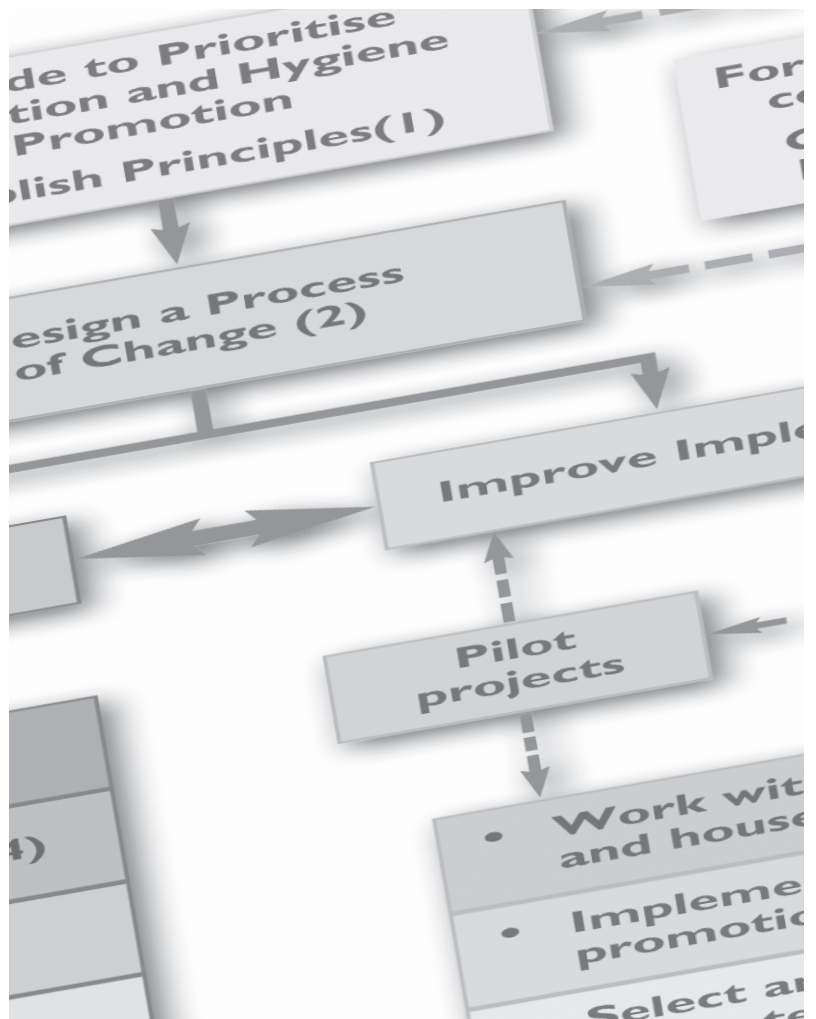


# Sanitation and Hygiene Promotion



*Programming Guidance*

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## **Dedication**

This volume is dedicated to the memory of Dr. John H. Austin of USAID (1929-2004) in recognition of his contributions to the water supply, sanitation and hygiene sector in a career spanning over six decades working in all corners of the globe.

## Contributions

The development of this document was led by a team consisting of John Austin (USAID), Lizette Burgers (UNICEF), Sandy Cairncross (LSHTM), Andrew Cotton (WEDC / WELL), Val Curtis (LSHTM), Barbara Evans (consultant), Gerardo Galvis (PAHO/CEPIS), Pete Kolsky (WSP), Eddy Perez (EHP), Fred Rosensweig (EHP) and Darren Saywell (WSSCC). It was produced under the overall direction of Gourisankar Ghosh of WSSCC and John Borrazzo of USAID.

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The document was prepared by Barbara Evans. Substantial text contributions were made by Fred Rosensweig (Chapter 3), Eckhard Kleinau (Chapter 7) and Pete Kolsky (Chapter 10). Design and production was managed by Sören Bauer, WSSCC.

