on the IRC Symposium 2013:
Monitoring Sustainable WASH Service Delivery
9-12 April 2013. Addis Ababa, Ethiopia

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28 April 2013
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1) Setting the scene

The Monitoring Sustainable WASH Service Delivery Symposium took place in Addis Ababa, Ethiopia, between the 9th and the 12th of April 2013 (including the extra-day). More than 400 participants (of which 300 men) attended the Symposium, coming primarily from international institutions and NGOs (46%) and from (African) governments (25%), with smaller presence of multilateral agencies, academics and consultants.

The Symposium was organised by IRC International Water and Sanitation Centre (IRC), with the aim “to provide a platform for exchange on the latest lessons and experiences with sustainable WASH service delivery monitoring, focusing on opportunities and challenges in the achievement of what is needed to move towards the vision of strong national-led monitoring systems”.

The Symposium takes place against a specific background of the water, sanitation and hygiene (WASH) sector, with several key developments. The past years have witnessed a push for achieving the Millennium Development Goals (MDGs), that is, to halve by 2015 the population without sustainable access to safe drinking water and basic sanitation. While access to water has augmented sharply, sanitation is still lagging behind. In addition, inequalities increased instead of declining, as it was those better-off who were getting access. This problem has become more and more acknowledged, partly due to the international recognition of the human right to water and sanitation in 2010, which has challenged the MDG idea of ‘halving’ and put forward the need to reach all. But the picture is even bleaker if we analyse what we have been using for assessing the situation: ACCESS! The gap between access and actual usage might be very big, but there is little information about it.

These issues are very much related to indicators and monitoring, topics at the core of the Symposium. In the WASH monitoring sub-sector itself, there several relevant trends or shifts, which are analysed in the Symposium background paper. Focusing on sanitation and hygiene monitoring, these are the four trends considered more relevant (see the sanitation and hygiene keynote paper for a more detailed account):

1) A shift from monitoring outputs to outcomes, that is, from infrastructure to behaviour, use, quality or service delivery
2) A diversification of monitoring aspects (cost effectiveness, service chain, total sanitation or open defecation free status (ODF)) and actors (government, communities, service providers), both as subjects and implementers of the monitoring
3) A growing focus on monitoring sustainability (change over time) and equity (unpacking the household, the community, etc.) of outcomes and services
4) A move towards systematisation and harmonisation, linking local level monitoring to national level systems (definitions, indicators, data sources).

These trends have several related challenges, including:
- Finding feasible, affordable and reliable methodologies and systems to monitor qualitative and quantitative aspects of behavioural outcomes at scale
- Monitoring service delivery is very complicated, especially in sanitation and hygiene
- Establishing systematic verification systems of ODF
- Identifying those least able
- Aligning monitoring systems at different levels
- The governance of monitoring: processes, systems, assumptions of willingness to share data, who owns data?
- Capacity for monitoring and for using it for action afterwards

In this context, IRC’s vision for WASH monitoring is that of strong national monitoring systems that allow planning and sustaining WASH services. This involves systems that are:

- engrained in national sector institutions (that can also act upon results)
- with clear arrangements, incentives and institutional capacity
- with clear indicator sets that can capture the complexity of the WASH sector

In order to discuss and elaborate this vision, plenty of issues were addressed during the Symposium. Topics covered in plenary sessions include the WASH monitoring scenario, the experience of the Ethiopian national WASH inventory, the politics of monitoring, the forgotten history of monitoring and post-2015 indicators. Further, there were parallel sessions, covering six different areas: Monitoring finance; Country-led monitoring; Project-based monitoring; Monitoring with ICT; Sanitation and Hygiene; and Alignment. I attended mainly the Sanitation and Hygiene thematic group, as well as a brief extra session related to the human right to water and sanitation and another on monitoring in extra-household settings (on Friday). Many different topics were covered during the Symposium, and most presentations are accessible at the IRC website.

