



Policy Brief: National and provincial action planning to reach the 2025 vision – institutionalising SSH4A learning



Sustainable Sanitation and Hygiene for All (SSH4A)

Since 2010, SNV has been directly involved in the Cambodian Government's commitment to the decentralisation of Water, Sanitation, and Hygiene (WASH) services. SNV is doing so by ensuring that the strengthening of governance is an integral part of its programme, particularly with regards to decentralisation, public administration and local service delivery in WASH. SNV's approach to WASH governance has a strong focus on ensuring local administrative reforms through capacitating the functional transfer of WASH activities.

SNV, in collaboration with the Ministry of Rural Development (MRD) and Provincial Departments of Rural Development (PDRDs), has been implementing the Sustainable Sanitation and Hygiene for All (SSH4A) approach in Cambodia since 2012 in Kampot and Kampong Speu provinces. The SSH4A model is recognised as an innovative and integrated decentralised approach to scaling-up access to sanitation in rural areas by building capacities at sub-national levels. SSH4A is essentially a capacity building approach, supporting local governments to lead and accelerate progress towards improved sanitation coverage with a focus on institutional sustainability and learning. The SSH4A approach uses an integrated model that combines sanitation demand creation, sanitation supply chain strengthening, hygiene behavioural change communication and WASH governance.

The SSH4A approach recognises the need to:

- Understand that sustainable sanitation and hygiene is first and foremost about behavioural change. However, whilst demand creation should come first, affordable hardware solutions also need to be in place so that people are able to act upon their newly defined priorities.
- Reach all, by making explicit inclusive strategies with local stakeholders that aim to ensure that the needs of women and men from a range of social groups are taken into account, that effective participation is achieved at all levels and that gender equality is advanced.
- Develop capacities and approaches that can be scalable through a government-led approach, as opposed to focusing exclusively on individual communities.
- Innovate in hygiene promotion practice, linking this to the sanitation drive, but also embedding this practice in long-term health promotion; a long-term strategy is required to sustain sanitation and hygiene behaviour change, beyond one-off triggering and ODF-focused programmes.
- Measure progress in small steps (moving up the sanitation ladder) and measure access as well as the use and maintenance of toilets and handwashing with soap.

The experience with the SSH4A programme in Cambodia has produced valuable lessons that have helped improve the programme further and helped meet the challenges of improving and sustaining rural sanitation gains. As a result of SSH4A implementation, the sanitation coverage in Banteay Meas district was increased from 16% in 2012 to 100% in 2016 (a span of just four years) and was declared Cambodia's first and as yet only

Open Defecation Free (ODF) district in November 2016. Furthermore, the two other target districts of SSH4A - namely Chumkiri and Basedth, where the programme began in 2015 - have reached sanitation coverage of 72% and 80% respectively (as of October 2017).

The Cambodian sanitation context

Current statistics reveal that Cambodia still has the highest prevalence of open defecation in the region (Fig 1). Additionally, it is estimated that the attributable high rates of stunting (32%; CDHS, 2014) costs Cambodia USD 120 million annually in lost GDP (Ikeda, 2013; Moench-Pfanner, 2016).

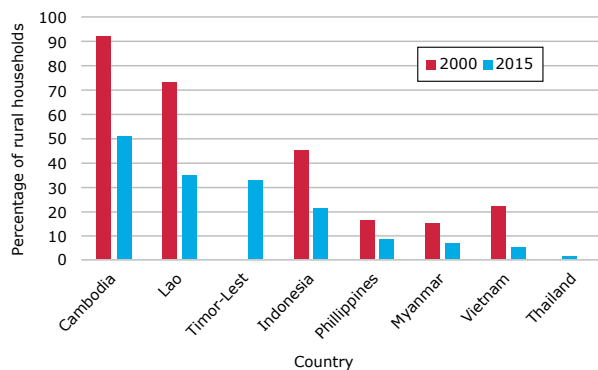


Figure 1 – Proportion of rural households that practice Open Defecation (OD) in the region by year (JMP, 2017)

There are also large socio-economic inequalities in access to basic drinking water, hygiene and particularly sanitation facilities (Fig 2).

