



# SNV

## Tanzania – SSH4A Results Programme endline brief



**From 2014 through 2017, an additional 442,078 people in five districts in Tanzania gained access to improved sanitation, and 351,776 more people began washing their hands with soap after defecation. Open defecation rates fell to 2% from 36%. These results were achieved through the Sustainable Sanitation and Hygiene for All (SSH4A) Results Programme.**

As part of its Vision 2025, the Government of Tanzania has pledged to reach 95% access to improved sanitation by 2025. In collaboration with the government, SNV implemented SSH4A's four-pillared integrated approach: demand creation, sanitation supply chain development, behaviour change promotion, and support on governance issues to strengthen sustainability. This approach, funded by the UKAID WASH Results Programme<sup>1</sup>, was implemented in five districts across two zones in Tanzania<sup>2</sup>. The districts were selected because their sanitation conditions were poor and they were not directly included in the National Sanitation Campaign (NSC)<sup>3</sup>.

This endline practice brief reports the outcomes and lessons learnt in implementing a rural sanitation initiative for potential scale-up in Tanzania. It presents disaggregated sanitation and hygiene outcomes to highlight the realities of the three most vulnerable groups in the country: the poorest households, female-led households, and households with people with disability (PWD).

### The challenge

In 2014, at least 35% of surveyed households in the five districts practised open defecation (OD). Sharing of latrines by multiple households was common. Communities in temporary settlements practised OD because landlords built temporary toilets, many of which were not emptied, collapsed quickly in the sandy clay soil, and were not replaced immediately, particularly in the Babati and Chato districts. Although 31% of households had functional toilets, only 4% used functional, clean toilets that provided privacy.

The baseline survey<sup>4</sup> found that 60% of households knew the importance of handwashing with soap (HWWS) after defecation, but few acted on that information. By December 2017, 36% of all households in the programme districts had handwashing facilities within a 10-meter distance from the toilet. People continued to use water in containers, or in some instances waste water, to wash their hands after defecation.

### Key achievements

(2014 to December 2017)

The four-year rural sanitation programme engaged 1,080,000 people and achieved the following results:

**92%** of all households  
have access to a sanitary toilet  
(54% in 2014)



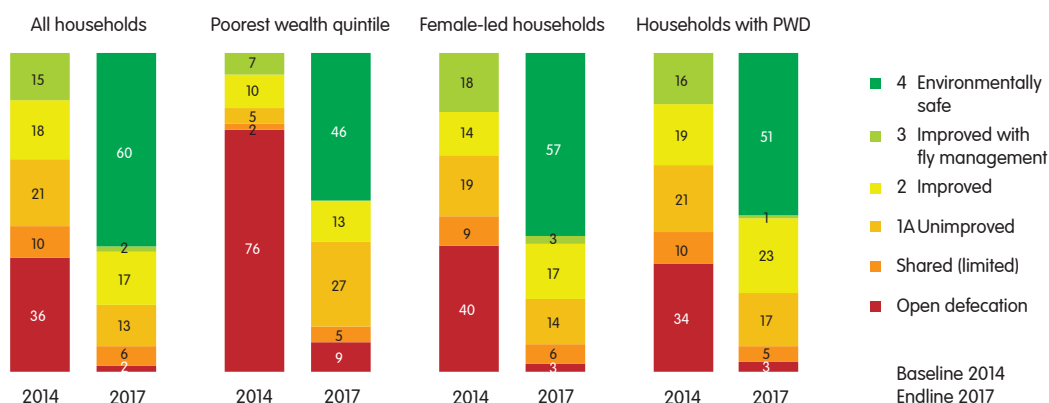
**95%** of all households practise  
hygienic use and maintenance of  
toilets (61% in 2014)



**36%** of all households have  
access to handwashing facilities  
with soap after defecation  
(0% in 2014)



FIGURE 1: Percentage of households with access to sanitary toilets, 2014 and 2017



Note: Households with toilets categorised as Level 1A through Level 4 are considered to have access to improved sanitation.

## End results of SSH4A RP implementation in five districts in Lake and Northern zones

In December 2017 and January 2018, SNV and partners visited 79 villages in Lake Zone (Chato, Geita and Kwimba districts) and Northern Zone (Karatu and Babati districts) and interviewed 1,972 households to measure the benefits of SSH4A Results Programme’s four-year intervention. Akvo’s FLOW mobile application software was used to ensure efficiency in gathering and verifying data. Results are presented by percentage of households<sup>5</sup>.

### ACCESS TO SANITARY TOILET (see fig.1)

Aggregated households results show a 38% increase in access to new or improved sanitation and a 34% decrease in OD. The 60% increase in access to environmentally safe toilets is attributed to project interventions, including scaled-up production and sales of SAFI<sup>6</sup> latrines and a campaign to improve latrine floors.

The poorest wealth quintile saw a 67% reduction in OD. Access to new and improved toilets went up by 64%, with 46% of the households constructing environmentally safe toilets.

