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**REPORT OF UNICEF/IRC MISSION AND WORKSHOP
WITH DPHE / CHTDB / UNICEF
FOR PREPARING
A PROJECT CONCEPT PAPER ON
IMPROVING ACCESS TO SAFE WATSAN FACILITIES
IN THE CONTEXT OF INTEGRATED WATER MANAGEMENT IN
THE CHITTAGONG HILL TRACTS DISTRICTS
BANGLADESH**

by
**Cornélie M. van Waegeningh
Esther de Lange
IRC International Water and Sanitation Centre
The Netherlands**

**December 1997
Chittagong/Bangladesh**

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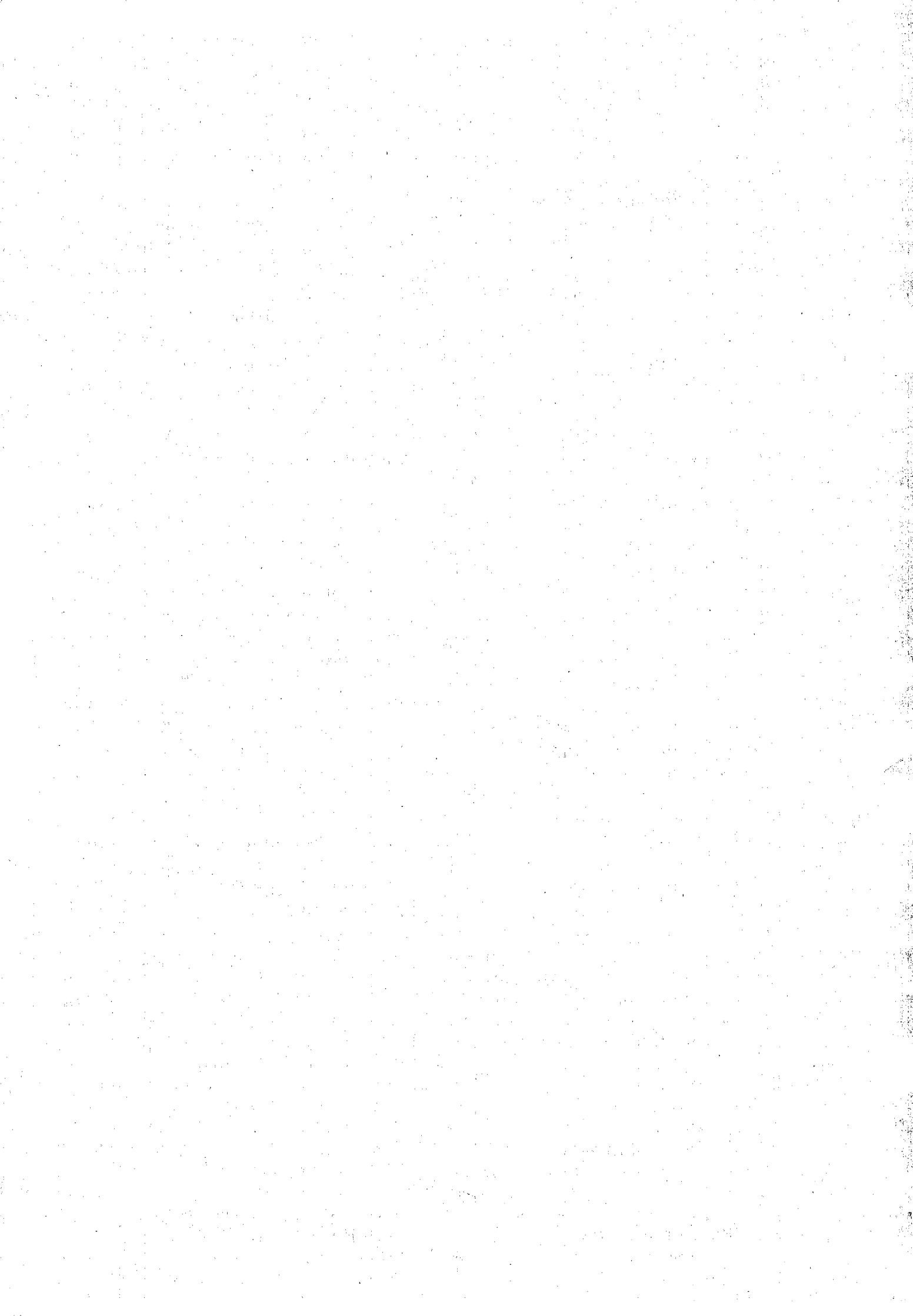


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List of Abbreviations

CHTD	Chittagong Hill Tracts Districts
CHTDB	Chittagong Hill Tracts Development Board
DPHE	Department of Public Health Engineering
GoB	Government of Bangladesh
HH	Household
IRC	IRC International Water and Sanitation Centre
LWTA	Low Water Table Area
MLGRDC	Ministry of Local Government, Rural Development and Cooperatives
O&M	Operation and Maintenance
PCP	Project Concept Paper
RNE	Royal Netherlands Embassy
SAE	Sub Assistant Engineer /DPHE
SDC	Swiss Development Co-operation
SWTA	Shallow Water Table Area
ToT	Training of Trainers
TW	Tube Well
WATSAN	Water Supply and (environmental) Sanitation

Para, Mouza, Thana:

public administration units from household level up
to village and cluster of villages levels.

*If you give people room to dance
they dance!*

1. Introduction

From November 30 through December 14 1997, a team of the International Center for Water and Sanitation (IRC) visited Bangladesh to assist UNICEF and the Department of Public Health Engineering (DPHE) in jointly preparing a project framework to supplement the *project concept paper (PCP) for improving access to safe water and sanitation facilities in the context of integrated water management in the three Chittagong Hill Tracts Districts (CHTD)*.

The first days of the visit were spent in Dhaka, during which the UNICEF/IRC team held discussions with various partners in the WSS sector. Besides reflecting on related sector developments, discussions focused on sector policy principles such as the institutional arrangements required for reaching sustainable use of water and sanitation facilities, and the need for donor coordination. The program of visits is attached in Annex 1.

On December 2, the UNICEF/IRC Mission team departed for Chittagong City where after introductory discussions with the Superintending Engineer of the DPHE Chittagong Hill Tracts, it was concluded to convene a participatory workshop facilitated by the IRC to jointly conceptualize a Project Concept Paper (PCP). The sessions were held at the DPHE venue in Chittagong.