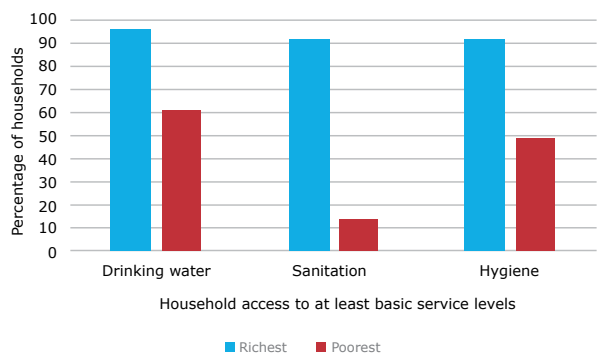


Figure 2 – Inequalities in access to basic water, sanitation and hygiene facilities in Cambodia (urban and rural combined) (JMP, 2017)



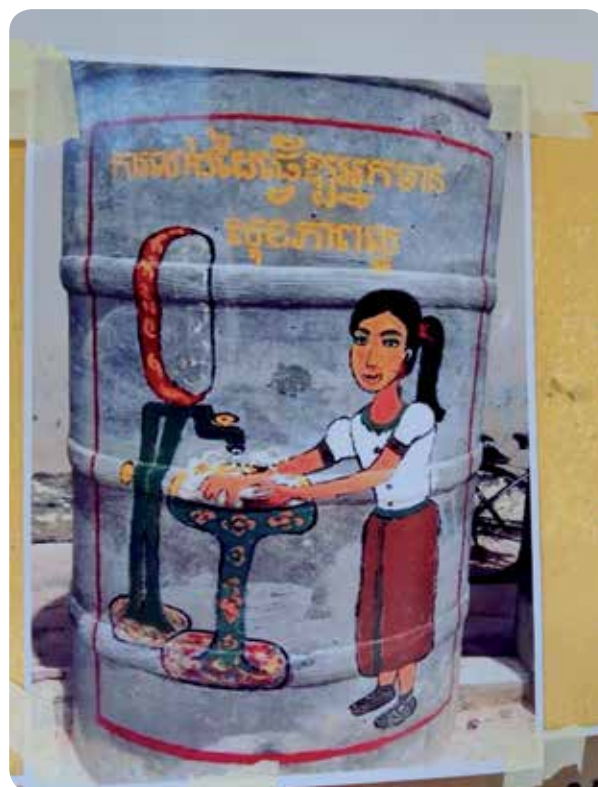
Teacher in Basedth district explains the meaning of his painting during a school wall painting competition to promote sanitation and hygiene

Generations of rural Cambodians have been accustomed to not having and using a toilet at their home. Historically, there has been little resistance to changing traditional open defecation (OD) practices. Awareness of the benefits associated with toilet use was low, sanitation-related products were scarcely available in rural areas and, even if available, a minority of rural households were able to afford them. Even as of the year 2000, nearly 90% of rural households in Cambodia did not have a toilet and practiced OD. However, in more recent years, the Government of Cambodia - and the development partners and donors that support it - have made rural WASH a greater priority.

Initiatives to improve WASH conditions are now guided by the National Strategic Plan (NSP) 2014-2025 and a National Action Plan (NAP) for Rural Water Supply, Sanitation and Hygiene 2014-2018. This is led by MRD. A sector vision has also been set, that by 2025, every person in rural communities will have sustained access to safe water supply and sanitation facilities.

Each of Cambodia's 25 provinces has also established a Provincial Action Plan (PAP) which connects the approaches in the NAP to their province-specific issues and contexts. While the rate of uptake of sanitation facilities in rural Cambodia has increased significantly over the past decade, this momentum will have to be sustained throughout the coming years if the sector vision is to be achieved.

Progress in reducing OD is compared in Figure 3 across SSH4A programme districts and nationwide (rural only).