The 1997 UNICEF Handbook which forms the basis for some sections of this document was prepared by a consultant team consisting of Jake Pfohl (principle author), Isabel Blackett and Clifford Wang. Additional inputs and comments were provided by Steve Esrey, TV Luong, and Gourisankar Ghosh (UNICEF), John Austin and John Borrazzo (USAID), Eddy Perez, Diane Bendahmane, Betsy Reddaway and Darlene Summers (EHP / USAID), Mayling Simpson-Herbert (WHO). Review was provided by Massee Bateman and Fred Rosensweig (EHP / USAID), Sandy Cairncross (LSHTM) and members of the UNICEF Sanitation Working Group.

## Feedback

Sanitation and Hygiene Promotion are amongst the most challenging development sectors in which to work. This is partly because effective sanitation requires the development of public policy in an arena which is intensely private and where results are only achieved when the household makes appropriate choices. Because of the complexity of the sector, and in light of the relatively small body of public policy experience, it is inevitable that the current document will represent a work in progress. Hopefully with the new interest in the sector, there will be new ideas and experiences to reflect on in the coming few years. Where readers feel that the current document can be usefully updated, changed or amended in any way to reflect such experience they are encouraged to contact:

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## Glossary

The following glossary provides the reader with guidance about what is meant by various terms used in this document. The list is not intended to be exhaustive, nor the definitions definitive, rather this list is designed to help the reader to understand what is intended in the current text. Where the definition is taken from a published reference, this is noted.

**Advocacy:** is a continuous and adaptive process of gathering, organizing and formulating information into arguments to be communicated through various interpersonal and media channels, with a view to raising resources or gaining political and social leadership acceptance and commitment for a development programme, thereby preparing a society for acceptance of the programme<sup>i</sup>.

**Civil Society:** individuals and organisations who are not part of the government apparatus including but not limited to community organisations and informal groups, non-governmental organisations, voluntary agencies, small scale independent providers, private sector, media organisations and professional bodies.

**Ecological Sanitation:** sanitation whose design builds on the concept of protecting ecosystems, and which treats excreta as a valuable resource to be recycled.

**Empowerment:** is a process of facilitating and enabling people to acquire skills, knowledge and confidence to make responsible choices and implement them; it helps create settings that facilitate autonomous functioning.

**Enabling Environment:** Policies, financial instruments, formal organisations, community organisations and partnerships which together support and promote needed changes in hygiene practices and access to technology.

**Environmental Sanitation:** a range of interventions designed to improve the management of excreta, sullage, drainage and solid waste.

**Excreta:** faeces and urine.

**Gender Equity:** the process of being fair to women and men. To ensure fairness measures must be often available to compensate for historical and social disadvantages that prevent women and men from otherwise operating on a level playing field. Equity leads to equality<sup>ii</sup>.

**Groundwater:** water found below ground level in the sub-soil.

**Groundwater Table:** the level at which the subsoil is saturated.

**Hygiene Promotion:** a planned approach to preventing diarrhoeal diseases through the widespread adoption of safe hygiene practices. It begins with and is built on what local people know, do and want<sup>iii</sup>.

**Off-site sanitation:** system of sanitation where excreta are removed from the plot occupied by the dwelling and its immediate surroundings.

**On-site sanitation:** system of sanitation where the means of collection, storage and treatment (where this exists) are contained within the plot occupied by the dwelling and its immediate surroundings.

**Pit Latrine:** latrine with a pit for collection and decomposition of excreta and from which liquid infiltrates into the surrounding soil.

**Pour-flush Latrine:** latrine that depends for its operation of small quantities of water, poured from a container by hand, to flush away faeces from the point of defecation.

**Private Benefits:** benefits (of hygiene improvements) which accrue to the household or individual (for example savings in the household budget for health-related expenses).

**Private Sector:** individuals, companies or organisations who provide goods and services relating to hygiene improvements on a commercial basis for profit.

**Programming:** the establishment of a set of rules and conventions under which all sanitation and hygiene promotion projects and investments can be made, such that they all work towards and agreed long-term vision for improved health and dignity for the entire population.

