Progress Brief 2014-2015

Sustainable Sanitation & Hygiene for All in Bhutan and Nepal

Sustainable Sanitation & Hygiene for All (SSH4A) is SNV's comprehensive approach to ensure equitable and sustainable access to improved sanitation and hygiene by supporting the delivery of districtwide rural sanitation and hygiene services. Developed since 2008 in Asia with IRC, the SSH4A approach is now implemented by SNV in 15 countries in Asia and Africa. The SSH4A programme integrates best practices in sanitation demand creation, sanitation supply chain strengthening, hygiene behaviour change communication, and governance including gender and social inclusion. SNV focuses on strengthening the capacities of local stakeholders to plan, implement, monitor, and sustain sanitation and hygiene interventions.

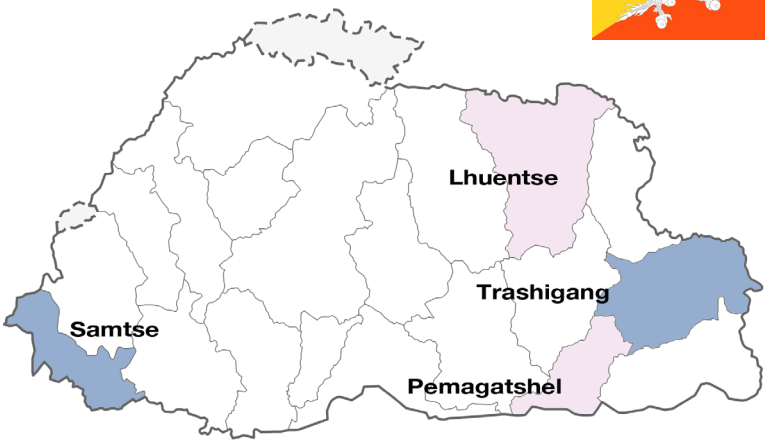
The current phase of the SSH4A programme in Bhutan and Nepal is part of the DFAT Civil Society WASH Fund from May 2014 until April 2018 in partnership with IRC and government partners.

During the first year of the SSH4A programme:

- **85,000** people gained access to 13,000 new sanitation facilities
- More than **50%** of the population now have access to a sanitary toilet
- All existing toilets **are in use** and hygienic standards continue to improve
- **27,000** households gained access to a handwashing facility with water and soap in or near the toilet

SNV in Bhutan & Nepal

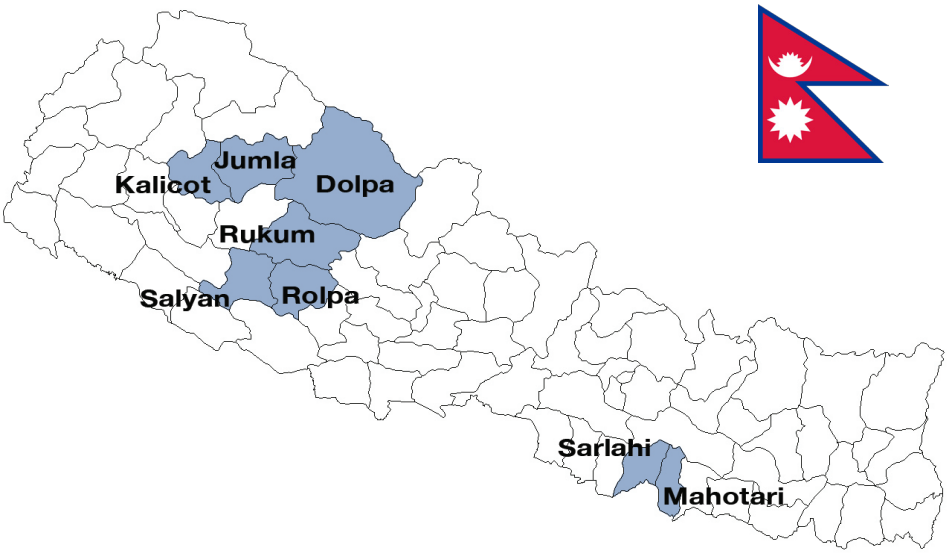
In Bhutan SNV has been implementing the SSH4A programme since 2008 as part of the national Rural Sanitation and Hygiene Programme with the Ministry of Health. Following a successful pilot phase it is now being scaled up by the government across all twenty districts in a phased manner. The DFAT-funded programme is supporting the government in this effort by scaling up the programme across two new districts, providing support to two existing districts (Pemagatshel and Lhuntse) and providing national-level support as the programme is brought to scale. In early 2015 the current phase of the programme started work in Samtse in southwest Bhutan and in 2016 the programme will be expanded to Trashigang in the far east.



