



## Sanitation programmes take time!

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WITH THE HISTORIC elections of 1994, official apartheid ended. The ANC was elected with a mandate - and the expectation - that they would deliver what the black population had so long been denied.

High on the list for delivery for over 30 million people were jobs, housing, land, health care education and water. Sanitation was also important - but not high profile enough to always get a mention.

To many people sanitation meant nothing less than a conventional flush toilet. Anything less was considered to be second rate - something inferior to what white people had previously enjoyed.

How could a national sanitation programme be established - and how quickly could it 'deliver'? Fairly significant amounts of funding was made available for community projects - and results were expected within a year or two.

However, the national sanitation team has had to start work first on three key issues (and many others) to establish a national programme:

- Establishing a policy
- Improving political will
- Building capacity to implement

### Policy

The first step was to draft a White Paper - a policy document - and get popular consensus around it. The ideas were drafted by a team and the paper taken from region to region for input and comment from a range of stakeholders: NGO's and CBO's, Engineering bodies, municipal councils, local politicians, technical experts etc. Within 9 months a sanitation policy was 'born'. This gave a set of ground rules, which had a measure of support with which to start a programme.

The South African sanitation policy emphasises the following:

- Sanitation is about HEALTH - and good hygiene practice and behaviour is part of sanitation, not additional;
- Capital and running costs for sanitation facilities must be affordable to the country and the user;
- Sanitation options must be technically appropriate and adequate;
- Sanitation options must maintain environmental integrity, and
- options must be institutionally sustainable

The draft White paper was presented to a conference in June 1996 - and from there a National Sanitation Co-ordination Office (NaSCO) was created to turn the good

ideas, words and documents into good hygiene practice and improved sanitation - for all.

### Expectations on the line

The popular expectation was that the new ANC government would 'give us flush toilets' and many politicians had promised as much. This was the expectation even in many rural areas where there was no piped water supply.

Such high expectations are impossible to meet for many reasons. Water is often scarce and expensive, sewerage infrastructure and sewage disposal is costly; sustainable operations and maintenance almost impossible in the poorest areas.

Although South Africa appears to be rich - the total bill for all the infrastructure and services that were expected was clearly unaffordable at national, local and household levels. This was true even if the capital costs were found or loan financed, because most of the population would never be able to afford the monthly tariffs.

The sanitation policy has to address such expectations and financial realities. Many other countries have learnt hard lessons about promising services, subsidies and grants - that are neither affordable to the public purse nor practical to administer. It was a real challenge to decide if South Africa should and could learn from others lessons or if - as many wished to think - it was a special case.

### On going policy development

Policy development is not a once-off activity. Some aspects of policy may turn out to be impractical - Such as depending on subsidies, when there aren't adequate budgets to provide them. Other aspects of sanitation, like helping improve sanitation for farm-workers on large commercial farms or sanitation in schools, needs special attention and development.

### Political will

All countries that have developed a sanitation programme know the importance of obtaining political will to support policy. Given the issues that South Africa has to deal with following the years of apartheid, securing political will to promote sanitation has been no easy matter.

### Sanitation as politics

The flush toilet became a symbol of something all whites had and many blacks felt was their 'right'. Inevitably this has politicised the whole issue of technology choice, and in

turn has vastly complicated developing a sanitation programme for all.

Once the policy paper was drafted, provincial and local politicians complained that the paper had been drawn up and approved at national level – and that they did not necessarily agree with it. In addition, they pointed out that they were much closer to the voters, and it was the local councillors who had to sell the policy – not the national politicians.

### **A toilet is not sanitation**

Sanitation – comes from the Latin word *sanitas* meaning health. Unfortunately, in South Africa the word has been and still is for many, synonymous with sewerage or toilet. This limited understanding has led to a narrow perception of what a national sanitation programme should do. In lobbying for improved political support, a number of strategies have been developed:

The first strategy was to **separate sanitation from toilet hardware and to link sanitation to health**. Most of the South African water sector has a background in water resources management - not public health. Introducing a health perspective has not been easy. The sanitation and health message was also essential when soliciting support from local councillors – who like in so many places - equated delivering flush toilets to getting more votes.

