
36th WEDC International Conference, Nakuru, Kenya, 2013**DELIVERING WATER, SANITATION AND HYGIENE SERVICES
IN AN UNCERTAIN ENVIRONMENT****A learning approach for improving sanitation and hygiene
services: experiences from PILS in Northern Uganda***V. Bey, The Netherlands***BRIEFING PAPER 1735**

Performance Improvement through Learning on Sanitation (PILS) was a district- and sub-county-based learning initiative aiming for increased performance, innovation and change in rural sanitation and hygiene in Northern Uganda. PILS was implemented in 2009-2012, shortly after the end of a more than two decades long civil war. In the midst of this transition phase from conflict to peace, local populations, as well as agencies and organisations involved in the provision of sanitation and hygiene services, were facing drastic changes in context, roles and responsibilities, relationships, resources, etc. PILS' approach included the facilitation of multi-stakeholder learning sessions, action research, capacity building and documentation. These led to improved stakeholders coordination, the prioritisation of sanitation and hygiene, and an increase in latrines coverage. The learning approach adopted for PILS undeniably supported stakeholders in the changed context for improving rural sanitation and hygiene.

The context in Northern Uganda at the onset of the PILS project

After more than 20 years of insurgency under the Lord's Resistance Army, between 1985 and 2005, the Acholi sub region in Northern Uganda has been undergoing a transition phase from strongly externally-supported humanitarian aid to peace and development. Most internally displaced people left the camps and went back to their villages. The returnees were then faced with many challenges, as most of them had to start from scratch, building houses and cultivating the bare land. Education and health may only be prioritised after a shelter had been built and food secured; constructing sanitation and hygiene facilities therefore often was postponed. This constituted a direct threat to people's health and new livelihoods. In addition, having been in camps for more than a generation, dependent on assistance for food, housing, health, education, many returnees displayed a strong dependency syndrome. With the view of supporting people to become more self-reliant, it was important to propose sanitation and hygiene approaches and solutions that are appropriate, affordable and sustainable.

District and lower local governments were also faced with many challenges brought by the new context. During the insurgency, many humanitarian agencies and Non-Governmental Organisations (NGOs) were operating in the region. Activities of the ones providing Water, Sanitation and Hygiene (WASH) services were coordinated through the WASH Cluster. After peace was restored, most humanitarian NGOs and UN agencies left Northern Uganda or substantially reduced their programmes. New funding mechanisms had been established by central government and development partners, while local NGOs were facing funding gaps after the departure of their donors. All stakeholders were working with limited financial resources, insufficient to address adequately all development needs. After the dissolution of the WASH Cluster in 2009, the districts formed interim District Water and Sanitation Coordinating Committees (DWSCCs)¹. However, the transfer of the responsibility of WASH activities coordination to the DWSCCs created new challenges. Districts had the mandate but no budget to facilitate the coordination. The international NGOs that had stayed in the area were used to working independently, without supervision from government, while the local NGOs they were funding accounted only to them. This resulted in weak coordination between NGOs and local governments. Besides, actors often were using different approaches and tools, not sharing plans or reports. All this led to non-harmonised interventions, duplication of work and soured relationships.

The PILS' learning approach for improving sanitation and hygiene services

This new situation created on the other hand opportunities to look at the tasks differently from the perspective of governance, planning, implementation and roles and responsibilities. The new situation in Northern Uganda, with changes in stakeholders' roles and more limited resources to address new needs, marked a new era and was therefore an excellent learning ground.

Performance Improvement through Learning on Sanitation (PILS) was a two and half years initiative (October 2009 – March 2012) funded by the Austrian Development Agency and carried out in the Acholi sub region, in the districts of Gulu, Kitgum and Pader, and in two sub-counties (S/Cs) in each district². Implemented by IRC International Water and Sanitation Centre (IRC), Network for Water and Sanitation Uganda (NETWAS U) and Caritas Gulu Archdiocese, PILS was a district- and sub-county-based learning initiative aiming for increased performance, innovation and change in rural sanitation and hygiene. The overall objective of PILS project was to contribute to improved health and livelihoods of the rural population through sustainable sanitation and hygiene facilities and behaviours at household and primary school level in the targeted areas. As the DWSCC leads the coordination of all WASH stakeholders in a given district, the project aimed at supporting these committees in their leadership and tasks to coordinate all actors involved in sanitation and hygiene, and harmonise strategies, approaches and technologies.

Expected results of PILS in the project area

The expected results of PILS in the Acholi sub region were:

- District-based multi-stakeholder learning platforms are functional and contribute to changes in perceptions and attitudes, increased effectiveness in coordination and harmonisation, more capacities and decision-making for improved performance;
- DWSCCs have realistic performance targets, innovative strategies, and monitoring and accountability systems;
- Stakeholders in selected S/Cs and villages take on their responsibilities, use improved monitoring methods and tools, carry out action research, have increased capacities on approaches and technologies, contribute to better sanitation and hygiene in rural households, school, S/C offices.