WASH painting at one of the schools in Basedth district to promote sanitation and hygiene

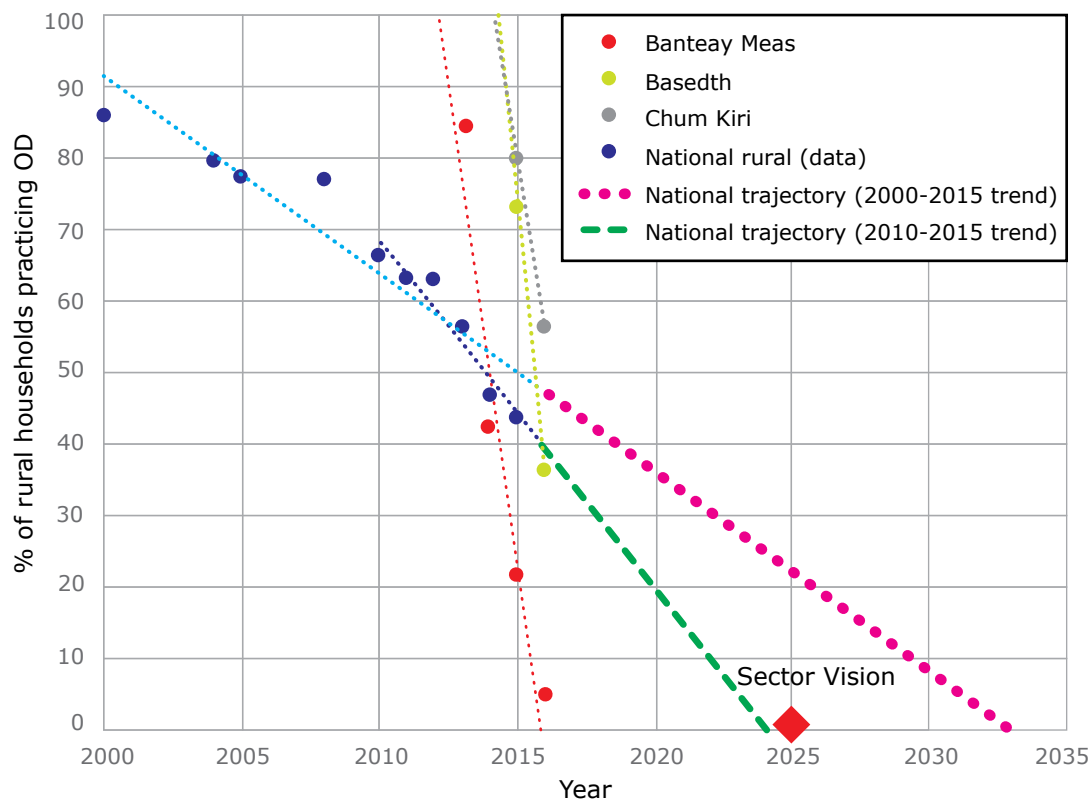


Figure 3 – Comparison of the decrease in the proportion of households practicing Open Defecation over time nation-wide (Data source: Cambodia Socio-Economic Surveys) versus SSH4A programme (Data source: SNV monitoring reports)

As shown in Figure 3, Banteay Meas district has already achieved ODF status while the remaining two SSH4A programme districts are on track towards the same. Figure 3 demonstrates that if recent (2010 to 2015) nation-wide annual progress of sanitation uptake continues into the future, the sector vision may be successfully achieved by 2025 (as per national monitoring data from the CSES). However, as OD becomes increasingly less common in rural Cambodia, villages with persistently low sanitation coverage may be more challenging to reach, as they may be in increasingly more remote areas, may be more socio-economically disadvantaged, or may have difficult contextual issues, such as being within flood-prone areas. Additionally, the work is not complete once OD is eliminated, as other WASH challenges often persist, such as handwashing practices, safe drinking water in the household, menstrual hygiene management and WASH in schools and health facilities, in addition to ensuring that OD remains a way of the past.

Linkages between SSH4A and the National Strategic Plan/National Action Plan

The SSH4A programme has clearly been successful at significantly and rapidly reducing the prevalence of OD in select districts. A wealth of knowledge and experience on sanitation and hygiene promotion and OD elimination in the Cambodia context has been generated. The aim of this policy note is to analyse the knowledge and experiences from SSH4A and consider what aspects are most applicable towards strengthening the broader, and nation-wide, institutionalised approach being implemented by the government, as articulated by MRD in the NSP and NAP.