**Public Benefits:** benefits (of hygiene improvements) which accrue to society as a whole (for example, improvements to the health of the population at large resulting from a significant proportion of individuals adopting hygienic behaviours such as hand washing).

**Public Policy:** decisions enshrined in laws, regulations and policy documents which express the will of government towards public concerns such as sanitation and hygiene promotion.

**Sanitation:** interventions (usually construction of facilities such as latrines) that improve the management of excreta.

**Septic Tank:** a tank or container, normally with one inlet and one outlet, that retains sewage and reduces its strength by settlement and anaerobic digestion.

**Sewer:** a pipe or other conduit that carries wastewater from more than one property.

**Sewerage:** a system of interconnected sewers.

**Small-scale Independent Provider:** individual, company or voluntary/non-profit organisation providing goods or services relating to hygiene improvement operating independently of the system of public provision.

**Social Mobilisation:** is a process bringing together all feasible social partners and allies to identify needs and raise awareness of, and demand for, a particular development objective.

**Sullage:** dirty water that has been used for washing, cooking, washing clothes, pots, pans etc)

**Ventilated Improved Pit Latrine:** pit latrine with a screened vent pipe and darkened interior to the superstructure which is designed to keep flies out and minimise smell.

#### Endnotes

- i UNICEF, WHO, USAID, BASICS (2000) *Communication Handbook for Polio Eradication and Routine EPI*: UNICEF, New York
- ii Lidonde, R., D. de Jong, N. Barot, B. Shamsun Nahar, N. Maharaj, H. Derbyshire (2000) *Advocacy Manual for Gender and Water Ambassadors* Gender and Water Alliance, Delft
- iii UNICEF (1999) *A Manual on Hygiene Promotion* UNICEF, New York

## List of Abbreviations

APL	Adaptable Program Loan
BASICS	II Basic Support for Institutionalizing Child Survival
CHC	Community Health Clubs
DWAF	Department for Water Affairs and Forestry
EHP	Environmental Health Project
ESA	External Support Agency
GWA	Gender Water Alliance
HIF	Hygiene Improvement Framework
HIPC	Highly Indebted Poor Countries
IDWSS	International Decade for Water Supply and Sanitation
IRC	International Water and Sanitation Centre
ITN	International Training Network
lpcd	Litres per capita per day
LSHTM	London School of Hygiene and Tropical Medicine
MDG	Millennium Development Goal
MPA	Methodology for Participatory Assessment
MTEF	Medium Term Expenditure Framework
NGO	Non-governmental Organisation
PEAP	Poverty Eradication Action Plan
PHAST	Participatory Hygiene and Sanitation Transformation
PLA	Participatory Learning and Action
PRA	Participatory Rural Appraisal
PRSC	Poverty Reduction Support Credit
PRSP	Poverty Reduction Strategy Paper
RSM	Rural Sanitary Mart
SADC	Southern African Development Community
SECAL	Sector Adjustment Loan
SIM	Sector Investment and Maintenance Loan
SWAp	Sector Wide Approach
TOM	Technician for Operation and Maintenance
TPPF	Twin-Pit Pour Flush (Latrine)
UNDP	United Nations Development Program
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VIP	Ventilated Improved Pit (Latrine)
WASH	Water, Sanitation and Hygiene for All; global advocacy campaign of WSSCC
WEDC	Water, Engineering and Development Centre, University of Loughborough
WELL	Water and Environmental Health at London and Loughborough
WHO	World Health Organisation
WSP	Water and Sanitation Program
WSSCC	Water Supply and Sanitation Collaborative Council

# A Note to the Reader

## International Commitments to Sanitation

At the World Summit on Sustainable Development at Johannesburg in September 2002 the World Community committed itself to “halve by 2015 the proportion of people without access to safe sanitation”. Since 1990 an estimated 747 million people have gained access to sanitation facilities (equivalent to 205,000 people every day). Despite this huge achievement, a further 1,089 million rural and 1,085 million urban dwellers will need to gain access in the coming 15 years if the 2015 target is to be realized.

