



Decentralised rural water and sanitation delivery in Ghana

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By 1992 ONLY 2.2 million (28%) of the 9.4 million rural population of Ghana had access to improved water supplies¹. However, almost 30% of the improved rural water supply systems were not operational, thus reducing effective coverage to about 20%. For rural sanitation only about 6% had access to either flush toilets or bucket latrines. The approach adopted was supply driven with virtually no community involvement in the delivery and management arrangements. The then Ghana Water and Sewerage Corporation was responsible for safe water provision in the entire country. Because of the urban bias and rural deprivation policies in the provision of rural infrastructure services when handled by one organisation, the government created a Division within the GWSC to focus on accelerating coverage in the rural areas and small towns of the country.

The process of reforming the water sector especially the rural water supply culminated in the creation of a separate public agency charged with the responsibility of increasing access to safe water in the rural areas of Ghana. The broad objectives were to shift the sector from the supply driven to the demand driven approach based on the decentralisation approach by introducing community management and ownership and eliciting significant private sector involvement with public sector agencies playing facilitation roles.

The National Community Water and Sanitation Programme (NCWSP)

The broad objectives of the NCWSP was to shift the sector to a demand responsive or demand driven² approach by introducing community management and ownership, and eliciting significant private sector involvement. In particular:

- Provide reasonable access to safe water to communities, with populations over 75, that are willing to contribute towards the capital cost and pay for all the recurrent costs of improved facilities;
- Improve the quality of life of the rural population, through the promotion of better health practices, focusing on the use of clean water, good hygiene, and proper excreta disposal;
- Establish private sector capacity to construct low cost latrines and hand dug wells, to maintain manual and mechanised pumps, and to distribute equipment and spare parts;

- Increase capacity at the district level to support communities in planning and maintaining water supply and sanitation facilities.

Programme components

1. Safe water supply services: Communities actively participate in decision making on the choice of technology, siting if it is point source services
2. Sanitation: private artisans and small contractors are trained and operate in each district;
3. Hygiene: is built into the process of mobilising and training the community to manage the water and sanitation facilities,
4. Private sector development: private sector firms are contracted to provide planning, construction, maintenance and spare parts distribution services. Occasionally, the private sector is assisted financially and technically, as well as with practical training.
5. Human Resource Development and Training; establishment of multi-disciplinary teams at the regional and district levels to provide support to the communities and development of a comprehensive plan for retraining, reorientation and redeployment of existing staff to the private sector

The Community Water and Sanitation Agency (CWSA)

The Community Water and Sanitation Agency, is a statutory body (established by Act 564 of 1998) charged with facilitation and management of the national strategy for community water and sanitation delivery throughout the country. The CWSA is highly decentralised with multi-disciplinary staffing located in the 10 regions. The Regional teams of CWSA directly support the DAs to plan, implement and manage safe water and related sanitation services.

Funding of rural water supply and sanitation facilities in Ghana is from the Central and Local Governments, communities, and several development partners (e.g. IDA, CIDA, DANIDA, EU, JICA, KFW, AFD, and some religious bodies).

Key elements of the programme

The key elements of the programme include:

- A) Demand responsive approach through which communities decide if they want to participate and their preferred service level based on willingness to fulfil their obligations, including payment.
- B) Decentralisation of planning, implementation and management of services by (1) making communities decision-makers and managers of the water supply and sanitation facilities; (2) making District Assemblies (DAs) more autonomous and better able to assist communities obtain improved services and (3) linking CWS into district development plans and activities.
- C) Intensive community development and training programs to ensure that they have adequate information to understand the overall program concept and strategy, make an informed choice about preferred service levels and management options, and have the skills to sustain the services.
- D) Private sector (including NGO) provision of all goods and services, and responsiveness to the communities
- E) Public sector playing a facilitating role with CWSA to manage the CWS Program, provide technical assistance to DAs and strengthen private sector participation and capacity.
- F) Stakeholder consultation, including external support agency and NGO co-ordination, joint annual reviews and sharing of experiences
- G) Adaptive approach: encouraging learning, innovation, participatory monitoring and evaluation, and impact assessments, especially in areas such as: full participation of women at all levels of the program; application of lower cost technology and service level options; effective hygiene promotion and training; sustainable supply chains of goods and services and especially spare parts at the local level; targeting areas that have lower coverage; and increasing the role of communities in decision-making, service financing and implementation.