Bhutan: SSH4A programme districts

The DFAT-funded SSH4A programme is implemented in **10 districts** in Bhutan & Nepal. It is expected more than **500,000 people** will directly benefit from the 4-year programme.

In Nepal the SSH4A programme was initially implemented in the hilly and mountainous districts of the Karnali Zone in the midwest. The current DFAT-funded programme includes six of the initial districts plus two new districts in the southern plains. In addition to the DFAT-funded programme, SNV in Nepal is also implementing a DFID-funded SSH4A programme in seven more districts. The intended impact of the project's capacity development initiatives is that 85,000 people in Bhutan and 130,000 in Nepal will benefit from access to improved sanitation facilities, a further 145,000 will have improved hygiene behaviour and practices and a wider 330,000 will live within areas declared open defecation free.



Nepal: SSH4A programme districts

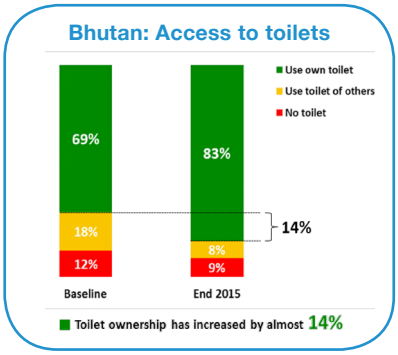
SSH4A Programme Impact | End 2015

Indicator 1: Access to sanitary toilets

This indicator is measured at household level and assesses access to toilets as well as the design and quality of construction of the toilets.

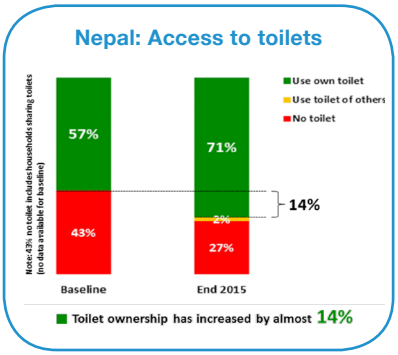
Access to toilets in Bhutan

- Close to 1,700 new toilets were constructed during the first year; as a result toilet ownership increased by some 14% to 83% overall.
- Toilet ownership among the poorest 40% of the households increased by 20% from 53% to 73%.
- 91% of households had access to a toilet, either using their own toilet or using the toilet of a neighbour or relative.
- The proportion of people defecating in the open reduced by some 3% from 12% to 9% and the practice of sharing toilets reduced by some 10%.



Access to toilets in Nepal

- Some 11,200 new toilets were constructed during the first year, and as a result toilet ownership increased by 14% to 71% overall.
- 73% of households had access to a toilet, either using their own toilet or using the toilet of a neighbour or relative.
- The biggest gains in access to toilets were made in the two new terai districts where it increased by almost 28% from 3% during the baseline to 31% by the end of 2015.
- The proportion of people defecating in the open reduced by 16% to 27%.



Performance monitoring in the SSH4A programme

A shared monitoring framework with standard key performance indicators is used as part of SNV's SSH4A programme when reporting progress and results. This paper presents the achievements to date on the following four impact indicators:

1) Progress in number of households (and number of people) with access to a sanitary toilet;
2) Progress in number of households (and number of people) that use a hygienic toilet;
3) Progress in number of people using a sanitary toilet when at home ("use by all, at all times"); and
4) Progress in number of households (and number of people) with adequate hand washing facilities with soap in or near the toilet.

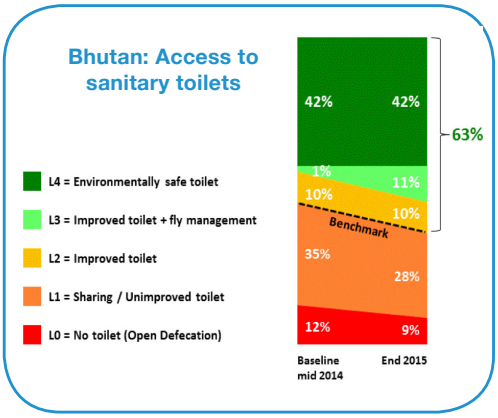
The above indicators measure changes in behaviour and practices which are the results of qualitative processes. The qualitative information is measured with the help of the Qualitative Information System (QIS) where qualitative information is quantified with the help of progressive scales called 'ladders'. Households that are at the lowest levels at the start of the programme can climb to a higher level on the ladders developed for each indicator. The value is in analysing and visualising progressive improvements over the course of the programme.