Unfortunately for the visiting IRC team, no field trips to the Hill Tracts Districts could be arranged as the political situation did not yet allow for it. However, it was a welcome coincidence that the day the workshop started a historic Peace Accord was signed, which ended the nearly two decade old insurgency. As the newspapers reported : *the door for development is now fully opened.*

1.1 Acknowledgment

The IRC mission team would like to thank all staff from DPHE, CHTDB and UNICEF in Chittagong who participated so actively in the workshop. Despite hartals and (for most participants) long daily traveling distances, we jointly managed to collect a lot of substantial information as building blocks for the project framework. The IRC team's lack of Hill Tracts exposure proved after all to be a blessing in disguise because all knowledge had to come from the group.

We are impressed by everyone's commitment to address the needs and demands (!) of the people in the Chittagong Hill Tracts Districts. This has been very stimulating for us and greatly contributed to the constructive atmosphere in which we could openly exchange and match experiences. We hope we succeeded in giving sufficient space to dance, and that the Chittagong Hill Tracts people, and all others involved will dance indeed.

2. The workshop

During the introductory consultations with the Superintending Engineer, it was agreed that the workshop was to be attended by those who ultimately are expected to execute and implement the development project in the CHTD. This would include the DPHE staff assigned to the Hill Districts, staff of the Chittagong Hill Tracts Development Board (CHTDB), and Chittagong UNICEF staff. A complete list of all who contributed to the workshop is attached in Annex 2.

In consultation with the DPHE Superintending Engineer and UNICEF Dhaka, the IRC team performed as facilitators, whereas all other participants acted as resource persons. The facilitating team had chosen for a participatory workshop with discussions and brainstorming as a vehicle for collecting, systematizing and analyzing relevant information related to water supply, sanitation and hygiene in the area. All participants/resource persons were stimulated to contribute their specific knowledge and experience, while at the same time sharing and matching this information. Thus the wealth of information which rests with them was made available for this Project Framework.

It was appreciated that those present committed themselves to take part and to make time available for as far as their ongoing work schedule allowed.

3. Workshop proceedings

In total the workshop was conducted in 4 full days, which were spread over a period of one week. Originally, the jointly planned program (see also Section 3.2) accommodated for 6 days of working together, but due to the regular hartals/strikes this could not be met. The remaining three days were used for individual discussions, brainstorming and reporting. To guide the process of jointly formulating the Project Framework, various participatory methods were used, which will be further explained in the following Sections.

3.1 Expectations of the participants

The first session started by making an inventory (which was written down and kept on a big sheet) of the expectations of all persons present through an open sharing. The following expectations were expressed:

- ⇒ Find a strategy to reach the poor in CHTD in WSS
- ⇒ To know how to address the poorest people in the un-served and under-served areas.
- ⇒ To find proper ways to improve WSS in CHTD
- ⇒ To identify effective modalities for service delivery
- ⇒ To increase awareness in the community on how to use WSS
- ⇒ To know the role and responsibilities of DPHE staff at district and Thana level
- ⇒ To know the real conditions in the CHTD; how to improve the situation and what appropriate technologies to be used
- ⇒ Share our ideas on water supply and sanitation
- ⇒ To meet your expectations
- ⇒ To make together the workplan / proposal on how to achieve all your expectations
- ⇒ To present initial survey results and get feedback

A brief review of these expectations revealed that the majority of the expectations reflect very much the objectives which we are trying to achieve in our own work in water supply and sanitation in the CHTD.

One participant specifically focused on the nature of the workshop, expressing the wish to be able to share ideas on water supply, sanitation and hygiene.

A third group of expectations made the link between and the overall objectives of our work and the actual scope of the workshop. It was concluded that the workshop aims at preparing a workplan or proposal on how to achieve sustainable water supply and sanitation facilities in the CHTD.

Finally there was a specific expectation related to presenting of and receiving feedback on an ongoing baseline survey concerning water supply, sanitation and hygiene in the CHTD, which is at present being carried out by Shisha Angina for UNICEF (see also Section 3.3).

3.2 The workshop program

After it was found that the expectations were well in line with the objective of the UNICEF/IRC visit (the partial preparation of the Project Framework), a program on how to come to a first draft Project Framework was drawn up.

Date	AM 9.30 - 13.30	LB	PM 14.30 - 17.00
3-12	<ul style="list-style-type: none"> • Introductions • Program planning 		<ul style="list-style-type: none"> • Presentation by <i>Shisha Angina</i> and discussion
4-12	<ul style="list-style-type: none"> • Situation analysis 		<ul style="list-style-type: none"> • Situation analysis
7-12	<ul style="list-style-type: none"> • Specific aims and objectives 		<ul style="list-style-type: none"> • Strategies
8-12	<ul style="list-style-type: none"> • Strategies 		<ul style="list-style-type: none"> • Strategies
9-12	<ul style="list-style-type: none"> • Activities 		<ul style="list-style-type: none"> • Reporting
10-12	<ul style="list-style-type: none"> • Presentation and discussion 		<ul style="list-style-type: none"> • Review and finalization

3.3 Presentation first results needs assessment Shisha Angina

Shisha Angina, which is a local NGO, is presently conducting a basic needs assessment in the three Chittagong Hill Tracts Districts. They have started the needs assessment in Rangamati District, and at the time of the presentation, the field visits in Rangamati were almost completed, and some preliminary results were shared.

For the collection of data, Shisha Angina is using the Sub-Assistant Engineers (SAE) of DPHE, to whom a Training of Trainers (ToT) training is given. Twenty of them have been trained during 5 days. The SAEs in turn then trained paraworkers and tube well mechanics, who visit the paras and mouzas. So far 15 Unions out of 23 in the Rangamati District have been visited and data collection is completed.

The trained local staff are collecting data through :

- * social and physical mapping
- * household listing
- * h.h. information cards
- * priority ranking
- * seasonal calendar
- * wealth ranking

The presentation showed that through the survey a wealth of information is obtained about the inhabitants of the CHTD. This will provide a good base for a development program with a users' perspective. However, some critical

issues were raised during the presentation:

- What are the true demands of the Hill Tracts people: is water and sanitation a genuine demand or is there a higher priority for education, health services or others. This does not become clear from the survey as it is being conducted now.
The workshop participants confirmed that there is a generally felt need for improved access to WATSAN facilities, but it could not be confirmed from the survey data that this need is indeed a priority need which would lead to a demand.
- Technology options for sanitation need to be looked into, for example the water sealed latrine is often broken while the technology is rather expensive.
- The wealth ranking exercise assumes an ability to pay for water. However, the ability to pay does not reflect the willingness of the user to pay. Willingness is determined by factors as the quality of the product in terms of quality/quantity of services delivered, timely delivery, maintenance, sense of ownership and eventually improved health.
- It is possible that the wealth classification/ranking can be related to specific hygiene behaviors, which then may provide information on behind lying reasons and motivational factors related to this behavior.
- Lessons learned from the past: if so many tube wells and latrines are installed in the past, as the survey results show, but they appear not to be used (properly), what are the reasons behind it?
- Gender: only very few gender specific data are generated through the survey. Differences in perceptions and opinion between women and men are not really reflected.

