for contracting and managing market research are not available, what alternative approaches can be adopted for understanding local sanitation markets and facilitating local business development?
- What alternative monitoring and evaluation systems can be developed that are not overly ambitious for some countries? What conditions need to be in place before considering the development and operationalization of national M&E systems for rural sanitation programs?

VII.   Epilogue

Research for the endline assessment was conducted between July and November 2010 and the findings therefore reflect milestones up to that point. Since the endline assessment was carried out, local and national governments have continued to strengthen the enabling environments for their at-scale rural sanitation initiatives.

In India, between November 2010 and March 2012, there were several notable developments at the national level. First, the incentives for Below Poverty Line (BPL) households were increased to reflect rising costs for basic sanitation facilities. In Madhya Pradesh, the state government approved an individual performance award program to award district and block coordinators who created eight village resource centers in the Gram Panchayats with the best NGPs. These will be used as learning and training centers for the TSC program. The state also undertook a thorough internal verification of proposed NGP applicants before forwarding applications to national government, and operationalized a new state reward, the *Ujjwal Award,* that requires 100 percent sustainability of open defecation free status. In Himachal Pradesh, the enabling environment continued to be strong for rural sanitation and no new actions were initiated.

In Indonesia, between November 2011 and March 2012, the national government launched a national program across six regions modeled after the East Java experience. To support scaled-up implementation, the Ministry of Health developed operational guidelines and drafted a strategy to help local governments build the necessary capacity. Four provinces have adopted the strategy. Increased scale-up is being supported by a newly revived STBM Secretariat that has taken steps to improve outreach and knowledge sharing. The Secretariat is supported by a pool of experts, the website has been worked on and improved—for example, a new feature of the website is a web-based monitoring system—and the first electronic newsletter was sent to local government officials.

In Tanzania, between November 2011 and March 2012, a national total sanitation campaign was launched based on the experience in the ten districts. The Asian Development Bank disbursed funding for the national campaign and orientation for participating zones and regions is underway. The national government also developed national program targets, indicators, an implementation manual, and guidance materials. At the district level, districts participated in a supply-strengthening exercise that included hardware suppliers.