To be able to continuously observe changes in progress across the intervention districts, village level data is collected by the local authorities. Annual performance monitoring, carried out by SNV and its local partners, complements the existing ongoing monitoring. Since the start of this phase this is done with the help of the Akvo FLOW tool which consists of an Android smartphone app which allows for easy data collection and automated data entries, and an internet-based management tool.

The programme impact presented in this paper reflects the progress made on the above four impact indicators in Bhutan and Nepal since the start of the programme. The impact measured per October 2015 was compared against a baseline obtained in July-August 2014. In Bhutan the results are based on progress made within the given period measured for some 12,000 households in the new programme district of Samtse, whilst for Nepal the results are based on progress measured in eight focus districts with some 75,000 households.

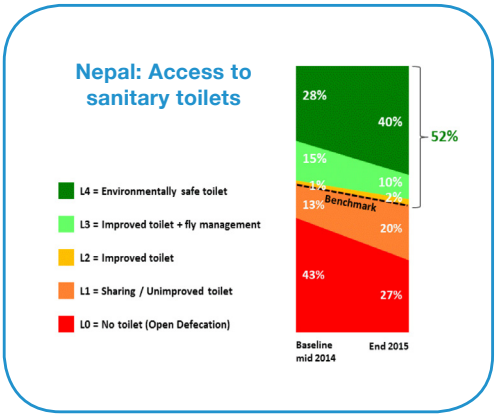
Design and quality of toilets in Bhutan

- The overall quality of the toilets improved with the proportion of improved toilets increasing by more than 10%, from 53% to over 63%.
- The proportion of unimproved or shared toilets reduced from 35% to 28% by the end of 2015.
- 78% of all the existing toilets are pour-flush type toilets, usually with a water seal, which require water for flushing. The remaining toilets are in most cases simpler dry pit latrines.



Design and quality of toilets in Nepal

- The proportion of improved toilets increased by some 8%, from 44% to 52%; adding some 8,000 improved toilets.
- The proportion of unimproved or shared toilets increased during the same period from 13% to 20%.
- 89% of all the existing toilets are pour-flush type of toilets, and the remainder consists mostly of simpler dry pit latrines.

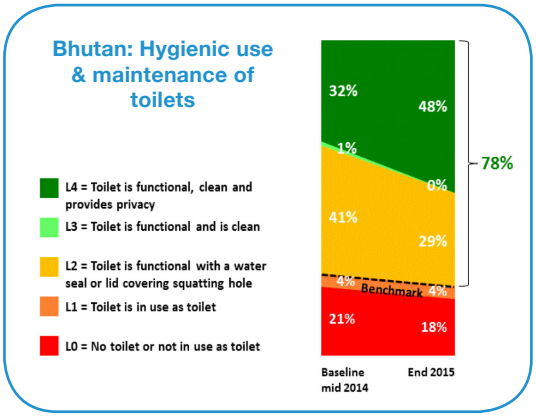


Indicator 2: Hygienic use and maintenance of toilets

This indicator is measured at household level and assesses whether toilets are used or not as well as the quality of operation, maintenance and its hygienic status.

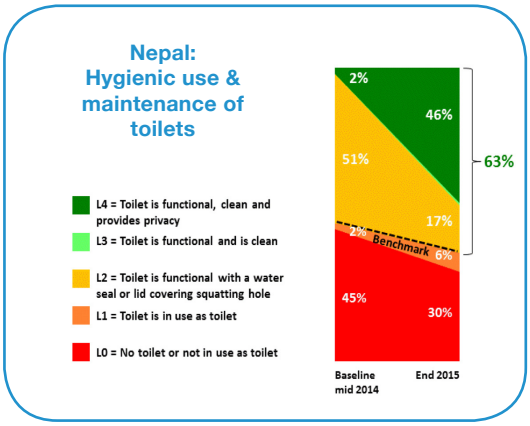
Hygienic use of toilets in Bhutan

- More than 8,000 additional people started to use a toilet.
- The proportion of hygienically used and maintained toilets, those on or above the benchmark, increased by 3%.
- The number of toilets that meet the highest possible standards (level 4 where a toilet is functional, clean and provides privacy to its users) increased by 16% from 32% to 48%.
- The higher wealth quintiles are doing better than the lowest wealth quintiles: 92% of the richest 40% of households but only 65% of the poorest 40% of households use a toilet that is on or above the benchmark.