Many governments are now asking what they can do to systematically respond to the challenges laid down in Johannesburg.

The Water Supply and Sanitation Collaborative Council (WSSCC), in partnership with the United States Agency for International Development (USAID), the United Nations Children's Fund (UNICEF), the Environmental Health Project (EHP), the World Bank and the Water and Sanitation Program (WSP) have agreed to collaborate on the production of a new updated document which can provide the sort of practical guidance which is being requested. Much of the material presented here is based strongly on an earlier UNICEF Handbook<sup>i</sup> but the text has been revised, updated and shortened, with new material added based on both recent experience and feedback from users of the earlier handbook.

## What is this document about?

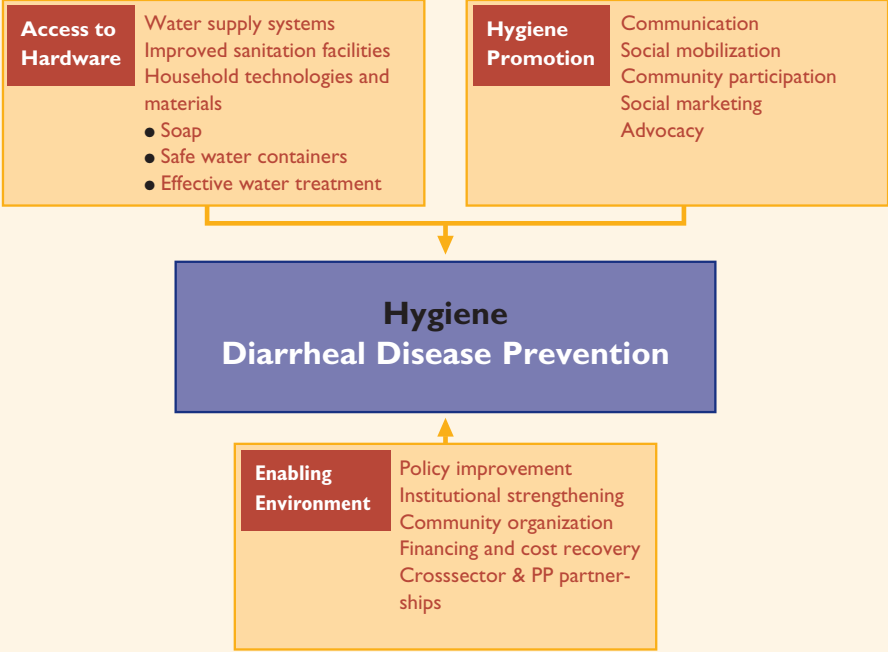
### This document is about Sanitation and Hygiene Promotion

It is about setting in place a **process whereby people (women, children and men) effect and sustain a hygienic and healthy environment for themselves**. They do this by erecting barriers to prevent transmission of disease agents (broadly by means of *sanitation*) and by reducing the main risky hygiene practices and conditions which they face (usually the main focus of *hygiene promotion*)<sup>ii</sup>.

Safe disposal of excreta and hygienic behaviours are essential for the dignity, status and wellbeing of every person, be they rich or poor, irrespective of whether they live in rural areas, small towns or urban centres.

The primary direct impact of sanitation and hygiene promotion is on health, and of all health impacts, the most significant is probably the prevention of diarrhoeal disease. Primary barriers to diarrhoeal and other water-related disease transmission include both physical infrastructure (amongst which household sanitation is important), and hygienic practices (washing of hands with soap or a local substitute after contamination with excreta). Experience has shown that sustained improvements in access to sanitation and sustained changes in hygienic behaviours require an appropriate enabling environment (of policy, organisations, finance, management and accountability). The Hygiene Improvement Framework is a conceptual model developed by USAID to help programmers visualize the relationship between these three elements (see **Figure i**)<sup>iii</sup>.