Approach and Methodology of the PILSproject

PILS drew on multi-stakeholder processes called 'Learning Alliances'³, which consist in interlinked multi-stakeholder platforms. Learning Alliances aim at building relationships, sharing information and experiences, and planning for solutions to common problems that cannot be solved by a single stakeholder. They help to create synergy between policy and practice, improve coordination, harmonise approaches, facilitate learning from the past mistakes and current successes. Each platform within a Learning Alliance should bring together a range of stakeholders who capture diverse roles, interests, skills and experiences. If the alliance is representative of the institutional complexities and other realities of the system, then it is more likely that the agreed actions and solutions will be put into practice. Linkages are also built between the different administrative levels, from community to national level, enhancing upwards and downwards communication and feedback. Ultimately, Learning Alliances aim at stakeholders' interventions being better coordinated and having greater impact. Improvement of performance is the core result of learning.

Figure 1 shows the setup of the PILS Learning Alliance, and where the focus of the intervention was. Learning platforms were established at S/C, district and regional levels, while the National Sanitation Working Group was the national-level platform into which issues from the lower levels fed.

Relationships were built with stakeholders who are directly interacting with communities and schools:

- At district level: councillors and other leaders, district heads, technocrats, local Civil Society Organisations (CSOs) and NGOs, the private sector and local media.
- At S/C level: councillors and other leaders, S/C chiefs, technocrats, CSOs, Community-Based Organisations (CBOs), school representatives and the private sector.

The project acted as a facilitator or catalyst of learning and change. PILS' starting point was that in order to make any improvement we have to learn about current sanitation and hygiene interventions, about successes and failures, and how things can be improved. The project had four main elements: **multi-stakeholder dialogue sessions** at district and S/C level, directly linked and accountable to the local authorities, **action research** at household and school level, **capacity building** and **documentation**.

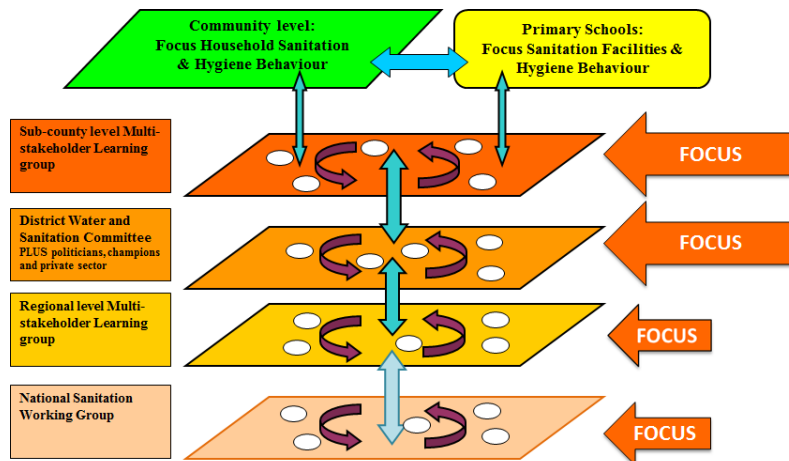


Figure 1. Learning alliance structures in the PILS project

Source: IRC

Main activities undertaken under PILS

The core of the PILS initiative was the facilitation of **multi-stakeholder dialogue sessions** at district and S/C level, bringing together stakeholders involved in the provision of sanitation and hygiene services. The regular learning sessions (2 to 3 times a year at districts and S/C levels) were the occasion for these actors to sit down together, share their experiences, and take concrete steps towards more coordination and harmonisation. Some of the activities undertaken during these learning events included joint evaluation of the situation, identification of issues and development of a joint vision; mapping of existing good sanitation and hygiene practices; dialogue on strengthening of harmonisation and coordination; identification of field cases to be documented; joint planning for sanitation and hygiene activities, etc. During these dialogue sessions, topics for action research were also selected, and progress on the action research reported upon.

What is action research?

Action research is research carried out by practitioners (undertaking actions) supported by researchers (who help to analyse and document these actions). The aim of action research is to make both 'action' and 'research' more effective in the overarching aim of supporting positive innovation. Action research follows a cycle of planning an action to be jointly tested in the field, action, observation of the results, followed by a reflection on the achievements and shortcomings of the tested action.