In this report, instead of trying to go through all of them, I try to focus on the ideas I found more interesting, building on or complementing the posts I prepared during the Symposium for the CLTS blog. Then I share some reflections about the interrelations and implications for CLTS.

In the report, I don’t try to hide behind the paper and act as an objective reporter. Instead, I include my perception, reflection and opinion about the issues presented. For the reader to frame these, it might be important to know a bit of my background, which inevitably shapes my perspective. I did my PhD field research work on sanitation in rural India, so many of my reflections might have a rural bias and stress sanitation over hygiene, for instance. My background is on engineering and I currently teach quantitative research methods to development master students, but I have done my best not to focus excessively on technical details! I consider myself a fan of software and demand-centred sanitation and a critical enthusiast of CLTS, so apologies if I neglect hardware issues or do not give enough space to other approaches.

2) Most relevant ideas

Monitoring: from access to use

One of the trends in monitoring cited earlier is the shift from output to outcome. In the case of sanitation, it implies moving from measuring access to improved sanitation to measuring actual usage. Similarly, for hygiene it means focusing on actual behaviour instead of on the access to the device or infrastructure, e.g. a handwashing facility. This shift to outcomes is nevertheless far from being completed; it is actually more a will than a fact. Evidences of big gaps between existence of a facilities and their usage stress the importance of making this change happen. The difficulty is however tremendous. Monitoring access is relatively cheap and easy, as one can visually verify the existence of the physical infrastructure, obtaining reliable data. However, monitoring usage is much more complex. First, the ‘monitoring unit’ is not the household but the
individual, as not all members of the family—or any specific group—necessarily have the same practices. Also, people spend most time out of home (at school, at work, etc.) so extra-household settings cannot be neglected anymore.

Secondly, extensive surveys asking the households about usage of latrines, for instance, may lead to unreliable responses in many cultural settings, as people tend to hide their behaviour if it is perceived to be ‘against’ what is expected. The alternative would be observation, but it is prohibitive at scale as it demands a lot of time, apart from potential ‘contamination’ due to people changing behaviour while being observed.

What to do then?

One option is to use proxies. For instance, the condition of the toilet could be a good indicator of its usage. The location of handwashing devices or soap within the households can also be indicative. Such proxies are however far from perfect. They cannot cover every behaviour and also present challenges for their use at scale or across contexts.

A further option is to keep monitoring access and combine it with smaller scale, reliable—and more expensive—surveys in randomly selected areas (with prolonged stays in the habitations, combining questions with observation etc.). Comparing both data sets, a general ‘access-usage’ ratio could be estimated, which would allow estimating usage from existing access data.

Anyway, I feel it is important not to forget that the output-outcome issue is not as much about monitoring as it is about programmes and approaches in general. So the real challenge—and probably the previous step—is to make sanitation and hygiene programmes really behaviour-centred, confining infrastructure to a secondary role forever. It is undisputable that a more outcome-centred monitoring system would be a powerful driving force for this. But, especially taking into account the difficulties of making it happen, the mission of making the programmes behaviour oriented becomes more and more crucial.

**Post-2015 indicators**

The need to move from coverage to usage was also very present in the debates about post-MDG WASH indicators. In the technical process and related consultations led by the WHO/UNICEF Joint Monitoring Programme for formulating proposals for post-2015 targets, four technical groups were set up, including water supply, sanitation, hygiene and END (equity and non-discrimination). The resulting proposal has several targets and indicators, with deadlines ranging from 2025 to 2040.

To what concerns sanitation, there is an **interim target**: that no one practices open defecation by 2025 and that inequalities have been progressively eliminated. Supporting indicators of this interim target are:

- Percentage of population not using any facility
- Percentage of households in which open defecation is practiced by any household member
- Percentage of households with children under 5 reporting hygienic disposal of the stools of children under 5

The **main target** is that everyone uses adequate sanitation at home by 2040. Supporting indicators are:

- Percentage of population using an adequate sanitation facility
- Percentage of households where the sanitation facility is used by all members of household (including men and women, boys and girls, elderly, people with disabilities) whenever needed.