Secondly, it was necessary to **decentralise the sanitation programme** so that sanitation is primarily dealt with at the provincial and local level. The different customs, languages and political histories could be addressed more specifically and therefore more effectively. This strategy has helped with getting local political buy-in – as the programme can deal with local issues – and not appear to be National Government imposing an inappropriate approach.

### **Provincial sanitation task teams**

On this principle, sanitation task teams were developed in most of the nine provinces. The purpose of these teams was to ensure sanitation implementation by developing effective inter-sectoral co-operation. The teams bring together provincial government departments, local government structures, community organisations, non-governmental organisations, tribal authorities, the private sector etc. One of the primary methodologies is to ensure “buy-in” from all these role players through effective information dissemination. This dissemination has to take place both within the province, to include all role-players from the different sectors and inter provincially between the Sanitation Task teams in each province, and with the National Sanitation Co-ordination Office (NaSCO). Foremost is the reminder that South Africa, like all developing nations is a mixture of differences and paradoxes;- social, cultural, racial, economic and political. Included in this list will be issues around long term sustainability, socio technical support and operations and maintenance.

Inter-sectoral development through an effective communications strategy is the key to success in the South African

sanitation programme. It enables the creation and development of partnerships between ministries, directorates, the public and private service sectors and the communities. These communications need to be developed and maintained on a continued basis.

It is against this background that the provincial sanitation task teams were developed.

We are often caught between the constitutional framework, the programme and the project and lose sight of the real client base: the community. Linked to this client base is the question of behavioural change as a qualitative output of the sanitation programme. As such it is usually difficult to quantify its success or output. There are a number of issues which must inform the way we operate:

- Project planning involves the entire community - all role players.
- Legislation, definitions and interpretation of guides must provide an enabling legal framework.
- Good development resources must be easily accessible through a strong effective communications network.
- The relationships between social consultants and key role players must be developed and strengthened
- Language must be simplified
- The national qualification framework must increase its capacity in order to give credibility to the programme.
- Sanitation must be given both political and budgetary strength to run as a stand alone national programme
- The monitoring and evaluation system must be part of an information system that is able to quantify the impact of a programme on behavioural development and not just base itself on a measure of “bums on seats”.
- Accountability through the provincial sanitation forums is vital.
- Sustainability must always be seen as the key to a measure of success
- Training must be outcomes based and this can only be achieved if we develop an appropriate needs assessment prior to the establishment of a programme or project.
- On being given the necessary power, the programme must be de-politicised towards service orientation.
- The provincial sanitation forums therefore become the key to building capacity in the provinces and therefore provide vital socio- technical support to local government who are expected to deliver both the water and sanitation programme to the nation.

One such Sanitation Task team is the Sanitation Task Group in the province of KwaZulu Natal known as SANTAG representatives will be telling the conference about one aspect of the approach they have adopted.

### **Communications and advocacy**

As part of building political will, emphasis has been put on the **role of communications and advocacy**. A campaign of advocacy and information has been launched to explain the facts around sanitation and health and give information about capital and running costs. This is a way of introducing people to a wide range of technical options; explaining

legal and regulatory frameworks etc. This has included:

- presentations to various interest groups and speaking at relevant conferences;
- dissemination of important research findings to decision makers;
- articles in newspapers and magazines,
- making copies of all documents, guidelines and manuals readily available on request,
- dissemination of international lessons learnt;
- encouraging international study tours;
- developing education materials aimed at teachers, children, environmental health workers etc
- developing email networks and a web page; and
- producing newsletters (developed in one province)

These methods need persistent application over months and years to yield results. Usually several approaches need to be used at once, nonetheless the approaches are already proving there is value in sharing experiences and consolidating linkages.