Hygienic use of toilets in Nepal

- More than 75,000 additional people started to use a toilet.
- The proportion of hygienically used and maintained toilets, those on or above the benchmark, increased by more than 10%.
- The number of toilets that meet the highest possible standards (level 4 where a toilet is functional, clean and provides privacy to its users) increased with some 44% from 2% during the baseline to 44% by the end of 2015.
- Although the hygienic standards of toilets increased across the board, the wealthier households were doing that at faster pace than the poorer households.

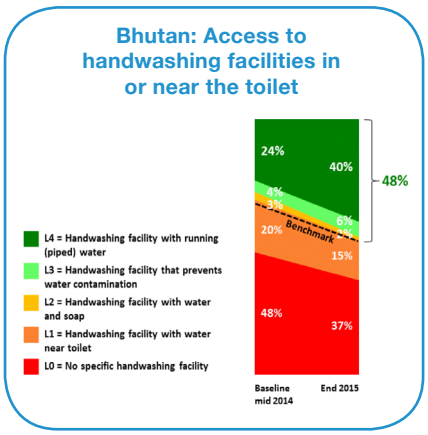


Indicator 3: Access to handwashing facilities with soap in or near the toilet

This indicator is measured at household level and assesses the existence and quality of handwashing facilities in or near the toilet as a proxy indicator for the practice of hand washing after defecation..

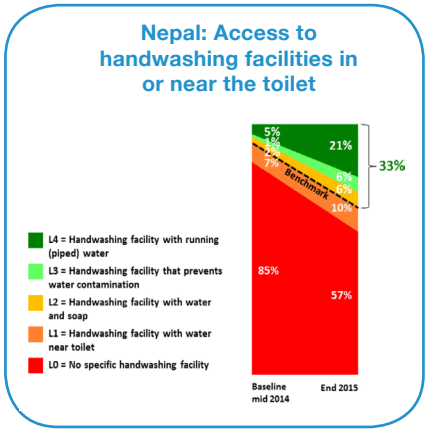
Access to handwashing facilities with soap in Bhutan

- The existence of handwashing facilities with water and soap inside or near the toilet increased by 16% from 32% to 48%.
- Close to 2,000 additional households gained access to a handwashing facility with soap.
- The wealthier 40% of households (63%) are still doing better than the poorest 40% of households (35%).



Access to handwashing facilities with soap in Nepal

- The existence of handwashing facilities with water and soap inside or near the toilet increased by 25% from 8% to 33%.
- An additional 20,700 households gained access to a handwashing facility with soap.
- The wealthier 40% of households (64%) are still doing better than the poorest 40% of households (27%).

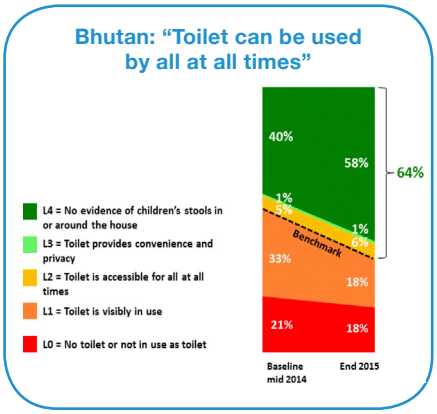


Indicator 4: Using a sanitary toilet when at home ("use by all, at all times")

This indicator is measured at household level and assesses issues such as accessibility, convenience and privacy as a proxy indicator for the use of a toilet by all at all times when they are in or around the home.

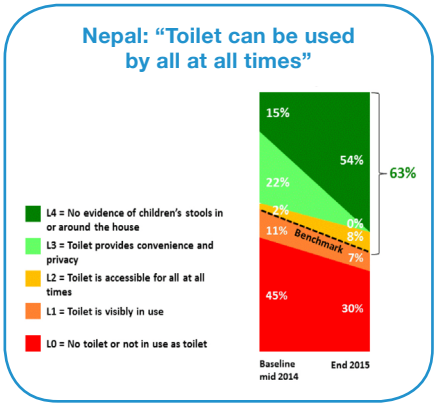
Using a sanitary toilet when at home in Bhutan

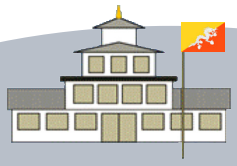
- The proportion of toilets on or above the benchmark increased by more than 19%.
- The proportion of households achieving the highest rung of the QIS ladder (level 4) increased by some 18% from 40% to 58%.
- More than 7,000 households had access to a toilet that met all the criteria to reach level 4, meaning that all faecal matter was disposed of safely including the stool of infants (self-reported).