There are further targets for beyond the household: all schools and all health centres should provide all users with adequate sanitation facilities—gender-separated toilets in sufficient number—by 2030.

There are similar targets for hygiene (e.g. everyone uses basic handwashing—with soap—facilities when at home in 2030) and drinking water.

Analysing the indicators proposed, several changes stand out: Firstly, the universal character of the targets. The aim is to reach the entire population instead of a share of it (as happened with the MDGs). In order to give flexibility, there is no single deadline, but different deadlines are set for each goal. Also, interim targets are defined, showing the middle step towards the main target. Secondly, the strong focus on practices and usage. Related to this, hygiene aspects (handwashing, menstrual hygiene) are also incorporated. A third change is the movement beyond the household, with indicators related to schools and health centres. There is finally a relevant definitional change, accepting as adequate sanitation latrines that are shared between five households or less.

Personally, I believe that the changes are going in the right direction at a conceptual level, making a shift towards use and bringing on board largely neglected issues. In addition, targeting ALL is more coherent with the human right to water and sanitation and narrows the room for leaving the least able behind and aiming solely to those that are easy to reach.

I have my reservations, however, about the feasibility of measuring some of the indicators (related to the challenges cited earlier for measuring outcomes), as well as about the real options of this proposal being finally endorsed, due to the high number of indicators (too expensive!).

**Equity and the human right to water and sanitation**

As mentioned above, inequity is a big concern in WASH and especially in the sanitation sector; progress has been limited to ‘low hanging fruit’ while disparities and inequalities widened: progress in the poorest quintiles has been anecdotic (especially in India). Equity has been further brought to the forefront as a consequence of the international recognition of the human right to water and sanitation.

The rights to water and sanitation place an obligation on States to ensure access to water and sanitation. Services must be available to all, without discrimination, and there must be sufficient transparency in how services are delivered, with adequate accountability systems. This right also gives civil society and others, as the private sector, the responsibility to work to overcome discrimination, to improve resource allocation and to ensure participation of all stakeholders in finding solutions to the lack of access to services. Further, monitoring from a human rights perspective can be useful for understanding WHO lacks access and WHY, focusing on those excluded or discriminated against. Currently, data are not enough, leaving enormous blind spots such as many slums all over the world. Furthermore, specific tools need to be used that highlight inequalities beyond the disaggregation according to income, in order to make visible the different discrimination vectors. Three universal equity parameters could be age, gender and physical ability, which could be complemented with more context-specific parameters.

Also, it is urgent to move beyond the household level. On one hand, there is need to realise that some of the most ‘vulnerable’ groups are found beyond the households and sometimes do not have a choice to be elsewhere. This is the case of children at schools or—in to put a more extreme example—inmates in a prison. If
sanitation facilities are not appropriate, they are somehow being forced to stay in an unhealthy environment. On the other hand, when we look at the most disadvantaged groups – such as squatters, migrant labourers, nomadic groups etc. – making water and sanitation accessible to them will in most cases involve collective or shared facilities.

It is also important to keep in mind that inequality does not just involve access to facilities, but also whether these facilities are adapted to the specific needs of those using it, especially of the most vulnerable groups. An interesting way of looking at it is using the so-called human life-cycle approach, looking at the different stages in life and whether sanitation facilities really satisfy the needs at that point of time (e.g. childhood, puberty, pregnancy, old age...).

Again, I feel equity is an issue that goes far beyond monitoring and needs to be addressed more clearly when planning and developing approaches.

The elephant in the room: agendas and corruption

And again, the elephant was in the room. Hours and hours discussing on how to make monitoring systems capture the complexity of WASH... and forgetting that even the current ‘rough’ and easy to obtain data are highly inaccurate in many areas of the world (with India’s Total Sanitation Campaign monitoring system as the biggest and saddest example, probably).