Financial arrangement

A cost sharing arrangement stipulate that communities contribute at least 5-10% and the DAs 5% of the capital costs of water facilities, with levels of cost recovery expected to increase over time. Schools may also participate in the program, with the same rules applying as for communities. External Support Agencies cover about 90% of the capital costs for works, as well as software and training costs.

The project cycle

The project cycle usually goes through a 12-stage process. These steps include information and promotion; community identification and pre-selection, community proposal formulation; and community sub-project appraisal. Other stages include funds disbursement to District assemblies;

District assemblies/communities contracting private sector providers of goods and services; construction and completion of works and services; operations and maintenance; auditing, and monitoring and evaluation

Lessons

Information dissemination on project procedures, rules and regulations including clearly defined roles and responsibilities of all key stakeholders is crucial to the success of decentralised rural water and sanitation delivery.

Integrating hygiene and sanitation promotion into safe water supply delivery

It is essential for the adoption of approaches that will make sanitation “attractive” for rural household to invest resources- labour, materials and money. In Ghana, the public-private partnership initiative for hand washing is one such important arrangement to prevent excreta related diseases among especially the poor and children.

Cost sharing

There is the need to build consensus on community contribution either in cash or kind. Dialogue with NGOs and other investors are needed to agree on key principles of the national strategy.

Counterpart contributions to civil works should be sought from communities and local government, rather than from central government, in order to avoid delays in implementation, while still ensuring ownership and commitment from end users.

Timing of project cycle

DAs need to integrate CWS as a component of their annual rolling plans. Timing is also essential for community contribution. As the sources of revenue of rural dwellers are seasonal, it is essential that the timing of the contribution coincide with the period when beneficiaries may have harvested and marketed their produce.

Disbursement

Timely disbursement in tranches has the advantage of building mutual trust between communities/districts, service providers and project managers.

Delays in releasing tranches often mean that sub-project implementation come to a halt for long periods causing contractors to lose interest/money while inflation can affect the cost of such projects.

Regular training will help prevent serious complications related to disbursement. Disbursing funds to DA accounts in tranches based on works completed also allows for greater oversight and control of funds by the project.

Procurement of goods and services

It is appropriate to institute built-in incentives for DAs to procure economically and efficiently. There should be, at the beginning of each year, an agreed workplan and budget.

This helps in effective and efficient monitoring to prevent malfeasance. Any savings will need to be ploughed back into other water and sanitation activities.

It is also important to have periodic unit cost data as well as standard design provided by project managers to DAs/communities.

Contracting issues

The use of simple standard contracts for hiring skilled labour is essential e.g. how much is the value of the contract, duration of contract who supervises or approves of completion works, what is the payment arrangement; how to resolve disputes, details of any retainer etc.

Include warranty and penalty clauses in contracts. It is necessary that Communities, DAs and service providers both understand the implications of warranty and penalty clauses-contract administration.

Calibre of personnel that form the Technical Assistance team must be high:

Technical Assistants play important role in sensitising and mobilising communities to participate in the programme. Thus the need to understand the project concepts and strategies as their performance/input can affect the acceptance, operation and maintenance and sustainability of investment projects.

Country Level Co-ordination:

Different approaches and policies from donors/development partners confuses communities and hinders the performance of the managing agency. Therefore all investors in CWS in a country should adopt one common principle or policy, bearing in mind the variations in strategies may occur which serve as a learning avenue.

Monitoring and evaluation:

Project management need to conduct and capture both financial and physical monitoring in their MIS system. Participatory monitoring at all levels should be integrated into project implementation. It is essential for periodic external auditing to be carried out on project activities.

Conclusion

The decentralised approach adopted by Ghana has brought safe water and improved issues to the fore for the planning, implementation and management of sanitation as both economic and social goods which must be used in a more prudent way. This arrangement helps in the sustainable utilisation and management of water resources and services.

By decentralising the delivery arrangement for safe water and improved sanitation services, the poor and vulnerable in Ghana, many of whom are found in the rural communities, are provided with good drinking water which immensely contributes to improving on their living conditions by enhancing their production and productivity.

Also, much more resources both local and foreign are mobilised for the provision of safe water and improved sanitation services for the attainment of the Millennium Development Goals.

Footnotes

¹ Report prepared for: Ministry of Works and Housing, Ghana, August 1993, *Community Water Supply and Sanitation programme Ghana Strategic Investment Programme*: Cowater International Inc., Ottawa .

² Demand responsive means communities have adequate information on the program to solve their water and sanitation problems, appropriate technology options have been presented to them; they have a choice to make, effective participation in the entire planning, implementation and management of the improved services and integration of gender in safe water and sanitation delivery.

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