Phase I of the NAP provides a road map for implementing the NSP until 2018. The NAP outlines a range of institutional and programmatic reforms intended to make the sector more efficient, results-driven and responsive to needs on the ground.

Five higher-level objectives are specified:

- Improve institutional capacity for RWSSH service delivery
- Increase financing for RWSSH including sub-national budget allocations and commitment of commune resources towards RWSSH services
- Promote sustainable access to improved rural water supply
- Promote sustainable access to improved rural sanitation
- Promote sustainable hygienic behaviour change related to water and sanitation.

Underlying the NSP and the NAP is the recognition that to increase the rate of sanitation coverage, public funding should be used to improve the enabling environment for creating demand in the community and for facilitating and strengthening the private market. Decentralisation is seen as the conduit to help Cambodia reach its sector vision for 100 per cent sanitation coverage by 2025 and the strategy emphasises the importance of the district level, as the key-level for technical support to service provision at community level.

There are various parallels and alignments between the approaches to sanitation promotion in the Government of Cambodia's NSP/NAP and the SSH4A programme, as demonstrated in Fig. 4.

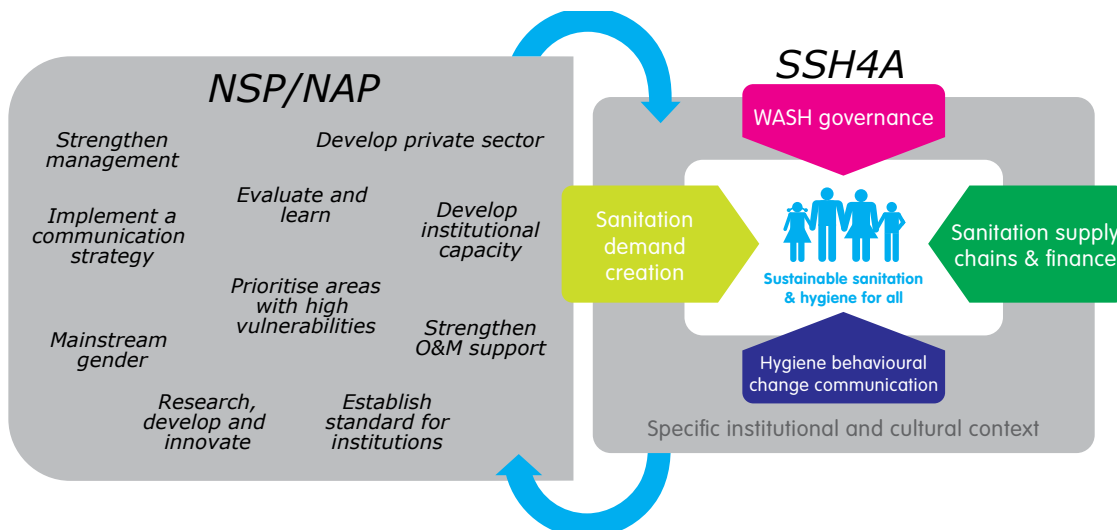


Figure 4 – Linkages and alignment between the approaches of the Cambodia NSP/NAP and the SSH4A programme

Both approaches are centred on strengthening institutional governance by developing capacities based on the local context and empowering local authorities with budgets to implement based on those plans. Behaviour change and demand creation for sanitation products are addressed through communication tools and approaches. Private sector strengthening and monitoring are also key components of both approaches, while sustainability of products and services are also addressed.

The approaches also work through a similar set of national and sub-national actors and stakeholders. The Government of Cambodia is in the process of decentralising rural sanitation functions to local (district) authorities (Fig. 5).

"What I like about the SSH4A programme is that it is holistic. It aligns with the components of our NAP, including creating an enabling environment, improving service levels, mobilising resources and behaviour change. When considering scale-up, the approaches need to be contextualised to each particular district and commune. In the future, we must also examine ways of making the programming more cost-effective."