3.4 Situation analysis

Given the time limitations of the Mission, it was decided to limit the focus of the situation analysis at this stage to a problem analysis of water supply, sanitation and hygiene in the CHTD, and an institutional analysis of all stakeholders in the sector and area. For this purpose, the first steps of the Objective Oriented Project Planning method (OOPP) were used.

This method uses small colored cards in order to:

- give everybody the opportunity to contribute
- facilitate the discussions and the sharing of ideas
- help to get a broad overview of many different types of problems
- show the relationships among the different problems

Visualization through cards is a very powerful facilitation method for sharing and thorough analysis. In order to make optimal use of the method, the following rules should be taken into account: write clearly, maximum 3 lines per card, only key words, one idea on one card. Specifically for problem identification and analysis: stick to really existing problems, no balloons/broad concepts, no hidden solutions (avoiding cards with 'no....' or 'lack of').

Firstly, participants were asked to write down on cards all stakeholders or actors that play a role in water supply, sanitation and hygiene in the CHTD. In this way, through discussion and brainstorming, all important stakeholders were identified. At a later stage, the stakeholders were

clustered into different groups (see also Section 3.8 and Annex 5).

For the identification of problems, the participants were divided in four small groups and were asked to address the question "What are the problems faced by the different stakeholders/actors related to water supply, sanitation and hygiene in the CHTD?". To ensure the incorporation of all different stakeholders identified, each small group was asked to specifically focus on a quarter of the stakeholders identified in the previous step. All problems were collected and discussed on clarity, relevance and agreement.

Following, the problems were analyzed on their inter-relationships, and cause-effect relationships were identified. This eventually led to a problem tree, which can be found in Annex 3.

3.5 Discussion of draft GoB policy

It was felt to be of great relevance for the participants to become acquainted with the headlines of the draft National Drinking Water Supply and Sanitation Policy 1997. The contents of the policy document, although not yet officially endorsed by the Government of Bangladesh, was summarized for that purpose and briefly discussed. The unofficial executive summary can be found in Annex 4.

The headlines of the policy were highlighted by the Executive Engineer of the Rangamati District, and viewed in the light of a number of focus issues identified through the problem tree. It was noticed that many of the core elements of the National Policy were already to a certain extent addressed during the discussions leading to the composition of the problem tree. To name a few focus issues: 1) DPHE as lead agent, 2) demand based approach, 3) users (gender) perspective, 4) cost sharing, 5) private sector involvement, 6) integrated development, and 7) the need for monitoring.

The "sustainability dream" was also discussed and further analyzed in order to come to grips with this rather difficult but fashionable concept. Five major sustainability fields/factors were identified, which are considered crucial factors for reaching the overall sustainability of a water supply and sanitation program:

- technical sustainability
- financial sustainability
- social, sustainability
- environmental sustainability
- institutional sustainability

3.6 Goal / aim and objectives

After the key areas of concern were identified with the problem analysis and the GoB draft WSS policy as instrument, a plenary brainstorm session was held on the goal/aim and specific objectives of the new WSS program for the CHTD.

The overall **program goal/aim** was formulated as:

To contribute to the improvement of health, specifically to reduce the incidence of water supply and sanitation related diseases.

Specific objectives were described as:

- 1. To increase the access to and use of water supply facilities, thereby guaranteeing a proper/equal distribution of facilities.*
- 2. To increase the access to and use of sanitation facilities.*
- 3. Improved hygienic practices.*

The SMART approach was explained and it was decided that these objectives have at a later stage to be made more specific. Making objectives "smarter" entails making them more:

Specific Measurable Achievable Realistic Time bound

3.7 Strategy: project principles

It was recognized that in order to achieve the objectives, the program has to work along a number of key principles. These principles were called the Principles for the Project Strategy:

<p>The project should work with a flexible, process approach, creating opportunities to include lessons learned at a regular basis.</p> <p>The project has to work with a participatory approach, where the users' perspective is placed in a central position.</p> <p>The project has to be based on a demand approach, building on the demands of women and men.</p> <p>The project should strive for financial, technical, social, environmental and institutional sustainability.</p>

3.8 Stakeholder analysis

Building on the identification as described under 3.4 the stakeholders were clustered into three groups:

public sector
private sector and
international sector

This was followed by an exercise in which the specific actors who are expected to play a role in this water and sanitation program were allocated to the appropriate (governmental) level of functioning. The institutionogram resulting hereof can be found in Annex 5.

This institutionogram will be used at a later stage of the formulation process for assessing the capacity of the various stakeholders to cope with

the tasks and the responsibilities they are expected to fulfill in the program.

The overall picture of organizations and institutions, as presented in Annex 5, shows not only their inter-relationships, but underlines also the complex network of partners (the institutional frame) surrounding and supporting the development program. The need for proper and open communication between these partners is evident if they all are to contribute to the same overall goal of the program.

3.9 Activities

During the problem analysis it had become apparent that the (perceived) need for water (and sanitation) facilities do not always lead to and therefor indicate a demand. As was mentioned, one of the possible causes maybe that men complete and submit the application form for a water source, while the women are not consulted, though they are using it. The group also concluded that this contributes to the lack of ownership and thus lead to poor use of the facilities (see Annex 3).

In this connection it was felt relevant to stimulate an in-depth discussion on needs and demands. For that purpose three questions were formulated:

1. How to identify women's and men's demands for WATSAN activities (mobilization and participation of women and men)?
2. How to make sure that real demands are identified (application, site selection process)?
3. How to adequately address users' demands (facilitation service delivery, provision of services)?

These were discussed in smaller groups and later presented and thoroughly discussed in a plenary session. It was concluded that the three presentations actually contained many elements which could be used for designing a Step by Step approach, an appropriate tool for an users-oriented mobilization process. On basis of the elements as discussed in the workshop, a preliminary proposal for such Step by Step approach is drafted and to be found in Annex 6.