Luckily a PhD candidate from the University of Sussex called Katharina Welle made a brilliant presentation of her research in Ethiopia in the plenary session, bringing to the forefront two underlying assumptions in most performance monitoring systems. Firstly, the linearity of the cause-effect chain: inputs > activities > outputs > outcomes > impacts. Secondly, that monitoring feeds directly into decision making and informs it. Her research however shows that it is a much more complex and contentious process. Actors framings shape what will be monitored and certain perspectives might be excluded; too often those of the users. Also, interests and personal agendas can affect the monitoring process, leading to ‘gaming’ behaviour and inaccurate monitoring; some actors may want to hide problems or to overstate necessities in order to get more resources.

My experience in India is similar in many respects to this, with actors’ interests strongly affecting accuracy of monitoring. But it does not only affect monitoring but sanitation (and water) programmes as a whole. The political economy around these processes is one of the key areas that need to be addressed if the sanitation agenda has to move forward at scale. It is not an easy task, nevertheless. Improved accountability and strong political leadership – so often missing in the sanitation sector – are two key ingredients for it. And better monitoring systems can potentially reinforce both, as they increase transparency and provide the information needed for policy making. Monitoring innovations such as the use of ICTs or accessible databases can contribute to this, increasing the accuracy, accessibility and verifiability of data. However, they are only small elements of the bigger effort needed to tackle political economy issues.
3) Reflections and ideas for CLTS

Community-Led Total Sanitation, in its various forms, was very present throughout the sessions in the sanitation and hygiene topic group. Even a participant asked in the initial session whether other approaches were going to be considered, too. From the different presentations, I picked up some ideas that either dealt directly with CLTS or had some relationship with it.

ODF, post-ODF and the complexities of sanitation

Many African countries have walked a long way in establishing protocols for advancing towards total sanitation. These protocols are national codes of procedure for planning, implementing, monitoring, verifying and certifying ODF. According to the evidence presented by UNICEF, the countries with operative ODF protocols have had better progress over the last years. Definitional issues are crucial, and understanding of ODF varies slightly between countries. Interestingly, in many places, there are two different ODF-levels. Basic ODF generally means elimination of open defecation, while ODF plus or ODF II involves further behaviours that contribute to total sanitation, such as handwashing, sanitation in schools or markets etc. The challenge remains, nevertheless, on how to make these protocols operative: follow the steps, verify the different status and act upon it. Post-ODF monitoring remains an especially neglected area, as many interventions stop once (‘basic’) ODF is verified. This was considered problematic by several Symposium participants, as sustainability remains a major concern in CLTS. A couple of participants actually shared their experience that CLTS can empower a community to reach ODF status, but this will not lead automatically to households moving up the sanitation ladder and sustainability of the status, and that there is a need to keep supporting, for instance through sanitation marketing so that household can access affordable hardware.

This idea seems logical, but different from my insights from India. There, I also found non-sustainability and reversion towards open defecation, but in GPs that had never reached 100% latrine use. The GPs that really achieved ODF status, generally sustained it. I think that this divergence can be just a perception issue; what these Symposium participants described as ‘ODF’ communities might in fact be almost ODF communities, without reaching 100% use. However, there might also be a real basis related to contextual difference. For instance, most Indian households go directly for pour flush latrine (skipping the pit latrine step of the ladder). This may make ODF status more difficult to reach, but ensures higher degrees of sustainability.