**Figure i: The Hygiene Improvement Framework**



The Hygiene Improvement Framework (HIF) states hygiene improvement (and hence health benefits to society) arise when three things are in place:

- hygiene promotion;
- improved access to hardware for water supply, sanitation and hygiene; and
- an enabling environment.

This document focuses on a selection of the interventions identified by the HIF (improved sanitation at the household level, access to soap, hygiene promotion and the enabling environment), while recognizing that others (such as improved water supply, solid waste management, better drainage, school sanitation and so on) are also important if the health benefits of sanitation and hygiene promotion are to be realized<sup>iv</sup>.

## This document is about Programming

This document talks about developing a programme for more effective investment in sanitation and hygiene promotion. It is not about developing projects and it does not give blue-print solutions for project-level interventions. Rather it lays out a process for long term change which may encompass institutional transformation of the policy and organizational arrangements for provision of goods and services. It argues that the objective of policy makers should be to:

*establish a consistent set of rules under which all sanitation and hygiene promotion projects and investments can be made, such that they all work towards an agreed long-term vision for improved health and dignity for the entire population.*

### **This document recognises that sanitation and hygiene promotion may happen within broader poverty alleviation strategies**

The document recognizes that in many countries and regions, sanitation and hygiene promotion may well be planned and managed within a broader social development agenda, by local governments, national ministries or by specialized agencies. However, it argues that specific attention needs to be paid to the promotion of hygienic behaviours and to improving access to sanitation hardware as a key element of poverty reduction efforts. This document is intended as a resource for anybody working with this aim in mind.

The document also acknowledges that regional, provincial or local programmes may be appropriate, while in some countries the logical level for programming is national. Many urban areas may be autonomous and programming may take place at the city-level (such an approach is often politically expedient<sup>v</sup>). This document will use the term programme to imply a programme developed *at whichever level is appropriate*.

### **This document recognises that it has a broad audience**

Recognising that in different institutional contexts, sanitation and hygiene promotion programmes will be organized in different ways, this document aims to reach a broad general audience. It is designed to help

*Those people with some **responsibility** in sanitation and hygiene promotion (whether they are directly engaged or working in wider social development or economic programmes), and with **resources** (of time, money or expertise), who are **committed** to achieving the outcome that households and communities in **rural areas, small towns and cities** gain **equitable access** to sanitation and hygiene promotion services that are **sustainable**, at a **scale** which contributes to achievement of the Millennium Development Goals*

The authors recognise that stand-alone sanitation and hygiene promotion programs are rare and unlikely to be effective. They also recognise that many people who take responsibility for improving access to sanitation and promoting hygienic practices may not be specialists in the field. Therefore this document has been written with the non-specialist in mind.

### **This document is biased because the authors believe that certain approaches to sanitation and hygiene promotion are more effective than others**

Our biases are laid out in Section One but in summary we believe that:

- sanitation and hygiene promotion are a vital element in poverty alleviation;
- sanitation hardware alone is ineffective as a tool to alleviate poverty; what is needed is changes in behaviour coupled with improved access to sanitation;
- the needed changes (investments and behaviours) largely happen at the household level; the role of government is to facilitate good decision-making at this level;
- in the absence of well functioning public provision, people have been providing their own solutions and an understanding of this should form the basis of

new programmes of support. For many households and service providers sanitation is a business which needs to be supported;

- every country or locality needs to build a new approach which has policies, money, organisations and trained people who can create demand for sanitation and support rational decision making at the household level; and
- a programming process needs to develop both short-run interventions to maintain progress and increase access, and long-run interventions which set in place a radically new institutional framework to support sustained service delivery over time.

## **How to use this document**

Sanitation and hygiene promotion programming is a process carried out by a wide range of people and organisations. At the outset most of the people and organisations concerned will probably not regard sanitation as their priority activity (despite their commitment, most people and organisations have a range of other responsibilities to undertake). It is unlikely therefore that many people will have the motivation or time to read the entire document presented here.