Mr. Chreay Pom , Director,
Department of Rural Health Care, MRD

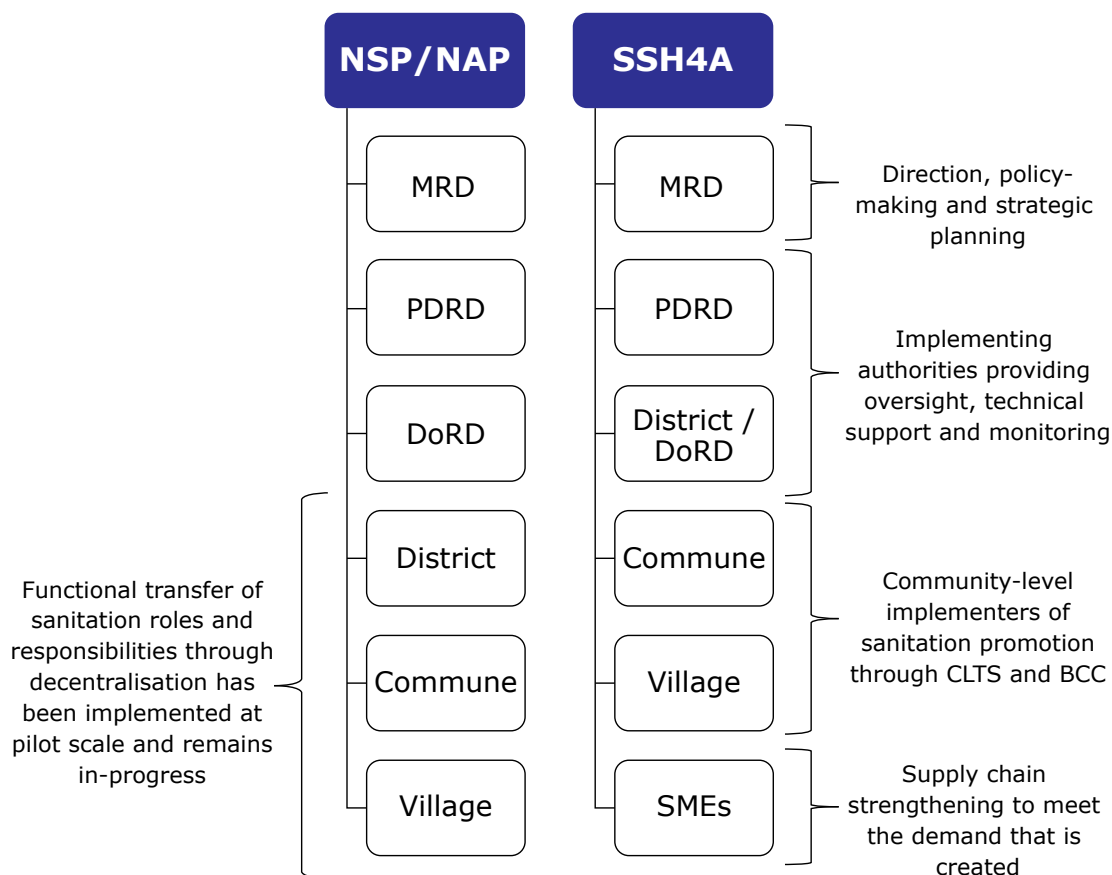


Figure 5 – Vertical stakeholder map for the NSP/NAP and SSH4A approaches

The formalised decentralisation of sanitation services to district and local authorities is being led by MRD and the national government and remains in the pilot phase. The pilot was implemented from 2015 to 2016 in 10 districts across two provinces, with technical support provided by SNV. Through this pilot, the selected districts were engaged to lead sanitation promotion and monitoring, while public funds were transferred to support implementation of the activities therein. In other provinces and districts in Cambodia, sanitation promotion is led by PDRD and DoRDs, but with cooperation from local authorities.