3.10 Contents Project Framework

The last session of the workshop was used to clarify how the Project Framework could be structured in a logical order giving due regard to what has been concluded and discussed during the working sessions, while at the same time complying with the procedural requirements of the Government of Bangladesh, UNICEF, and the prospective donor, the Netherlands Government.

To facilitate the discussion, a format was drafted by the facilitating team, based on these ingredients. After having duly reviewed the draft table of contents, all parties (DPHE, CHTDB and UNICEF) confirmed that the format would be suitable for its purpose:

- With some additions it was felt to give sufficient scope for including all the information generated during the workshop.
- The PCP format was included as well, though more elements were appearing than formally required by the GoB. The major policy principles of the 1997 draft GoB national policy are listed.
- The critical elements as expressed by UNICEF in the ToR for this mission were all screened and included.
- The policy priorities of the Netherlands Government are mentioned. This refers in particular to the need to consider this WATSAN program in the broader context of integrated water management and to give ample attention to issues such as gender, institutional capacity and sustainability. Although no assurance has been given by the Netherlands Embassy, interest in funding such program through UNICEF channels has

been expressed, particularly as the Peace Treaty has now been signed.

This outline for the Project Framework is included in Annex 7.

3.11 How further?

Last but not least during the workshop it was agreed that the ownership and thus the penmanship for this proposal should be with UNICEF and DPHE together. The first draft would be prepared by the IRC team in accordance with its assignment. In this draft the areas would be indicated where additional information is needed, and/or where IRC feels more in-depth discussions and brainstorming is required.

The first draft would be ready before the IRC team leaves the country (mid December 1997) and would be further distributed by UNICEF-Dhaka to all participating bodies for review, comments and adding.

4. Debriefing

At the end of the IRC visit, a debriefing was conducted at UNICEF/Dhaka to share with others the proceedings of the Mission's work. The meeting was attended by the DPHE Superintending Engineer CHT circle, the Program Officer Development (Water Sector) of the Royal Netherlands Embassy (RNE), members of the UNICEF/SDC mission, the Officer in Charge of UNICEF, the Chief WES, and the UNICEF Chief Chittagong and Sylhet Cluster.

The workshop methodology, the first draft of this workshop report and the preliminary lay out (table of contents) for the Project Concept Paper were presented and discussed. Major comments made referred to:

- the innovative way of participatory project formulation, which was considered to be very stimulating,
- the changing role of the Government as facilitator of sector developments, with DPHE as the lead agent and possible involvement of other ministries,
- the scope the program offers to DPHE to work at grassroot level, (so far only resources available to work at Thana level),
- the need for a gender approach,
- the proposed demand based approach as essential for reaching sustainability,
- the necessity to include children's needs,
- the need for behavioral change at all levels of the institutionogram,
- the need for additional inputs in the field of institutional development as well as,
- the usefulness to exchange lessons learned with other donor (Netherlands) funded development projects,
- the need to consider regional concerns and sensitivity of the uniqueness (cultural, environmental, political) of the Hill Tracts Districts.
- the principle interest of the Netherlands Government in the program, starting with possible Dutch participation in the further formulation phase,
- the possible source of Netherlands funding under the "Reconstruction and Rehabilitation" program.

It was resolved that after the debriefing, a final version of the Workshop Report and a first draft Project Concept Paper would be completed by the IRC team, and handed over to UNICEF/Dhaka to be distributed to all participants of the workshop for further action as described in Section 3.11.

At a later stage, it was agreed that these documents would be officially submitted to the Netherlands Embassy as well as the Chief Engineer of DPHE. It was also said that should the Netherlands Government be prepared to fund the program, then it would probably be possible under the 1999 budget only.

Annex 1 Program of visits (November 29- December 14, 1997)

Saturday November 29	-arrival
Sunday November 30	-Hartal /Strike -discussions visiting UNICEF/SDC & WB Mission on working methodology in WATSAN programs. -meeting Deputy Res. Rep. UNICEF -discussions UNICEF WES section
Monday December 1	-meeting DPHE Chief Engineer -meeting Chief Planning -video viewing community approaches (Care/ Sodis) -briefing arsenic situation by WB/UNDP RWSSG
Tuesday December 2	-meeting UNICEF librarian -briefing Chittagong/NGO situation -discussions Royal Netherlands Embassy -departure for Chittagong
Wednesday December 3	-meeting DPHE Office with Chief Executive Engineer -briefing on workshop with DPHE, CHTDB and UNICEF -start workshop
Thursday December 4	-workshop continuation
Friday December 5	-discussing framework project proposal -writing workshop cum Mission report
Saturday December 6	-preparing lay out for Project Concept Paper -writing workshop cum mission report
Sunday December 7	-Hartal/Strike -team discussions on draft GoB policy -drafting institutionogram
Monday December 8	-continuation plenary workshop
Tuesday December 9	-continuation workshop -closing workshop -dinner with Superintending Engineer
Wednesday December 10	-Hartal/Strike -departure for Dhaka (hopefully) -report writing -health club
Thursday December 11	-preparing for debriefing and report writing -debriefing with DPHE, UNICEF and the Dutch Embassy -exchange SDC/UNICEF Mission experiences
Friday December 12	-debrief at RNE -discussions Chief WES -finalizing workshop report -preparing first draft project framework -dinner Mr Wurie
Saturday December 13	-visit ITN Center BUET -draft project framework
Sunday December 14	-meeting Chief Engineer (tentative) -departure to the Netherlands

Annex 2 List of Participants of the Workshop

PREPARATION OF PROJECT CONCEPT PROPOSAS FOR INTEGRATED WATER & ENVIRONMENTAL MANAGEMEN IN THREE HILL DISTRICTS.