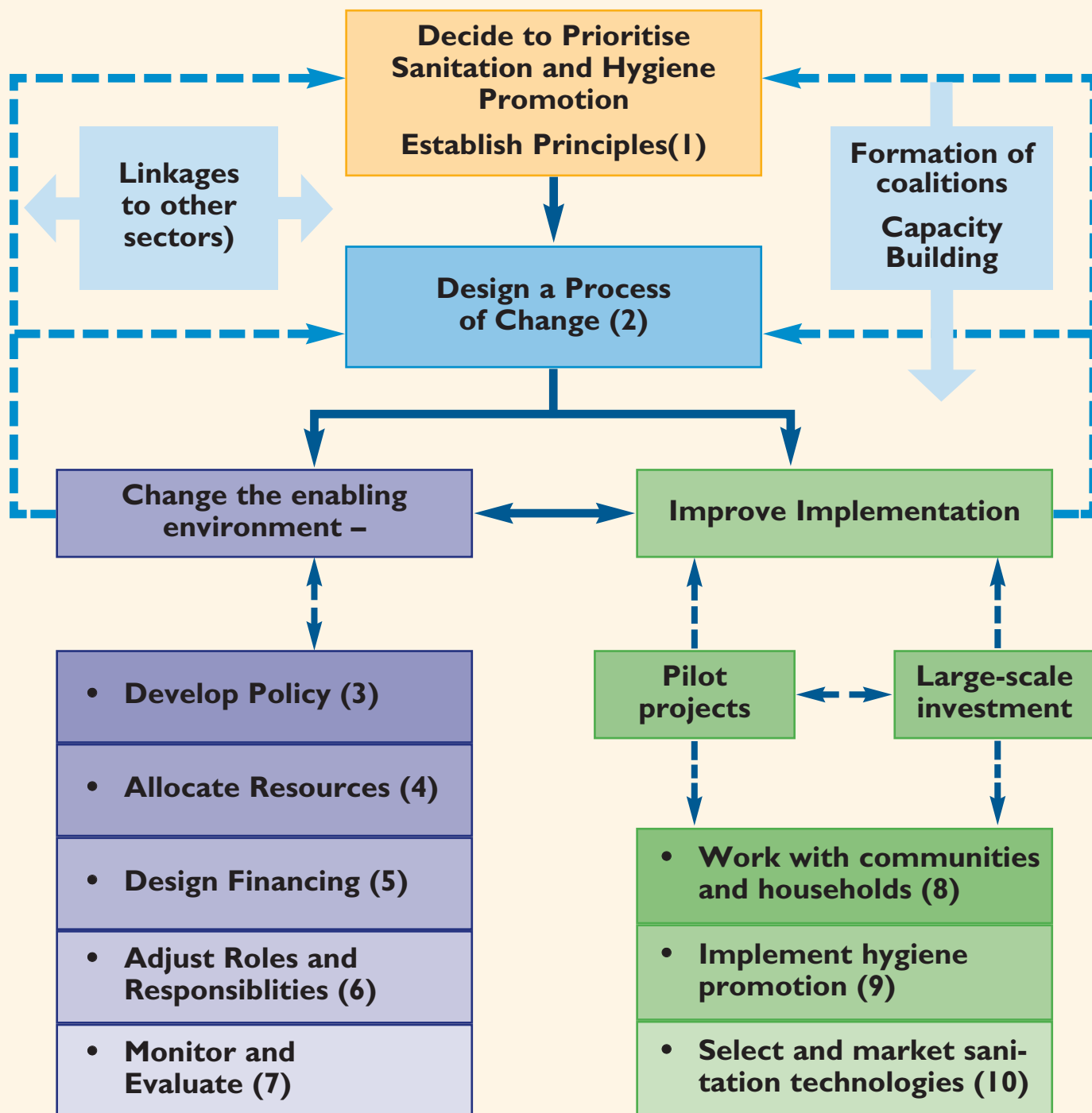
To assist readers a summary or generic programming process is shown schematically in **Figure ii**. Broadly the document is organized in sections which reflect the key steps in the programming process. Different actors may be involved in each of these key stages. Figure ii, along with **Table i**, indicate which sections may be of most interest to each reader.