Female-led households saw a 37% reduction in OD and a 40% increase in new and improved toilets.

In PWD households, OD decreased by 31%, and 36% of households gained access to improved sanitation. The programme promoted PWD-friendly designs, such as wooden or bamboo pedestals placed over the latrine hole and walls with ropes or hand rails.

Programme interventions focussed on behaviour change: encouraging hygienic use and maintenance of facilities, providing information about toilet types suitable for different kinds of households, and supporting district leaders in taking the lead in behaviour change communication (BCC) messages about how to build safe and secure, private toilets. Such interventions account for the positive

results, specifically for the three vulnerable groups.

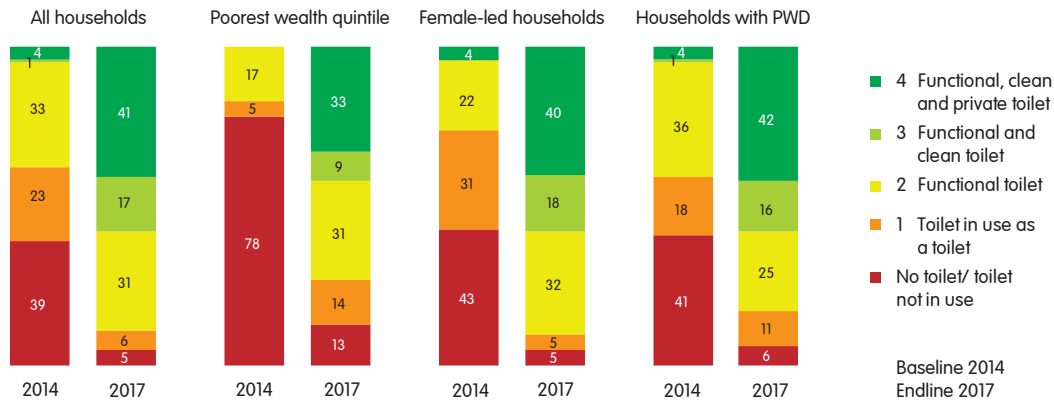
### HYGIENIC USE AND MAINTENANCE OF TOILETS (see fig.2)

By the end of 2017, 34% of all households had toilets that were hygienically used and maintained, and 37% had adopted functional and clean toilets. The proportionate reduction in households without toilets indicates that people are choosing to adopt hygienic toilets. BCC interventions included videos on the benefits of good hygiene, demonstrations at health centres for mothers with children under five, educational programming for schoolchildren, and emphasis on construction and maintenance of improved toilets with intact floors. Some interventions were targeted at households not using toilets hygienically<sup>7</sup>.

In the poorest households, female-led households and PWD households, the adoption of hygienic use and maintenance of toilets went up by 65%, 38%, and 35%, respectively, with commensurate reductions in households with no toilets or toilets that were not in use. PWD-friendly technology options, such as portable wooden pedestal stools, were adopted by some households.

Door-to-door campaigns targeting households are thought to be the main drivers in increasing access to

**FIGURE 2: Percentage of households' hygienic use and maintenance of toilets, 2014 and 2017**



Note: Levels 1 through 4 are considered to indicate hygienic use and maintenance of facilities. Improvements are measured as households move up from Level 1.

sanitation, both generally and for the three vulnerable groups of people.

### HANDWASHING FACILITY WITH SOAP ACCESS (see fig.3)

By the end of 2017, the survey showed a 36% increase in HWWS, with 28% of all households opting for Level 3 handwashing facilities and a 48% reduction in households that did not practise handwashing. Although a majority of households reached the top two levels, access to soap or soap alternatives remains a challenge for about 10% of households.

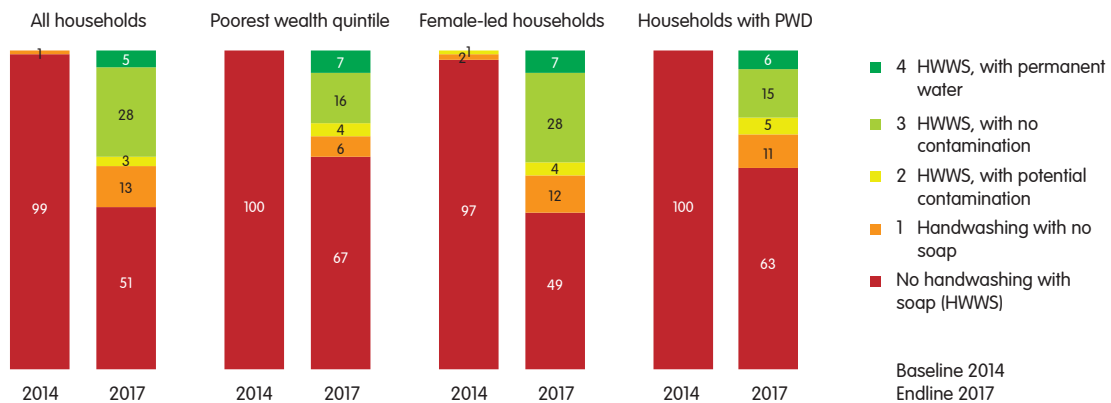
The poorest households saw a 27% increase in access to HWWS, with a 33% reduction in households that do not practise handwashing. Among female-led households, access to HWWS rose by 38%, and households without handwashing fell by 48%. These improvements are attributed to programme interventions and triggering sessions.