03-10.12.97, PHE, CHITTAGONG

LIST OF PARTICIPANTS

<u>NAME</u>	<u>DESIGNATION</u>	<u>ATTENDENCE REMUNERATION</u>	<u>SIGN.</u>
1. DAUDA B. WURIE	PROJECT OFFICER,WESS	UNICEF FAX 58,DHAKA 9336701-18	
2. RITA ROY DAS	CONSULTANT,SHESHU ANGINA RES ;	822957	
3. MD. SIRAJUL HOQUE, MIRPUR, DHAKA	-DO-	242, SOUTH PIRERBAGH	
4. FAHIM U AHMED	PROJECT COORDINATOR	COX'SBAZAR	
5. MD. KHALID BIN SAYED	RESEARCH ASSISTANT	SHESU ANGINA	
6. KAZI REZA ULLAH	E.E.,DPHE	BANDARBAN	
7. NAIMUL ISLAM	CONSULTANT	WESS/CHT/UNICEF	
8. SHAFIQ UDDIN AHMED	SUPDT. ENGINEER	DPHE, HILLTRACTS CIRCLE	
9. MOHITUR RAHMAN	E.E, DPHE	RANGAMATI	
10. ESTHER DE LANGE	IRC-THE NETHERLANDS		
11. CORNELIE VAN WAEGENINGH	IRC-THE NETHERLANDS		
12. JAN E ALAM	DPD,CHTDB	RANGAMATI	
13. S M LOKMAN HAKIM	DPD,CHTDB	KHAGRACHARI	
14. JESSIECA IRFAN	UPC, UNICEF	KHAGRACHARI	
15. MD. SHAHIDUL HAQUE BHUIYAN	DPD,CHTDB	BANDARBAN	
16. INDRANI CHAKMA	UPC,UNICEF	RANGAMATI	

Annex 3 Problem Analysis for the water supply, sanitation and hygiene activities in CHTD

less sustainability

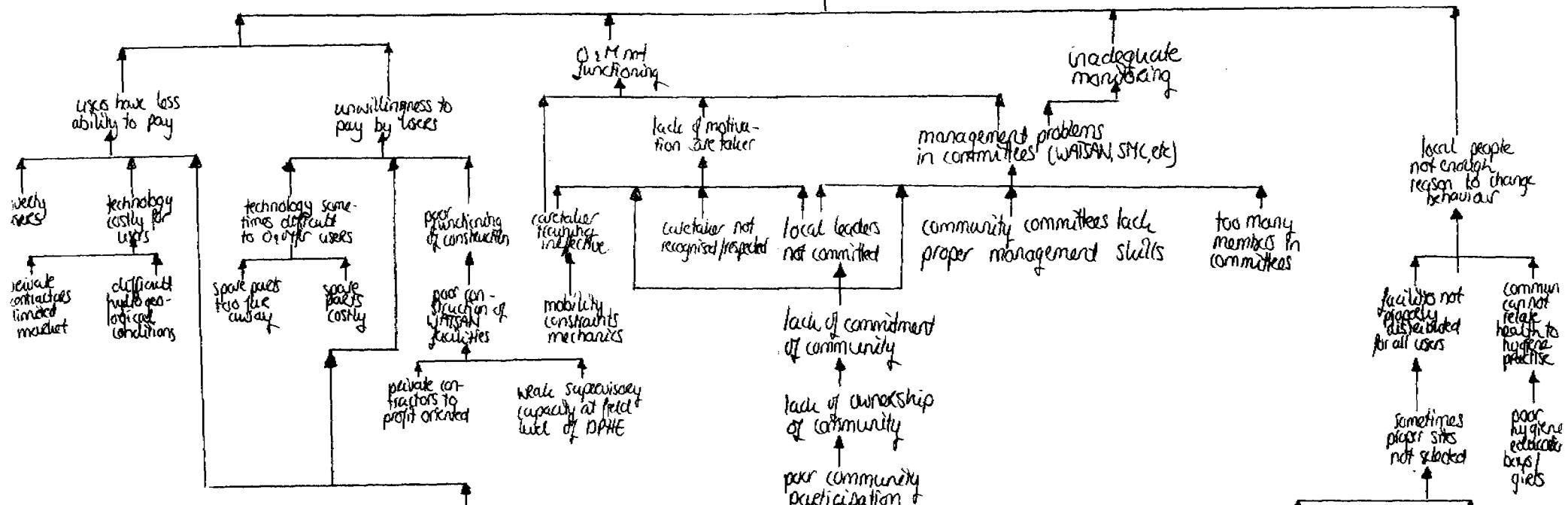
less coverage of water supply and sanitation

poor use of WATSAN facilities

insufficient WATSAN facilities

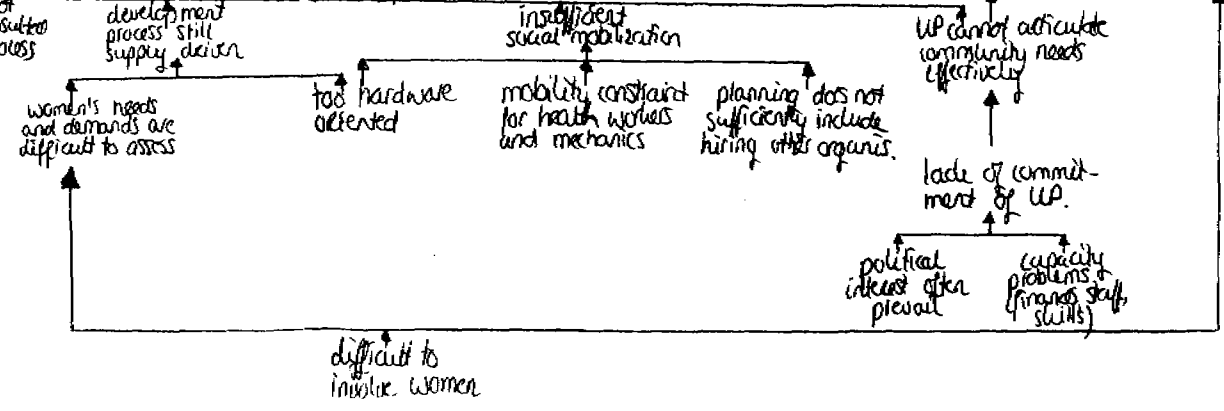
General problems related to WATSAN activities:

- need ≠ demand
- english language
- lack of funds
- social problems not reflected by IMF/WB
- no effective marketing
- chaotic communication
- poor coordination
- ideas from outsiders not accepted by local people



Problems affecting overall development in CHTD:

- less accountability
- bureaucracy
- political instability
- bad communication
- poor education



Annex 4 Unofficial Executive Summary draft National Water Supply & Sanitation Policy (December 1997)

BACKGROUND

THE OVERALL GOAL OF IMPROVING GENERAL HEALTH OF PEOPLE IS ONLY PARTIALLY FULFILLED IN SPITE OF SIGNIFICANT ACHIEVEMENTS IN WATER SUPPLY COVERAGE

- ☐ INCIDENCE OF MORBIDITY & MORTALITY DUE TO WATER BORNE DISEASES REMAINS HIGH
- ☐ ACHIEVEMENTS IN BEHAVIORAL CHANGE IS STILL LOW
- ☐ DISPARITIES IN ACCESS TO WATER SUPPLY STILL HIGH ESPECIALLY IN LWTA
- ☐ THE SUSTAINABILITY QUESTION REMAINS A DREAM

KEY ISSUES

- ☐ GOVERNMENT TO PLAY AN INCREASINGLY FACILITATING ROLE
- ☐ GREATER COMMUNITY/USER ROLE/PARTICIPATION AT ALL LEVELS
- ☐ GREATER ROLE FOR THE PRIVATE SECTOR & NGOs / CBOs

OBJECTIVE

ALL CITIZENS TO BE PROVIDED WITH IMPROVED WATER SUPPLY & SANITATION SERVICES BY 2010.