## **Additional Information**

The text contains information on where to find additional specific information. This is flagged in the **Reference Boxes**. Reference material is also presented in the notes.

Users of the document are encouraged to use whatever elements are appropriate to their particular situation. Sections of the document can be freely copied and reproduced, and the authors encourage this as part of a wider programming and capacity building effort.

Figure ii: Navigation Guide – The Programming Process



Note: Numbers in brackets indicate the chapter containing additional discussion of the topic

**Table i: Who should read this Document (Navigation Table)**

Section	Chapters	Content	Illustrative Users
<b>1: Sanitation and Hygiene Promotion in a wider context</b>	1 The Basics	Puts sanitation and hygiene promotion in context, and shows how effective hygiene improvements result in socially, economically and environmentally sustainable development.  Broadly states what is known about how to effectively implement sanitation and hygiene promotion.	All readers  Non-specialists wishing to get up to speed on key thinking in sanitation and hygiene promotion  Specialists wishing to make themselves acquainted with the views and biases of the authors of this document
<b>2: The Process of Change</b>	2 Getting Started	Lays out a process for programme development, including a discussion of the key contextual factors which will determine how programming can be best carried out	Programme catalysts, (ie senior operational staff in national level government departments or at municipal level, representatives of national NGOs, ESAs etc)
<b>3: Creating the Enabling Environment</b>	3 Sanitation and hygiene promotion policies 4 Allocating resources strategically 5 Financing 6 Roles and responsibilities – restructuring organisations 7 Monitoring and Evaluation	Provides detailed guidance on programming. In each case, specific guidance is provided as to how the principles outlined in Section One can be implemented practically through policy level decisions.	Programme catalysts High level policy makers Senior staff of NGOs and ESAs
<b>4: Improving Implementation</b>	8 Working with communities and households 9 Hygiene promotion 10 Selecting and marketing technologies	Discusses briefly some of the practical implementation details which will be determined at programme level, but implemented locally through projects.  This information, including specific details on hygiene promotion, selection and marketing of technologies and community management, is specifically linked to programming decisions.	Programme catalysts Staff working on the details of programming National and local NGO, ESA and government staff working at project level who wish to make contributions to the programming process.

Endnotes

- i UNICEF and USAID (1997) *Towards Better Programming: A Sanitation Handbook*, Water, Environment and Sanitation Technical Guidelines Series No.3, EHP Applied Study No. 5. UNICEF New York. The handbook benefited from inputs from the World Health Organisation (WHO), the United Nations Development Program (UNDP) and the World Bank and was subject to a wide consultation. Many of the original ideas for the handbook were developed by the environmental sanitation working group of the Water Supply and Sanitation Collaborative Council (WSSCC). The Handbook was aimed at UNICEF field officers and was widely disseminated through the UNICEF network.
- ii The concept of sanitation as a process is drawn from the 1997 Handbook. The description of hygiene promotion is developed from Appleton, Brian and Dr Christine van Wijk (2003) *Hygiene Promotion: Thematic Overview Paper* IRC International Water and Sanitation Centre,
- iii Environmental Health Project (2003) *The Hygiene Improvement Framework: a Comprehensive Approach for Preventing Childhood Diarrhoea*.
- iv Throughout the text the reader is directed to sources of information on wider water supply and sanitation issues where these are important. The focus of this document is on the safe management of human excreta, primarily at the household, not because other interventions are not needed, but because the nature of the institutional interventions for management of household excreta are sufficiently different from those required for the management of other public services to merit separate treatment and different institutional interventions.
- v Where regions or urban areas have sufficient autonomy they may be able to implement programmes which are more advanced than those implemented at central government level. Indeed this is sometimes the most effective way to make progress.