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MAXIMIZING THE BENEFITS FROM WATER AND ENVIRONMENTAL SANITATION

Sustaining HESAWA in Mwanza region, Tanzania

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The HESAWA (Health through Sanitation and Water) programme was implemented by the Government of Tanzania with financial support from Sida (Swedish International Development Cooperation Agency). It reached some 3,000,000 people in the Lake Zone between 1985 and 2002. Since 2002, the Tanzanian stakeholders strive to sustain and replicate the benefits of HESAWA without specific external support. This paper gives a picture of the situation in Mwanza Region 2002 - 2005. It suggests that the overall performance is largely in line with expectations, but with some interesting deviations such as the sustained commitment by most water user groups and regional and district administration. From this can be drawn some lessons for the future for the HESAWA stakeholders, and for other programmes planning for phasing out and sustainability. In particular, usefulness of careful institution building and human resources development at all levels.



The Programme 1985-2002

Objectives

The Governments of Sweden (through Sida, the Swedish International Development Cooperation Agency) and Tanzania jointly supported the HESAWA (Health through Sanitation and Water) programme between 1985 and 2002.

The overall objective of HESAWA was to improve the health and welfare of the rural population through improved water supply, health education, environmental sanitation, community participation and capacity and capability building at village and district level. As a priority, it strived to build the capacity at grassroots' level to plan and implement interventions.

HESAWA was conceived after earlier projects had unsuccessfully tried to provide mainly diesel-pumped piped water. It was one of the first attempts in Tanzania to change the culture of top-down supply by the Government, its key principles being self-reliance, sustainability, cost efficiency, affordability, credibility and replicability.

Targeting and phasing

HESAWA was implemented in the three regions of Mara, Mwanza and Kagera, surrounding Lake Victoria.

The Mwanza Region land area covers approximately 20,000 sqkm immediately south of the lake. Annual rainfall averages between 750 mm in the east to 1800 mm in the west, with two rainy seasons. In 1985, the region had a population of about 1.7 million people, of which 80% in rural areas. In August 2002, the national census found the population to be 2,929,644. The major occupations are agriculture, livestock and fishery, with the mining sector and manufacturing picking up.

The districts covered by HESAWA included Geita, Kwimba, Magu, Missungwi, Mwanza City (now Ilemela and Nyamagana), Sengerema and Ukerewe. Within them, 489 villages out of 695 had been covered by 2002.

Fields of activities

The programme focus and approaches changed over time as new lessons were learnt, and with them the activities which however broadly fell in the following categories:

- Construction of improved water supplies.
- Providing health- and sanitation education.
- Construction of school latrines and supporting villagers to construct improved household latrines.
- Carrying out training at different levels.
- Providing both technical and logistical support.
- Building capacity of the private sector to participate in programme implementation.

Implementation arrangements

The programme was initially implemented through the Ministry of Water and the Prime Minister's Office. It was transferred to Ministry of Community Development, Women Affairs and Children (MCDWAC) when a more integrated approach was introduced.

In all affiliated villages a Village HESAWA Committee was initially formed to co-ordinate activities. In the later stages of the programme, emphasis shifted from the village level to Water User Groups (WUGs).

The HESAWA organisational set-up was, particularly in the early stages, a parallel body, added to the government structure. Later on, tasks and responsibilities were gradually and successfully transferred back to government organisations, especially at district level as part of the decentralisation process.

A Swedish consultant, Hifab International AB, was contracted to provide advisory services and implementation support through both international and national advisers working at zonal, regional and district level¹.

The assistance from consultants was gradually phased out, with handing-over from international to national advisors, as well as from advisors to Government staff.

Strategies for ensuring sustainability

The initiative to phase out HESAWA by 2002 came from Sida; The Tanzanian stakeholders accepted, and contributed their best to the smooth winding up of the programme. The Plan of Action for HESAWA Phase IV (1998-2002) focused on ensuring sustainability (see Box 1), and stated the visions for the situation by the time Sida support would come to an end.

This vision was translated into a number of specially designed Phase IV activities, focusing on intensified capacity building and consolidation, including rectification and rehabilitation of non-functioning water points.

Also, districts were encouraged and facilitated to formulate their own "Future of HESAWA" strategies. Stakeholders in Mwanza Region, including both policy makers and government staff, decided unanimously to continue with HESAWA also after 2002, using Government financing and beneficiaries' contributions.

Box 1. The HESAWA notion of sustainability

- The ability of the Tanzanian government to carry on with HESAWA type of programmes after the end of Swedish support, i.e. replicate HESAWA to other regions or districts
- The ability of the district authorities to provide continuous support to villages.
- The ability and willingness of the villages to maintain and use existing water and sanitation systems.