PRINCIPLES

- ☐ ESTABLISH A MORE EFFICIENT SERVICE DELIVERY SYSTEM, CATERING ALSO TO THE NEEDS OF THE UNDERPRIVILEGED
- ☐ WATER HAS ECONOMIC VALUE & NOT A FREE COMMODITY. THEREFORE MUST BE PRICED ACCORDINGLY
- ☐ ACTIVE PARTICIPATION OF USERS WITH SPECIAL EMPHASIS TO ROLE OF WOMEN

☐ SERVICE LEVEL WATER SUPPLY

RURAL = 35 PERSONS PER POINT SOURCE
URBAN = ONE HOUSE CONNECTION PER HH OR 50 PERSONS PER POINT SOURCE

SANITATION

RURAL & URBAN = ONE LATRINE PER HH

- ☐ DPHE REMAINS LEAD AGENCY FOR RWSS AND SHALL GUIDE SECTOR DEVELOPMENT EFFORTS
- ☐ OPERATION & MAINTENANCE SHALL BE RESPONSIBILITY OF USERS. (Govt. shall empower and train user groups and local Govt. bodies to run their facilities independently)
- ☐ GoB SHALL DECENTRALIZE DECISION MAKING AND ENCOURAGE CAPACITY BUILDING/INSTITUTION STRENGTHENING, THROUGH TRAINING ETC. FOR BETTER SERVICE DELIVERY.
- ☐ GoB SHALL PROVIDE ENABLING ENVIRONMENT FOR ACTIVE PRIVATE SECTOR INVOLVEMENT.
- ☐ WATER & SANITATION SERVICES TO BE DEVELOPED WITHIN THE WIDER CONTEXT OF SOUND ENVIRONMENTAL MANAGEMENT PRINCIPLES.

POLICIES

RURAL WATER SUPPLY

- ☐ ALL COMMUNITIES IN THE RURAL AREAS SHALL HAVE ACCESS TO BASIC WATER SERVICES BY 2010 AT ONE POINT SOURCE PER 35 PERSONS
- ☐ COMMUNITIES SHALL BE THE FOCUS FOR ALL WATER SUPPLY ACTIVITIES. ALL STAKEHOLDERS, INCLUDING PRIVATE SECTOR & NGOs SHALL PROVIDE COORDINATED INPUTS UNDER LEAD ROLE OF DPHE

WATER SERVICES SHALL BE PROVIDED ON THE BASIS OF DEMAND & COST SHARING PRINCIPLES, AIMING AT COMMUNITIES PAYING:

- 50% COST OF HP INSTALLED IN SWTA
- 25% COST OF HP INSTALLED IN LWTA
- 20% COST OF HP INSTALLED IN DEEP TW AREAS & AND OTHER TECHNOLOGIES FOR DIFFICULT AREAS

- ☐ USERS SHALL BEAR ALL O & M COSTS
- ☐ WOMEN TO PLAY A MORE ACTIVE ROLE AT ALL STAGES OF THE PROCESS
- ☐ ALL APPROPRIATE TECHNOLOGY OPTIONS SHALL BE PROMOTED
- ☐ DPHE SHALL PROVIDE IMMEDIATE RELIEF DURING DISASTERS
- ☐ GOVT. SHALL IMPROVE ITS CAPACITY FOR QUALITATIVE & QUANTITATIVE MONITORING, ANALYSIS OF INFORMATION, POLICY IMPLEMENTATION, EVALUATION & REVIEW.