The SSH4A programme is applying such decentralised methods in its three target districts, while empowering local authorities with budgets to act on their plans and respond to locally driven needs. District governments also serve as the implementing authorities for the programme and, as such, they take leadership over the programme activities in their area of jurisdiction. Local small and medium enterprises (SMEs) are also engaged and strengthened to be able to respond to the rapid increase in demand for sanitation facilities in areas where CLTS and behaviour change activities are activated.

"Actually, most of the SSH4A programme activities are already included in the Kampot PAP and PDRD has planned to implement them when budget becomes available. Particularly, I think CLTS, BCC, and sanitation awareness raising through pagodas, schools and health centres are useful techniques to promote sanitation practices and can be applied in other districts as well. I trust that after five years of experience with SNV implementing SSH4A in Kampot province, our officers will have enough capacity to offer technical support to local authorities in the other districts to implement these activities in the future."

Mr. Hor Sarin, Director,
PDRD – Kampot Province

Key Learning from SSH4A in Cambodia

Key learning themes from SSH4A programme implementation have been identified and translated into considerations for the Cambodia Government and WASH sector at-large, recognising the approaches described in the NSP/NAP (Fig. 6).

Combined, these considerations from the SSH4A experience may serve to strengthen future sanitation programming delivered through the NAP and PAPs and drive progress towards the sector vision.

These concepts have been informed by various insights from SSH4A programme collaborators at all levels.

"Multi-stakeholder collaboration is the main reason for the success in Banteay Meas district, where all stakeholders in vertical and horizontal lines have worked together closely to achieve a common sanitation and hygiene target. We have seen strong support and collaboration at all levels from national to sub-national, district and commune and down to community, villages and households. Relevant stakeholders such as health centers, pagodas and private sector have also worked closely with us to promote sanitation practices in the districts. The commitment from all stakeholders – especially communities and households – is another important factor for success."

Mr. Hor Sarin, Director,
PDRD – Kampot Province

"In five years, Banteay Meas district has achieved ODF status despite starting at a coverage of 16% in 2012. This achievement is due to strong multi-stakeholder collaboration, focusing on a clear target, conducting activities jointly and implementing them regularly and frequently. In our district, we have strong local leaders and our skilled focal points understand and are committed to the activities in the programme. We understand the importance of sanitation and hygiene and have integrated activities into our commune and district investment plans. We have strong support from PDRD-Kampot, which has issued a formal letter to enforce sanitation and hygiene practices in the province. We have collaborated with local monks to promote sanitation and hygiene through religious events and have implemented campaigns and awareness raising events where toilet users have shared their experiences with non-toilet users. Sanitation committees at district and commune levels have been established with clear roles and responsibilities to ensure the sustainability of our achievements. Local authorities have demonstrated their strong commitment by voluntarily contributing their time while doing their best to mobilise resources from district and commune budgets to promote sanitation practices in the district."

Mrs. So Sovanara, Deputy District Governor,
Banteay Meas District

1. Decentralised, district-wide integrated approach

- Commitment and leadership are vital, and can best be cultivated when the programme covers a larger administrative area, linking all relevant stakeholders (communes, committees, SMEs)
- Working district-wide allows for better economies-of-scale, as SMEs are able to benefit from a broader customer base and make related products and services available for a variety of needs and preferences
- Sanitation uptake can be more effectively and sustainably achieved when implemented at-scale as health benefits are associated with ODF areas and programmatic support and integration are best achieved by district authorities

2. Multi-stakeholder approach

- National (MRD) and provincial (PDRD) level engagement is needed to lead, fund, train and support programme delivery towards sanitation targets
- District, commune and village level engagement is critical for planning and implementing Community Led Total Sanitation (CLTS), Behaviour Change Communication (BCC) and follow-up and monitoring activities
- Private sector involvement is crucial to ensure that locally available latrine supply is ready to meet demand

3. Skills and capacities

- Capacity development of programme leaders at provincial and district levels is needed for work planning, financial and human resources management and technical aspects of programme delivery
- A core training team needs to be established at provincial level to bridge the capacity gaps between programme leadership and community level implementors
- Commune and village level authorities and focal points need to be well-trained on programme activities and have clear roles and responsibilities and strong communication skills to be effective