Results and impacts by 2002

In Mwanza Region, HESAWA produced results as summarised in Box 2. The proportion of the rural population getting safe and clean water in 2002 was 45%. 47% of all primary schools and 6% of all households were supported by HESAWA to construct sanitary latrines. Overall coverage of some type of household latrines in Mwanza Region was estimated to be around 75-80%.

At the national programme level, over 50% of a population of 5.5 million people benefited from the interventions. HESAWA was seen to have been successful in establishing a new style of service delivery, and thus contributed to policies and strategic directions in the sector;

- Mainstreaming of user participation in identification, implementation and monitoring of projects.
- Setting and using standards for water services.
- Use of appropriate technology
- Integration of water and sanitation

Significant capacity building (in both technical and managerial fields) had taken place through stakeholders' involvement in programme implementation, participation in courses and seminars, and extensive on-the-job-training. WUGs, being acknowledged owners, organised users and skilled in operation and maintenance of the water points, were the most obvious example of this.

At the end of the programme, HESAWAism had become a locally developed health ideology. The changed attitudes and behaviour had gradually led to willingness to pay or work for services such as access to water.

A noted improvement in gender equality was found to have taken place, e.g. in reducing the time spent by women on fetching water, and in enhancing influence and empowerment of women.

The desired pump spare parts supply service levels had not been achieved, neither through government channels as initially promoted, nor through the private sector. However, distance to spare parts' sales points was not a frequent reason for lengthy pump breakdowns.

The programme was relatively less successful in promoting sanitation than in promoting water, though a shift in focus was seen during the last phases.

Box 2. Results of HESAWA in Mwanza Region as of June 2002

- 2173 wells newly constructed (1962 being shallow wells)
- 417 traditional water sources improved
- 109 rainwater harvesting tanks built
- 2657 water user groups formed² and trained³ and having accumulated on average O&M funds of 55 USD.
- · 421 institutional latrines built
- 13727 household latrines partly sponsored
- 11647 village resource persons (health workers, birth attendants, animators, artisans, pump attendants) trained.
- A large number of higher level water and sanitation technicians, health staff and HESAWA promoters trained.

There was unfortunately no conclusive data to display impact on people's health, or to show the cost effectiveness of the programme.

Risks foreseen with regard to sustainability

Concerns were raised regarding the sustainability of the

programme. It was thought that (examples only):

- Lack of resources among villagers would make it impossible for them to properly maintain water points.
- Future support provided by government staff would be hampered by the frequent transfers of officers.
- Risk of accelerated drop-out of village level resource persons once the stimulation and limited material support from the programme come to an end.

All in all, the likelihood of ensuring HESAWA sustainability (and replication) at national, regional and district levels was considered to be "moderate to low", due to low resource mobilization and competing funding requirements from e.g. the health and education sectors.

For the sustenance of existing facilities by the users, the chances were looked upon more optimistically, especially so by the programme management and the consultant.

The situation 2002-2005

3 years have now passed, during which Mwanza Region's determination and capability to sustain the HESAWA concept have been tested. Except for some donor funds remaining on the bank accounts by June 2002, meant to fund programme "backlogs", activities have been implemented using purely local resources from central government, district councils and beneficiaries.

For the year 2002/2003, the local funds (excluding beneficiaries' contributions) amounted to approximately 60,000 USD. Discouragingly, this was less than the Tanzanian co-funding during the previous, last year of HESAWA programme implementation.

For 2003/2004 the amount had increased to 73,000 USD, and for 2004/2005 to 146,000 USD (planned). The Central Government contribution constituted an average of 80%, and is increasing. The HESAWA type activities undertaken in Mwanza Region since 2002 are presented in Table 1.

In addition, some initiatives were taken by the region and the districts to push for improved supply of at least the most fast moving pump spare parts. HESAWA coordination meetings were held at various levels and were instrumental in pushing for action, including adoption of good practices by other programmes.

The MCDWAC Regional HESAWA Monitoring Officer remains in office, together with some support staff, and actively monitors and supports HESAWA implementation. Collaboration with the regional water department has tightened since the departure of the programme advisors.

At district level, the positions of HESAWA coordinator are mostly maintained together with the inter-disciplinary HESAWA promotion teams, which mostly are mobilized only as need arises. Districts take on the following responsibilities, which stem from the HESAWA programme:

- Monitoring and follow-up at user- and village levels;
- Quality control (verification) of completed installations:
- Promoting enabling environments for sustainability of existing installations, including establishment and train-

ing of WUGs, facilitation of availability of spares for pumps, promotion of gender equality at grassroot level, and facilitation of users' participation.

Generally, trained staff have not been found moving to other locations. Construction activities continue to rely on the local private sector, though their interest in spare parts supply remains low due to low profitability.