RURAL SANITATION

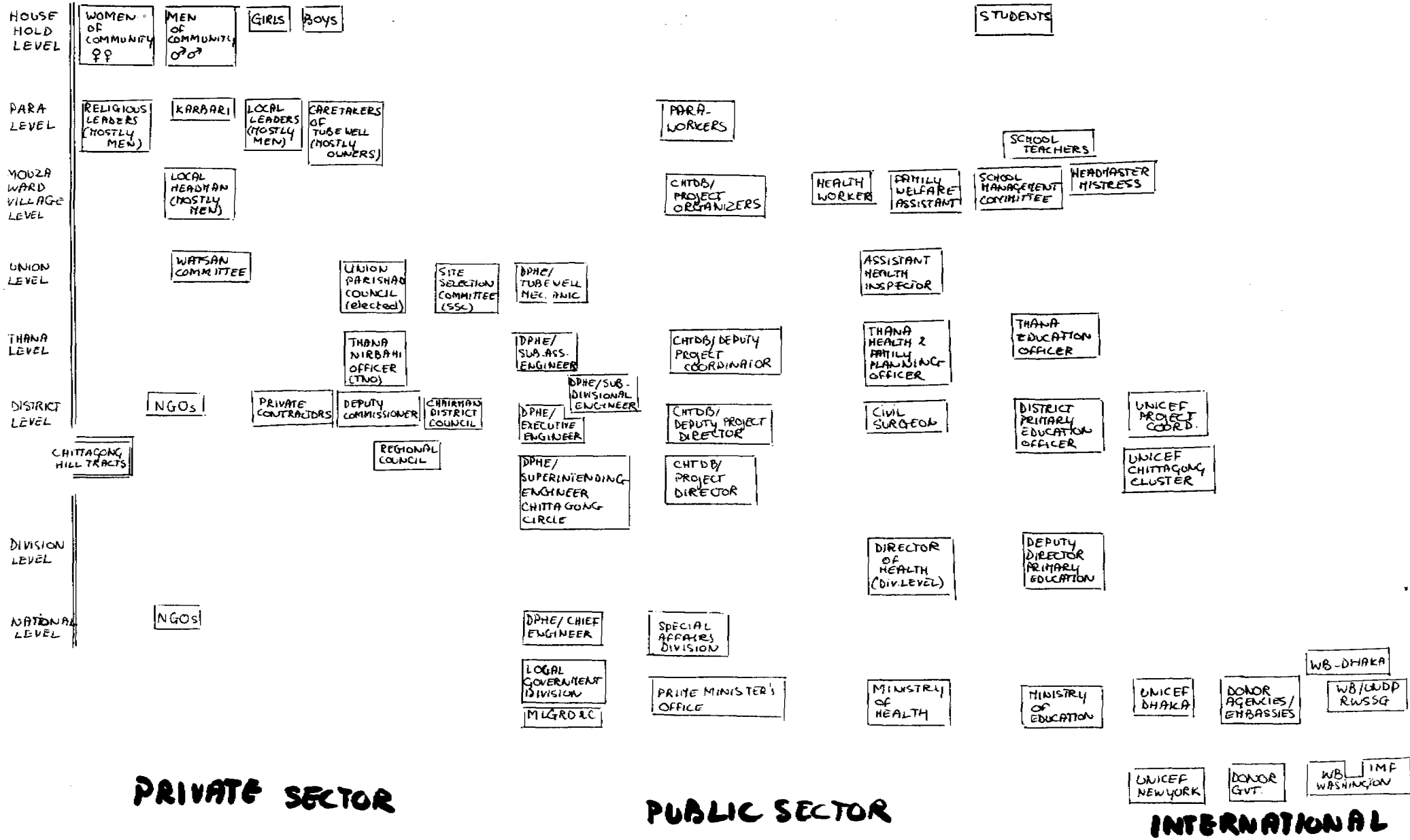
- ☐ ALL RURAL HHs TO HAVE ACCESS TO BASIC SANITATION BY 2010 ON THE BASIS OF ONE HH, ONE LATRINE
- ☐ COMMUNITIES SHALL BE THE FOCUS FOR ALL WATER SUPPLY ACTIVITIES. ALL STAKEHOLDERS, INCLUDING PRIVATE SECTOR & NGOs SHALL PROVIDE COORDINATED INPUTS UNDER LEAD ROLE OF DPHE
- ☐ COMMUNITIES SHALL BEAR FULL CONSTRUCTION AND ALL O & M COSTS

- ☐ COST MAY BE SUBSIDIZED IN THE CASE OF HARD CORE POOR COMMUNITIES, EDUCATIONAL INSTITUTIONS, MOSQUES & OTHER PLACES OF WORSHIP. SEPARATE FACILITIES SHALL BE PROVIDED FOR WOMEN IN ALL CASES
- ☐ BEHAVIORAL DEVELOPMENT AND CHANGES IN USER COMMUNITIES SHALL BE BROUGHT ABOUT THROUGH SOCIAL MOBILIZATION & HYGIENE EDUCATION IN ALLIANCE WITH MOH, NGOs, CBOs , SOCIAL ORGANIZATIONS & OTHER SIMILAR INSTITUTIONS.
- ☐ WOMEN SHALL BE ENCOURAGED AND SUPPORTED TO ACTIVELY PARTICIPATE IN DECISION MAKING DURING PLANNING, IMPLEMENTATION, O & M.
- ☐ SANITATION PROGRAMS SHALL SUPPORT A RANGE OF TECHNOLOGY OPTIONS FOR WATER & ENVIRONMENTAL SANITATION INCLUDING WASTE DISPOSAL.
- ☐ GOVT. SHALL IMPROVE ITS CAPACITY FOR QUALITATIVE & QUANTITATIVE MONITORING, ANALYSIS OF INFORMATION, POLICY IMPLEMENTATION, EVALUATION & REVIEW.
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Annex 5 Institutionogram



PRIVATE SECTOR

PUBLIC SECTOR

INTERNATIONAL

Annex 6 Step for working with a demand based approach

Identifying, ensuring and adequately addressing
real users' demands

1. Household survey, done by caretakers.
2. Establishment of a Ward WATSAN Committee.

A Ward WATSAN Committee must:

- be a legitimate body
- have credibility
- have the confidence of the community,
- must be near to and knowledgeable about the community's problems
- be manageable (not too big)
- work!

A Ward WATSAN preferably has five members, thereby taking into account gender balance, manageability, ability to meet training needs of its members, and functioning in case of absence. A proposed composition has been made:

- 1 female UP member
- 1 paraworker (mostly female)
- 1 influential female community member
- 1 tube well mechanic (from DPHE)
- 1 influential male community member

The following issues concerning Ward WATSAN Committees still have to be addressed:

- What will be exactly the tasks and responsibilities of a Ward WATSAN Committee in the field of social mobilization, planning, O & M and application procedures, site selection ?
 - Will the members of the Ward WATSAN Committee receive a salary for their involvement (important for accountability) ?
 - Need for capacity building of Ward WATSAN Committee members.
1. Ongoing social mobilization, advocacy and awareness through conducting meetings at para level (para center), posters, documents and film.

In principle the paraworker will be responsible for carrying out these activities. However, in view of a possibly heavy workload of the paraworker as well as the advantages of regular coordination, it is advisable if the paraworker is assisted by at least one other member of the Ward WATSAN Committee.

2. A contribution is raised by the female caretaker from the ten households and forwarded to the Ward WATSAN Committee along with a application form comprising of signatures of the paying members (members from 10 households). A copy is sent to DPHE's Executive Engineer.
3. The Ward WATSAN Committee deposits the community contribution into a special account and forwards the bank draft to the Executive Engineer.
4. DPHE at district level, with the concern of the head office, designs technology options that are appropriate for the CHTD. If needed/wanted, a consultant may be hired.

5. The Executive Engineer releases a work order for the construction or rehabilitation of the required facility in a tender procedure to contractors. The contractor is chosen on the basis of three quotes. The supply and quality of materials at local level is monitored by DPHE. Training of private "mistris" is needed to orient them to the technology design.

6. To ensure the quality of the service, the caretaker and the paraworker who are provided with a basic training to assess the quality of the construction must sign a work completion report before payment is made.

7. Operation and maintenance

- Through care taker family (CTF) training as usual.
- Additionally, one trained paraworker or community organizer in each para, village or ward should be trained.
- A Ward member or the Mouza Headman will be responsible and accountable for maintenance under the monitoring of the Ward WATSAN Committee.
- Spare parts should be made available at Union level with the accountability of the Chairman or Secretary of the Union Parishad.
- A maintenance (revolving) fund will be created at ward/mouza level consisting of 50% community contributions and 50% contribution from the project. The paraworker will receive training and will be held responsible for keeping the accounts.