At baseline, no PWD household had access to HWWS. Messages on PWD-friendly handwashing options were targeted to these households, and by the end of 2017, 26% had access to HWWS; households without handwashing had fallen by 37%.

The uptake in HWWS was achieved through the use of videos and promotion of tippy-taps. The project team developed a video intended to trigger an emotional response and motivate households to wash their hands with soap and invest in both improved handwashing facilities and improved toilets. For households, affordability is not a barrier in gaining access to handwashing facilities with soap, since the most common technology – tippy-taps – can be made at home from readily available materials; the primary challenge is theft and vandalism.

# Access to handwashing facility with soap near toilet up by 36%

**FIGURE 3: Percentage of households having handwashing facilities with soap, 2014 and 2017**



Note: Levels 1 through 4 are considered to indicate access to a handwashing facility. Improvements are measured as households move up from Level 2.

## Recommendations and next steps

✓ Because access to affordable, durable toilets remains a challenge for most rural households, the project introduced Safi toilet options (dry offset pit toilet with Safi squat pan, water offset pit toilet with Safi squat pan, and water offset pit toilet with ceramic squat pan). The sanitation supply chain should be strengthened through new sales marketing strategies, with consistent follow-up by village health promoters and local leaders to move households to higher sanitation levels.

✓ Public-private partnerships are one way for local actors to address technological barriers, make soap and soap alternatives more

affordable, and train artisans in construction using local materials.

✓ Although 95% of households now practise the hygienic use and maintenance of toilets, only 36% practise HWWS after defecation. Behaviour change messages should address knowledge gaps, attitudes, and practices that are responsible for the low rates of HWWS.



✓ Public recognition for districts that achieve OD-free status and for individuals who promote HWWS can act as incentives to increase demand for sanitation. A rewards programme should supplement enforcement of community by-laws to address OD and vandalism of facilities.

### Endnotes

- <sup>1</sup> The UKAID WASH Results Programme applies a relatively new form of development financing in which partners (e.g., SNV) receive funding based on independently verified results.
- <sup>2</sup> Lake Zone (Chato, Geita and Kwimba districts) and Northern Zone (Karatu and Babati districts).
- <sup>3</sup> To address the poor health conditions in the country, in 2011 the Government of Tanzania embarked on the National Sanitation Campaign under the Water Sector Development Programme. Phase I of the campaign (2011–2015) aimed to provide rural households with adequate water and sanitation facilities, using a combination of Community-Led Total Sanitation, social marketing and behaviour change communication, as well as providing schools with appropriate WASH conditions.
- <sup>4</sup> SNV Tanzania SSH4A Country Endline Baseline Report, October 2014.
- <sup>5</sup> Figures are rounded off to the nearest whole number.
- <sup>6</sup> Safi is a Swahili word meaning 'clean'. These toilets are affordable and produced by SNV to meet the durability and safety requirements of households.
- <sup>7</sup> The programme identified the following as the critical moments of HWWS - before eating/cooking, after defecation, before breast feeding or feeding a child, after cleaning a child that has defecated/ changing nappy, and after cleaning the potty.

## SUSTAINABLE SANITATION AND HYGIENE FOR ALL RESULTS PROGRAMME (SSH4A RP)

SSH4A RP is SNV's largest results-based funded programme that is being implemented in selected countries in Africa and Asia. The programme contributes to ending open defecation; increasing the use of toilets that are safely managed, functional, and facilitate privacy; and increasing access to handwashing facilities with soap (located next to toilets or areas where food is prepared).

SSH4A RP in Tanzania is a collaborative initiative with the Government of Tanzania. It is being implemented in two phases, and receives generous funding from the United Kingdom Government. The next phase of the programme concludes in 2020.

### SNV

SNV is a not-for-profit international development organisation. Founded in the Netherlands over 50 years ago, SNV has built a long-term, local presence in 38 of the poorest countries in Asia, Africa and Latin America. SNV's 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.

This endline practice brief was prepared by Anne Mutta and Jackson Wandera, with support from Anjani Abella and Rosenell Odondi, based on the December 2017 Endline Household Survey Report of Tanzania. It was edited by Sally Atwater and designed by Bingo!.

### Photos ©SNV

(FRONT) Local entrepreneurs building Safi latrine rings

(P4) Grandmother from Gendaa stands proudly in front of her newly-built Safi latrine

### For more information

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