Table 1. Current HESAWA activities in Mwanza Region

| Activity | 02/03 ⁴ | 03/04 ⁴ | 04/05⁴ Plan |
|-------------------------------------------|--------------------|--------------------|----------------|
| Training of Water User Groups | 148 (N/R) | 110 (110) | N/R (156) |
| Strengthening of village committees | - | - | N/R (103) |
| Training of Pump Attendants | 166 (N/R) | 35 (10) | N/R (0) |
| Health Education to School Committees | - | - | N/R (528) |
| New Wells | 116 (7) | 81 (16) | N/R (14) |
| Rectification of wells | 14 (14) | 23 (23) | N/R (21) |
| Rehabilitation of pumped water scheme | - | - | N/R (1) |
| Partial sponsorship of household latrines | 50 (50) | 214 (50) | N/R (60) |
| School latrines | 20 (N/R) | 221 (6) | N/R (22) |
| Chlorination of wells | N/R | 251 (251) | N/R (530) |

WUGs are mostly seen to fulfill their responsibilities, which include ensuring cleanliness, repair and safety of their water facilities, using funds raised by themselves. The best performing communites are those without any alternative water sources, and those who receive some support supervision from districts.

Progress is still slow in ensuring legal ownership of water sources by users, which unfortunately had not been completed by 2002.

It has been realized that the earlier abandonment of village water committees under HESAWA, to give way for the build-up of WUGs, was not a complete success. Therefore, re-vitalisation of village committees to function as a complement to the WUGs is now being supported.

Pump thefts continue to occur in some districts, increasing the number of non-functioning water installations. Rectification/ rehabilitation is not prioritised neither by districts, communities (in cases where they have alternative sources) nor other programmes.

No clear and convincing strategy for promotion of household latrines is presently in place, This was also an area of

concern during programme implementation.

With universal primary education, the number of pupils in primary schools has increased, and the task to provide sanitary facilities to schools is enormous. There is now more interest in low-cost technology, such as permanent latrines (double vault) rather than normal VIP latrines.

Several externally supported programmes with water and sanitation components are presently being implemented in the region (see Table 1 and footnotes). Most if not all of these programmes emulate the HESAWA concepts. They make extensive use of HESAWA trained staff, resource persons, tools and equipment at various levels (the wearing down of the latter being a cause of concern).

There are very few cases of users self-financing new water installations, even the hand dug shallow wells equipped with handpumps.

Most of the Districts no longer maintain any regular contacts with Sweden, which is disappointing to some of them. Some Swedish NGOs are however active in the region (VI Agroforestry, Forum Syd).

Hifab International has not been engaged in the water and sanitation sector in Tanzania since 2002. However, it is supporting the sector at national levels in both Kenya and Uganda, drawing on its HESAWA experiences.

Observations and lessons learnt

From the above it can be seen that the HESAWA spirit is still alive in Mwanza Region, contrary to some fears expressed in the past. The HESAWA programme vision to build enough commitment, experience and human resources at all levels to carry on with HESAWA was thus fulfilled.

For sustainability of previous achievements, the existence of WUGs who assume full ownership, possess skills in O&M and have established cost recovery mechanisms, seem to be the key contributing factors. The HESAWA type WUG package should thus be recommended as a standard building block for any future interventions.

For replicating and scaling up the HESAWA concept, its application under other programmes and ministries seem to have had the greatest impact. The individual local HESAWA-trained resource persons at village-, district- and regional levels have been central for this positive development. They thus constitute an indispensable resource base for the future, and high priority should be given to maintaining their skill- and motivation levels through various refresher- and replacement trainings.

Capacity-wise, the present overriding constraint to replication and scaling up is clearly lack of funds. It is regrettable that, in the light of the struggle to achieve the Millenium Development Goals for Tanzania and Africa, the existing implementation capacity in terms of human resources and well established, demand-driven and efficient HESAWA implementation mechanisms in Mwanza Region are not fully utilized to reach the remaining villages.

It can be sadly noted that for Mwanza Region, the implementation rate of new installations presently does not keep

up with the population growth of 3.2%.

In conclusion, many sector stakeholders could evidently benefit from replicating especially elements of the HESAWA human resources development package. However, there is a lot more to learn from HESAWA. Sida and the Government of Tanzania are likely to undertake a post programme evaluation within the years to come, from which we expect to gain other useful experience. Hopefully, we will find that the words "phasing out" and "winding up" refer to the Swedish support only, and not to HESAWAism in Mwanza Region.

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Notes

- 1. Up to 1998, the National advisers were employed through a local consulting company.
- 2. WUGs have 12 members (50% women) assigned to three sub-committees; Finance and Planning, Security, and Technical matters.
- 3. Basic WUG training package consisting of: Training of WUG trainers, Introduction of WUG concept to villages, WUG orientation, and WUG committee training. Other WUG trainings include Pump attendants' training, Hygiene education, and Participatory monitoring skills.
- 4. In brackets, implemented using pure HESAWA funds. Not in brackets, implemented using funds from UNICEF, World Bank, JICA, NORAD, PLAN, CARITAS or other programmes, or Government basket funding for sanitation.

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