Using a sanitary toilet when at home in Nepal

- The proportion of toilets on or above the benchmark increased by more than 17%.
- The proportion of households achieving the highest rung of the QIS ladder (level 4) saw an increase of 33% from 21% to 54%.
- More than 44,500 households had access to a toilet that met all the criteria to reach level 4, meaning that all faecal matter was disposed of safely including the stool of infants (self-reported).

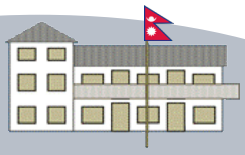




1 district

77 communities

8 districts



75 communities

Some 12,000 households will benefit

Some 75,000 households will benefit

SNV

2015 Achievements

Access to sanitary toilet

Hygienic use & maintenance of toilet

Access to hand washing facilities with soap

13,000 households gained access to new sanitation facilities

1,700 new sanitation facilities

11,200 new sanitation facilities

All existing toilets are in use and hygiene standards continue to improve

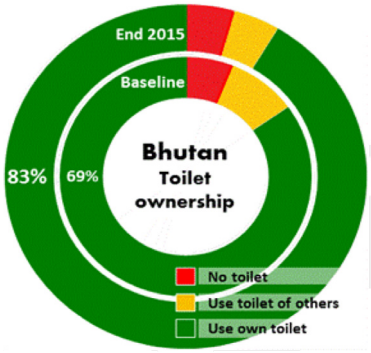
8,000 additional people started to use a toilet

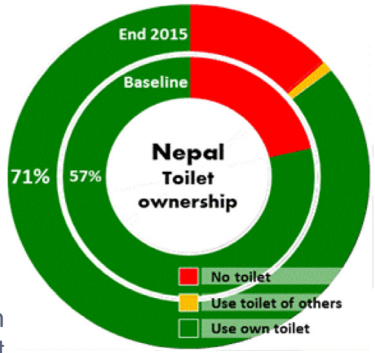
75,000 additional people started to use a toilet

22,700 households gained access to a hand washing facility with water and soap in or near the toilet

2,000 new hand washing facilities

20,700 new hand washing facilities





91% of the population had access to a toilet at the end of 2015

73% of the population had access to a toilet at the end of 2015

Key lessons and focus moving forward

1. Some of the increases observed for impact indicator 2 can possibly be explained by the fact that the criteria for level 4 were adjusted during the past year. In the original indicator level 4 assessed whether anal cleansing material was disposed of safely, whereas now it assesses whether the toilet provides privacy to the users. To avoid future inconsistencies this indicator will have to be monitored uniformly and consistently over the next years.
2. For most of the impact indicators the wealthiest 40% of households are doing better than the poorest 40% of households. Although this is not a surprising finding, the programmes should assess the effectiveness of their pro-poor support mechanisms to ensure that all households have access to improved sanitation and hygiene facilities.
3. Access to sanitation facilities does not automatically translate in an increase of the number of households that have access to a hand washing facility with water and soap in close proximity to a toilet. More needs to be understood why hand washing with soap remains such a difficult behaviour to influence.

SNV is a not-for-profit international development organisation. Founded in the Netherlands nearly 50 years ago, we have built a long-term, local presence in 39 of the poorest countries in Asia, Africa and Latin America. Our global team of local and international advisors work with local partners to equip communities, businesses and organisations with the tools, knowledge and connections they need to increase their incomes and gain access to basic services – empowering them to break the cycle of poverty and guide their own development.

For more information visit www.snv.org/sector/water-sanitation-hygiene

IRC is an international think-and-do tank that works with governments, NGOs, businesses and people around the world to find long-term solutions to the global crisis in water, sanitation and hygiene services. At the heart of its mission is the aim to move from short-term interventions to sustainable water, sanitation and hygiene services. With over 40 years of experience, IRC runs programmes in more than 25 countries and large-scale projects in seven focus countries in Africa, Asia and Latin America. It is supported by a team of over 100 staff across the world.

For more information visit www.ircwash.org

This progress brief was written by Erick Baetings, IRC Senior Sanitation Expert, with the support from Gabrielle Halcrow, SNV Asia Programme Coordinator (Rural) Sustainable Sanitation and Hygiene for All Programme.

The results presented in this paper are based on the performance monitoring data collected, managed and analysed by the rural SSH4A teams of SNV Bhutan and SNV Nepal.

This paper can be found on the on the Sustainable Sanitation and Hygiene for All (SSH4A) project page at: www.ircwash.org/projects/sustainable-sanitation-and-hygiene-all

The SSH4A Programme in Nepal and Bhutan is supported by the Australian Government (DFAT) and the Ministry of Foreign Affairs of the Netherlands (DGIS).