4. Targets and monitoring

- Performance targets are needed to motivate stakeholders towards a common goal, such as achieving commune and district-wide ODF
- Monitoring is a key ingredient in the ODF recipe as it is needed to measure annual progress against targets. Village log-books are a proven tool

5. Cost-effective financing of programmatic activities

- For delivery of the NAP/PAPs at-scale, the National Government needs to consider how “soft” activities can best be delivered using Government funds and executed by the line entities and local governments through the decentralisation approach
- Priority must be given to the ground-level activities that are most cost effective

6. Leadership and commitment

- Leadership is needed to begin and sustain programmes while keeping stakeholders engaged and active
- Genuine commitment is needed at all levels to ensure that activities are implemented with quality, particularly at community-level where the most challenging and most important activities are executed

7. Thinking beyond the finish line - towards the SDGs

- Sanitation programming needs to be mindful of quality, equity, sustainability and safely-managed facilities
- ODF serves as a milestone, but is not an endpoint; rather efforts must continue to address the vision for universal and equitable access under the SDGs

Figure 6 – Lessons learned and considerations from SSH4A towards nation-wide sanitation and hygiene service delivery initiatives (NSP/NAP)

What Next?

Phase II of the NAP will be implemented from 2019 to 2025. MRD and DRHC are planning to conduct a review of Phase I (2014 to 2018) which will inform the design and roll-out of a practical sanitation capacity building programme for sub-national authorities.

"There are several important aspects that we need to think about next for Banteay Meas district, which has already reached ODF status including fecal sludge management after the pit is full and access to safe water at households and schools. Sanitation and water need to be linked together. Access to water is still an issue in some areas in Banteay Meas. And this can be a challenge for sustaining sanitation and hygiene practice. District and local authorities are the key actors in monitoring and ensuring the sustainability of sanitation practices, since they are the ones closest to the community and their frequent follow-up and mentoring is most effective. PDRD can continue to offer technical support to local authorities."

Mr. Hor Sarin, Director,
PDRD – Kampot Province

The SSH4A programme is currently also focused on sustaining the recent practices and behaviour changes while working towards more safely-managed facilities, in keeping with the aims of the Sustainable Development Goals (SDGs). As such, the emphasis of the current phase of the programme is on quality, equity and sustainability. Commitment and leadership of the local authorities has been shown to be the key to building momentum and sustaining ODF status. However, while ODF provides a milestone for leaders to mobilise around, it is not the end-point. The focus is now on looking beyond ODF towards the vision of the SDGs, universal access and safely managed facilities, as well as professionalisation of the sector overall (Fig. 7).



Painting of handwashing steps at a school in Banteay Meas district

More than 350 sanitation facilitators from PDRD, DoRD, district, commune and village levels, schools and health centres have demonstrated their commitment to continue to support communities in maintaining their ODF status and have been mobilised to support post-ODF initiatives.

Behaviour change strategies have been developed to be responsive to these changing priorities and emerging issues, including safe drinking water practices, waste management, hygiene promotion and menstrual hygiene management. These post-ODF strategies and plans have been further integrated into local government development agendas. The lessons learnt from the decentralised SSH4A approach in the three target districts will continue to be used to support the government to adapt and scale-up the comprehensive approach in Cambodia in alignment with MRDs NAP.

The learning from the ongoing post-ODF initiatives will be applied through the SSH4A programme to strengthen future activities, while also being disseminated across the WASH sector to promote the deepening of sanitation and hygiene impacts nation-wide.



Figure 7 – SSH4A post-ODF focus areas



Painting competition organised in Basedth district as part of larger open defecation free drive in the district

Authors

Andrew Shantz, Sunetra Lala and Sodany Saing, November 2017

SNV

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 38 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.

Further information

To learn more about SNV and our work in Cambodia, visit our website at www.snvworld.org/en/cambodia

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Established in 2005, the Stone Family Foundation supports innovative, sustainable, entrepreneurial solutions to major social problems, in the UK and around the world. The Foundation supports the SSH4A programme in Cambodia.