Action research activities implemented under the PILS project were two-pronged and focused on the following broad issues:

- **Strengthening of local structures**, both community-based structures (Village Health Teams, WASH committees, Community Health Clubs, School Health Clubs, School Management Committees) and local government-led structures such as the District and Sub-County Water and Sanitation Coordinating Committees. This action research was supported by the development of guides on related institutional mechanisms, such as a field guide for the formation of school health clubs and a Reference document on roles and responsibilities of district and S/C staff in the promotion of sanitation and hygiene.
- **Improvement of sanitation coverage**, through the promotion of low-cost appropriate sanitation technologies and approaches, in particular Ecological sanitation (Ecosan) and Community-Led Total Sanitation (CLTS). The action research on Ecosan consisted of the piloting of composting toilets - arbor loo and fossa alterna latrines - in households and support for improved operation and maintenance of existing Ecosan toilets at institutions. This was supported by capacity building of local masons on Ecosan technologies, and the development, translation in local language, and dissemination of information materials, guides and manuals for various audiences (households, masons, local government, NGOs).

During the course of the action research, **capacity building** activities aimed at various stakeholders were undertaken, either through specific training events (e.g. training of masons in the construction of Ecosan facilities) or on-the-job, in particular for staff from local government and NGOs who participated in the **documentation of good practices** within the project areas. A total of 11 cases were documented⁴.

Results of PILS

The main achievements of the PILS project in the intervention area included improved relationships, coordination and communication among various actors, the prioritisation of sanitation and hygiene by local governments, and an increase in sanitation facilities coverage. These results certainly cannot entirely be attributed to PILS; however there is a wide consensus among stakeholders who were involved in the initiative that it greatly contributed to these.

Improved relationships, coordination and communication among various stakeholders

Following dialogues during the first learning platforms on the need for better coordination, the DWSCCs, which in all three districts had been quite dormant, were revived. More organisations and agencies have been on board and attending both the PILS learning sessions and DWSCC meetings. In addition, coordination between district departments having a responsibility in sanitation and hygiene (water, health and education departments) was reported as having improved. Tools were also put in place by the districts, with support from some NGOs, to facilitate coordination. In Gulu, these included a coordination calendar and a mailing list (googlegroup), enhancing information sharing and planning of sector meetings and events.

Similarly, coordination structures at S/C level (Sub-County Water and Sanitation Coordinating Committees – SCWSCCs) were revived, and in some instances established when not in existence before. In Kitgum district, two SCWSCCs were revived, while the District Water Officer (DWO) wrote letters to all S/C authorities in his area, requesting that these committees be in place. In Pader district, one SCWSCC was revived, while in Gulu district one S/C council resolved to reactivate and fund the committee from 2012.

In addition to being a catalyst for strengthening coordination structures at district and S/C level, PILS contributed to improving the relationships between the various stakeholders in the project area. Through their participation in the learning platforms, politicians, technocrats and NGOs/CSOs were able to dialogue and learn from each other. This created a mutually benefiting and trusting relationship.

Based on these improved relationships, districts have been organising joint follow up and monitoring of WASH activities implemented by the different stakeholders. In Kitgum, district staff would stop an organisation from triggering CLTS in any village unless it came through the office of the District Health Inspector (DHI). This office first verified whether the personnel of the organisation were trained in CLTS facilitation and how they planned to involve district and S/C staff. In some cases, organisations with no personnel properly trained in the CLTS approach were seconded staff from the DHI for the triggering phase.

Local governments here therefore did not stop at supporting better coordination but also exercised their real roles of service authority, holding some CBOs accountable. Good coordination between stakeholders indeed usually goes hand in hand with adequate accountability and transparency mechanisms. As regards to transparency, Adilang S/C (Pader district) started displaying monthly updated information on water and sanitation (population figures, water points and latrine coverage, financial allocations and WASH projects executed in the area) on notice boards at the S/C headquarters. Transparency initiatives were also initiated at grassroots level, with the health assistant and the local community management structures in Kitgum district running local dialogue meetings locally nicknamed “Te cwa”, during which sanitation issues and general health matters are shared, followed by attendants suggesting local solutions to their challenges.

Prioritisation of sanitation and hygiene by local governments

Having set the topic of sanitation and hygiene high on the agenda, the PILS initiative contributed to stakeholders in the region giving more priority to these. A strong sign of prioritisation of a given area of work are the resources allocated to it. Although still remaining modest, budgets allocated to sanitation and hygiene activities increased significantly during the project period. Adilang S/C for example increased this budget line from UGX 50,000 (USD 19.71⁵) to UGX 1,500,000 (USD 591.24). In Kitgum district, Akwang S/C chief allocated UGX 100,000 (USD 39.42) from the graduated tax compensation for funding two quarterly SCWSCC meetings at the end of 2011. She also approved the allocation of UGX 600,000 (USD 236.50) to health assistant for implementing sanitation and hygiene activities in the S/C, and of

UGX 200,000 (USD 78.83) to the distribution of the Household Assessment Book (HAB) to Village Health Team members, so that they can collect sanitation and hygiene data and submit them to the S/C authorities.