Another idea that resonated with my research in India was the issue of ‘ODF plus’ status. It reminded me about Himachal Pradesh, with many GPs with ODF status (or very close) and the state government trying to move towards a next stage –markets, anganwadis, solid and liquid waste management– but probably without a clear and coherent strategy. The establishment of a protocol or at least a definition of this ‘desired next stage’ might be of use for planning and prioritising the new phase of the sanitation mission. ODF plus also brings to the fore the issue of sanitation in non-household settings, with which I deal in the next section.
Sanitation beyond the household

Extra-household sanitation is an overall neglected area in monitoring but also in planning. This is also true for CLTS, despite its focus on total outcomes (ODF). The testimony of Archana Patkar (WSSCC) highlights this: She shared her experience while visiting the first experiences of CLTS in Rajghar area in Bangladesh in 2000. She was impressed by the results: ODF status in an area involving around 20 villages! But already at that point of time some (local) people started to question that household sanitation had been improved, but the situation in markets was bad. She feels that ODF verification in CLTS was and –more worrisome– still is way far from including extra-households settings, especially to what concerns marketplaces.

Latrine coverage and maintenance in schools, health facilities and marketplaces is overall poor in most development countries. As these places are frequented by high numbers of people, tremendous health hazards and non-health problems result: increased incidence of diseases and decreased rate of attendance at schools (especially among girls once menstruating), higher childbirth mortality in health centres or bacterial transmission through the food in markets.

There are cases, such as Malawi, where sanitation beyond the household is included in the ODF verification protocol. But I feel that CLTS as an approach has not embraced it explicitly enough.

It is a complex area, nonetheless, which needs further research. My impression is that the principles inspiring CLTS are valid also for extra-household settings: It is important that the initiative comes from the community and that they are involved throughout the process. The fact that it often affects public buildings calls for a higher involvement of the administration (without excluding the community, of course), especially financially. For instance, it is up to the administration to sanction toilets in schools and health centres and to set up adequate regulations, which clarify whose responsibility it is to clean and maintain the facilites. In India, for instance, schools had generally toilets, but were very poorly maintained. In anganwadis, on the contrary, although there was some coverage gap, existing toilets were always properly maintained and clean, as the responsibility was very clear (it was the job of the anganwadi helper). Market places have a more diffuse institutional setting, so solutions need to be more creative and context-specific. Market committees—if operative—may be the best institution to work with, so that they take up the responsibility of the sanitation facility (e.g. collecting fees for paying cleaners). The role of the state here will also depend on the context, but enabling regulation would definitely help (e.g. establish having functional toilets as a pre-condition for getting administrative permissions or any services needed).

Human Rights and CLTS: focusing on equity

As described before, there is a strong link between extra-household sanitation and human rights. The ‘popularity’ of equity has increased since the declaration of the human right to water and sanitation, which is apparently good news for the CLTS approach, whose idea of total outcomes (ODF) resonates with the universality demanded by a human rights perspective. However, it also brings to the light the contradictions and gaps of CLTS in this respect: CLTS assumption of an almost spontaneous mutual help –those better-off will support those least able– has been observed to be flawed in many cases all over the world. The assumption is based either on an idealised notion of the community or on a too optimistic belief of the power of the triggering. If mutual help is to happen, more efforts have to be put on it at all the stages of the CLTS process (pre-triggering, triggering and post-triggering).

I could have a superficial glimpse on these issues in my research in India, confirming that mutual help is not automatic and that many social divides and tensions exist within a single village, deterring this solidarity.
Mutual help did actually happen in very motivated communities, where natural leaders and others did a very good job for getting everybody on board. But I observed that even in such cases there are some people that end up being excluded. In a village, for instance, a widow had social barriers for accepting help from the sanitation committee. There were further examples, but due to the nature of my research and my logistical and cultural limitations, I was not able to explore these issues in sufficient depth. Therefore, there is not only a need for a stronger focus on equity in CLTS, but also for thorough in-depth research on the mechanisms for exclusion and the ways of tackling them.