1. Cost sharing

The 10 households have to contribute money for the construction, which will be collected by the caretaker. The contribution should be limited to Taka. 500 per WATSAN in the first 2 to 3 years of implementation. This has to be reviewed/ revised upwards as necessary.

2. Sanitation

- Pilot study to select appropriate technologies has to be carried out by DPHE, possibly by hiring a consultant (partly ongoing).
- For the construction of the sub-structure 50% of the cost has to be born by the household, and 50% by the project.
- The super-structure (fencing, shade) has to be constructed by the users.

1. Hygiene practices

- The Ward WATSAN Committee has to be responsible to create awareness through social mobilization on hygiene practices.
- The Ward WATSAN Committee will be supported by communication materials.

New roles of DPHE

From the new WSS policy of the GoB it is very clear that DPHE will have to orient itself to new a role and responsibilities in the future. Decisions related to this new role are off course outside the scope of this project. However, the project will offer a good first opportunity to translate the policy of working in new partnerships with all stakeholders in water supply and sanitation, into practice. Furthermore, it offers an excellent platform to exchange and discuss ideas on roles and responsibilities among the various stakeholders involved, as was also the case in the preparatory workshop which was held in Chittagong, December 1997.

During these discussions, the following new tasks of DPHE were roughly identified:

- Technology design
- Setting of quality guidelines and control of materials
- Monitoring
- Ensuring that procedures are in place
- Partial and decreasing supply of spare parts

Annex 7 Project Framework, Table of Contents

1. Situation analysis

- Current situation in the CHT Districts
- Problem analysis (problem tree)
 - * first results from ongoing baseline survey
 - * Reflection of the problem tree
 - * lack of ownership by community over Watsan facilities, leading to poor use of facilities
 - * difficult to involve women, too much supply driven, too much hardware, lack of community commitment.
 - * demand formulated by men whereas need is perceived by women
 - * technology costly and difficult to operate and maintain, unwillingness to pay among others, poor use of facilities.

2. Emerging issues and areas of focus (justification)

- Poverty and reduced ability to pay
- Peace Accord
- New government policy for WSS
 - * Changing roles and responsibilities of the different stakeholders
 - * Government acting as a facilitator
 - * Effective empowerment of communities, taking into account gender, cultural and ethnic issues
 - * private sector involvement (contractors and NGOs)

3. Goal / aims and objectives

to be made more specific, more measurable, achievable, more realistic, time bound : SMART)

- Goal/Aim (on international and national level)
 - * to contribute to the improvement of health, specifically to reduce the incidence of water supply and sanitation related diseases.
- Project objectives
 - * to contribute to access to and use of WATSAN facilities, thereby guaranteeing a proper and equal distribution of facilities.
 - * to increase the access to and use of sanitation facilities improved hygienic practices

4. Expected outputs

5. Strategy

- flexible, process approach creating a learning environment
- participatory, users perspective
- demand approach, demand of men and women
- sustainability approach: striving for financial, technical, social, environmental and institutional sustainability.

6. Institutional analysis

- Stakeholder analysis:
- Who are partners/players in water supply, environmental sanitation, hygiene
- Institutionogram (for capacity strengthening)
- Project management as part of the institutional frame

7. Activities/interventions

- Institutional strengthening in light of changing role government, private sector etc.

- How to get women and men from un- and under served areas involved
- How to ensure a demand based approach: mobilization, awareness, application, site selection,
- How to ensure community ownership

- Cost sharing and financial arrangements
- Women's and men's willingness to pay
- Women's and men's ability to pay

- Ward WATSAN committees, composition and requirements
- Social mobilization
- Technology selection

8. Time table

- slow start, giving room for the process and the participatory approach. (not discussed at length)

9. Monitoring

- Process/indicators
- enabling the partners to obtain monitoring skills.

10. Project management

- Implementation
- Reporting
- Transfer/ownership

11. Proposed contractual relationship

- Budget and project means
- Financing

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Annex 9 Persons met

UNICEF Dhaka

Dr. Monica Sharma	Deputy Representative
Mr. Aung Tun Thet	Senior Program Officer
Dr. Deepak Bajracharya	Head WES Section
Mr. Dauda Wurie	WES Project Officer
Ms. Dipa Sen	WES Project Officer
Mr. Shafiqul Islam	Chief Chittagong and Sylhet Cluster

Royal Netherlands Embassy

Mr. Jan Waltmans	First Secretary (Development)
Mr. Zahir Uddin Ahmad	Program Officer Development (Water Sector)
Mr. Peter de Vries	First Secretary Development (Water Sector)

World Bank

Mr. Robert Robelus	Environmental Assessment Specialist Land, Water and Natural Habitats Division, Environment Department
Ms. Kirstin Hommann	Economist, Energy and Infrastructure Operations Division, South Asia Country Dept.
Mr. Carter Brandon	Task Team Leader Bangladesh, Environmental Economist, Environmental and Natural Resources Division, Asia Technical Department.

UNDP/WB Water and Sanitation Program - RWSG South Asia

Mr. Babar N. Kabir	Country Sector Leader, Task Force Leader Arsenic Project
Mr. Haroon Ur. Rashid	National Country Officer
Mr. S.A.Jafar Shamsuddin	Rural Specialist

DPHE Dhaka

Mr. S.A.K.M. Shafique	Chief Engineer
Mr. Md Khoda Bux	Assistant Chief Engineer
Mr. Farid Uddin Ahmed	Superintending Engineer Planning

UNICEF/SDC Mission

Mr. Kenneth D. Gray	Senior WES Officer, HQ
Mr. Arun Kumar Mudgal	WES Project Officer, New Delhi
Mr. Pierre Walther	FRISA Engineering Ltd. (consultant of SDC)

WHO

Mr. Mohammad Mofazzal Hoque	Nat. Field Program Officer
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WaterAid

Ms. Clarissa Brocklehurst	Bangladesh Country Representative
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ICDDR,B

Ms. Irene Kranzlin	Research Fellow En'tal Health Programme
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ITN Center (International Training Network)

Prof. M. Feroze Ahmed	Director and Chairman of the Board
Mr. Md. Akhtaruzzaman	Coordinator & Training Consultant