Another sign of the stronger emphasis put on sanitation and hygiene by local stakeholders concerns monitoring practices. Local government and NGOs indeed need good data on coverage and practices to be in a position to plan and implement adequate remedial actions. At the beginning of PILS, participants of the learning sessions undertook baseline surveys on sanitation and hygiene. The HAB, the main sanitation and hygiene monitoring tool of the Ministry of Health, was at first seldom in use in the region; at the end of the project, all three districts were promoting it. Local governments and NGOs were negotiating so that they all use HAB for collecting data on sanitation and hygiene in communities, while some NGOs were supporting the districts to obtain more copies of the book and others were working on its translation in local language.



Photograph 1. An arbor loo in Gulu district (Photo credit: V. Bey)



Photograph 2. District learning session in Kitgum, Feb. 2012 (Photo credit: Caritas)

Improvement of household sanitation facilities coverage

As already described, one part of the action research focused on the improvement of sanitation coverage through the promotion of Ecosan facilities and the application of the CLTS approach.

Increase in household latrine coverage was mainly achieved through the use of CLTS as an approach, and other sensitisation campaigns (e.g. promotion of ideal homes). For example, between early 2010 and early 2012, latrine coverage was reported as having increased from 40% to 80% in Lakwana S/C (Gulu district), and from 11% to 48% in Adilang S/C (Pader district). Still in Pader district, one development agency (ZOA) declared 8 villages Open Defecation Free. This success was attributed to a combined effort of ZOA, who reviewed its CLTS triggering process, and local government staff who provided technical backstopping.

The piloting of arbor loo and fossa alterna latrines in households offered new lower cost, appropriate technology alternatives to households that were resettling in the area (as low as UGX 117,450 / USD 46.29 for an arbor loo). The piloted Ecosan toilets were usually well appreciated, both by learning platforms participants and users. Nonetheless, the replication and scaling-up of the Ecosan toilets was limited, with only a few households picking up these innovations. Though cheaper than other improved pit latrines, the Ecosan facilities were still perceived as expensive. This was partly due to the use of cement for the slab, but most probably also linked to the widespread dependency syndrome in the communities, with people expecting to get materials for the slab for free.

Lessons learnt from PILS

Learning as an approach was very much appreciated by stakeholders in Northern Uganda. PILS came at a very opportune time for the three districts; for instance, the DWO of Kitgum commented that the project arrived right at the moment he was trying to put in place and strengthen coordination structures at both district and S/C levels. The initiative supported him at the right time to address gaps he had identified.

Promoting learning and change in practices nonetheless hasn't been an easy path for the project, and some challenges were met, both for the conduction of effective learning sessions and the action research work. Difficulties faced included the lack of continuity in attendance of some stakeholders involved in the learning platforms, or the lower priority sometimes allocated by participants to the actions agreed upon during these

sessions, compared to other tasks at their offices. These issues required a close and regular follow up by the project team, to keep stakeholders mobilised, both for attending the learning platform meetings and carrying out agreed action research activities. A good continuity and regularity of the dialogue sessions was also crucial for keeping the momentum. Specifically on the action research, as already mentioned, although the low-cost technologies introduced were appreciated by the households, the level of adoption remained low.

One of the unresolved issues still at the end of the project was that, although DWSCCs were revived, attendance at the DWSCC meetings was still fairly low. Reasons for this poor attendance included poor planning and organisation of the meetings, as well as the difficulty for such coordination meetings to compete with other events organised by some NGOs or other district departments, where a more significant allowance would be given to attendants. The issue of allowance is still a burning point, and highlights also the importance of having harmonised approaches and practices.

The above challenges stress that such learning initiative takes time, and requires a close follow up by facilitators of the process. Despite these issues, the changes brought in stakeholders' relationships, perceptions and practices, and the achievements obtained within a short period of two and half years (after 20 years of a completely different situation) are still very significant.

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Note/s

- ¹ A DWSCC is a WASH coordination body to be formed in each district of Uganda. It typically consists of district technocrats and NGOs representatives active in the district, and is headed by local government.
- ² Bungatira and Lakwana S/Cs in Gulu district, Akwang and Kitgum Matidi S/Cs in Kitgum district, Adilang and Atanga S/Cs in Pader district
- ³ See <http://www.irc.nl/page/14957>
- ⁴ See <http://www.irc.nl/page/67473>
- ⁵ Exchange rate 01/12/2011, USD 1 = UGX 2,537.03 (Source <http://www.oanda.com/currency/converter/>)

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