### Programme financing

There is an inseparable relationship between political will and programme financing. Politicians fund what they consider to be important. What is considered important is often 'visible' and can be counted. Thus, the health and hygiene aspects of the sanitation programme have been much harder to 'sell' for financing than building (and counting) toilets.

There has been no easy answer to improving the understanding of the value in financing the health and hygiene components of sanitation, other than to persist with:

- showing the **benefits of creating demand** for sanitation by explaining the health and social benefits to decision makers and senior officials;
- illustrating the **sustainability** benefits of people 'wanting' sanitation rather than being just 'provided' with it;
- demonstrating how much **more willing people are to take up subsidies (if available) or invest of their own accord** – when they understand the health, convenience and comfort benefits of sanitation improvements;
- reinforcing information on **the health service savings** that can be gained from a concerted effort to prevent sanitation related diseases such as diarrhoea, dysentery, worm infestations etc;
- Provide facts, statistics and information on the **limited health benefits of providing infrastructure improvements only**.

### Capacity building

Good policy and political will is useless without the people who are the means to implement the strategy. An early overview of sanitation implementation capacity in South Africa indicated a depressingly small number of people and organisations with appropriate experience and training. As there had not previously been any commitment to 'sanitation for all' or any effort to develop a sanitation

programme, it was not surprising that adequate local knowledge and experience did not exist.

All capacity building initiatives involve a time lag. Different strategies have to be used to address short, medium and long term objectives. Some of the key strategies that have been developed include:

#### Short-medium term:

- on the job training supported by sanitation programme staff
- partnerships between experienced and inexperienced organisations and individuals
- an annual In-Service block release 5 week course developed with WEDC assistance
- Short *ad hoc* workshops developed for specific issues such as monitoring and evaluation, participatory methodologies, technical options, groundwater pollution etc.

#### Medium-long term

- Influencing the content of University and Technikon courses: public and environmental health, Civil engineering, local government management; plumbing, health education and health promotion;
- Developing new accredited courses or modules for other courses.
- Influencing new job descriptions for Community Development workers, Environmental Health Officers etc
- Reorientation of the private sector e.g. consulting and development engineers.

### How quickly can sanitation 'deliver'?

The sanitation programme was mandated to deliver quickly – but international experience conclusively showed that *effective sanitation improvements are a complex, multi-disciplinary and slow process*. Stories of failed sanitation programmes abound – and 'successes' are much harder to find. The South African sanitation started with significant 'project' funding – funds to implement at the community level, but found it difficult to start work until the policy, capacity and political will was developed.

The South African experience has been, and continues to be, that access to project funding in itself does not greatly help to speed up a sanitation programme. However, when it is made available and then not spent – this appears to have negative impact on future funding scenarios. Accepted policies, real political will and capacity to implement are all critical to achieving worthwhile results – and to enable budgets to be spent at community level.

Project funds without dedicated sanitation personnel (in significant numbers) cannot be spent quickly. Projects – especially the first few projects - need support, guidance, help and monitoring. Without capacity (staffing in this case) that is dedicated and knowledgeable, who can guide and support projects any programme runs the risk of visible failure – or at best uncoordinated and contradictory approaches.

Monitoring should be designed to give feedback as to whether target groups are being reached; improvements sustainable; cost recovery achieved and health improved.

In conclusion, sanitation programmes in most countries will take at least 3-5 years before significant sanitation improvements could be seen on a regional or national scale. In some situations the lead-time could be even longer.

The South African experience serves as a reality check to illustrate how much groundwork is usually required before a sanitation programme can start showing deliverables on any significant scale. Situations will vary enormously, and sometimes capacity or political will may already exist – but combining all the necessary parts into a health based sanitation programme will inevitably take time.

## Reference

WATER AND ENVIRONMENTAL HEALTH AT LONDON AND LOUGHBOROUGH (WELL), 1998. *Guidance Manual on Water Supply and Sanitation Programmes*, DFID.

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