**Monitoring and verifying in CLTS**

In the different debates during the Symposium, the importance of monitoring was stressed. As said before, monitoring would ideally span over a long period of time in order to see whether outcomes are sustained. These ideas made me think of the importance of taking monitoring and verification seriously in CLTS. This is especially true for India, where there were several claims of CLTS successes at scale (in Maharashtra, Madhya Pradesh, Haryana...) based on spurious evidences, which later on were proved to be extremely exaggerated, thence weakening the position of those promoting the approach. The need to ensure reliable ODF verification is thus very strong, especially where incentives to become ODF are strong (e.g. prizes, recognition, pride...). The workshop at Lilongwe and other initiatives are positive steps, but there is still a long way to go.

A further issue that was raised in a couple of presentations was how to make community monitoring fit for aggregation at higher administrative levels. Though interesting, I feel it is important to be conscious of the tension between the community-led character of CLTS and the standardisation needed for aggregation. Do we want each community to monitor in a similar way so that the information gathered can be aggregated? Or do we rather let communities monitor as they feel it suits them best, and have a separate externally-led monitoring system? The best is probably the middle way. But if I was to choose either of them, I would definitely go for the second option. Taking into account the existing incentives for ODF mentioned early – which are actually very much needed for progress at scale– there will always be a strong temptation to over-report. External rigorous verification is needed thence for verifying ODF claims. That exercise is easy to standardise, allowing aggregation of data. In this way, community can monitor in a more relaxed way, knowing that the information is theirs and for them, increasing its accuracy and its usefulness for having a clear picture of the situation and act upon it. Regarding post-ODF monitoring, it might be more difficult to have thorough verifications from outside, but still some external ground-truthing (probably best through random samples) would be needed in combination with the data emerging from the communities.

**About the Symposium**

Finally, some thoughts about the Symposium.

The event was relevant for the WASH sector, as it managed to bring many people from key institutions in the sector together, as well as members of several governments (especially Africans). However, I feel that the ‘conference format’, based on communications from the participants, has some shortcomings. The
communications people presented were generally the last developments or progress they had been involved in (e.g. the results of a UNICEF project somewhere) or recent innovations (e.g. a pilot on ICT for monitoring). These issues, being of current interest, might conversely not address ‘big’ ‘old’ challenges. I had indeed this feeling at several moments in the conference: plenty of discussions about extremely sophisticated indicators and monitoring systems, while little time was devoted to issues such as the elephant in the room described earlier (personal agendas). I guess it is not an easy-to-solve problem, unless we move to a workshop format, which might though congregate less key actors.

Another issue that stroke me was the fact that India was missing in the Symposium. Only two or three Indians were there; nobody from the government but just from regional institutions. Only one communication (by Ajith Kumar from the Water and Sanitation Program (WSP) - South Asia) was about India, and then again it was about a pilot experience using ICT for monitoring, which WSP wants to propose to the Government of India in order to improve the NGP verification. That is a really poor record for a country hosting almost two thirds of those defecating in the open worldwide! Even more taking into account that India’s sanitation monitoring system, despite being publicly accessible online, had approximately 80% over-reporting in the past decade... doesn’t this look like a case to discuss at a Symposium on WASH monitoring?

And something about which I changed my mind is the role of ICT in monitoring. Before, I was very sceptical about its potential, due to my belief that the problem of monitoring is mainly about political economy, leadership etc. I still belief that, but I have to acknowledge that using for example smartphones for monitoring can be very beneficial. The combination of photo and geo-tag while monitoring allows cross-checking both the accuracy of indicators such as coverage and the geographical inclusion in the monitoring exercise. Thus, ICT can potentially contribute to more accurate, reliable and equity-sensitive monitoring.

Something I did not like so much is the conference being held at the Hilton hotel, in which one feels like in a fortress from which it is not so easy to get out. I felt kind of disconnected from the outside world and trapped in the contradiction of discussing about equality and similar things sitting in a five star hotel. I’d have preferred a less luxurious venue and also some visits to the field (maybe in the extra day) to see on the ground some of the experiences shared. Anyway, my personal lesson for next time: try at least not to stay in the conference hotel if it is one like the Hilton (service is not that good anyway!).