

FINAL PROPOSAL SUMMARY

**Program to Support At Scale Implementation of the
National Hygiene and Sanitation Strategy through
“Learning by Doing” in the Amhara Region**



Ministry of Health

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Amhara Regional State – Health Bureau

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Water and Sanitation Program – Africa Region

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USAID/Hygiene Improvement Project (HIP)

February 2006

Background

The Water and Sanitation Program (WSP-AF) is providing strategic advisory support to the Ministry of Health (MOH) on the preparation of a National Hygiene and Sanitation Strategy and Protocol, as per the Strategic Cooperation Alliance (SCA) signed by the two organizations.

This proposal is part of the overall support to the MoH and more specifically relates to a program to operationalize the National Sanitation and Hygiene Strategy through learning by doing in one region, Amhara, and generate valuable lessons and guidelines for other regions to replicate.

The National Hygiene and Sanitation Strategy is a 'living' document which has been developed by the Ministry of Health through consultation with the Ministries of Water Resources, Education, Agriculture and the EPA as well as Regional Health, Water and Education Bureaux, donors and NGOs.

The Ministries of Health, Education and Water Resources have signed a Memorandum of Understanding as a vital step towards coordinated implementation of the National Strategy. Ethiopia also benefits from a vital WASH movement which has recently strengthened regional WASH committees to fuel and support the implementation of hygiene improvement activities throughout the country.

There has also been a notable influx of financial resources:

- The World Bank investment of 100 million for water supply infrastructure in half the woredas in the country;
- The African Development Bank is adding an additional \$60 million
- UNICEF is about to receive \$100 million from the Dutch for water supply and sanitation and plans to earmark funds for sanitation and hygiene improvement (USD \$5/per capita)

Additionally there are also success stories emerging from regional reports where *woredas* have experienced substantial latrine construction without substantive external assistance. Strong political leadership has proved important in driving elected leaders and civil servants to persuade householders to construct traditional latrines using locally available materials. Southern Regional State has managed to raise latrine coverage from 15 to over 85 percent in just 3 years (2002-2005)

In the Amhara region (where the WSP- USAID/HIP Collaborative Partnership proposes to work), sanitation coverage has been benchmarked as a performance indicator for elected Woreda and Kebele administrators. The administrators have, in turn, dedicated themselves to achieve a 100% sanitation coverage by 2012. The current regional coverage is estimated to be 23.5%.

Still lacking is concrete operational guidance to implement the National Hygiene and Sanitation Strategy, and coordination of the various actors and activities to enhance synergy and impact.

Purpose

To support implementation of the National Hygiene and Sanitation Strategy through "learning by doing" in one region, Amhara, and, in the process, help the Regional Health Bureau achieve its targets relating to hygiene and sanitation.

The experiences, guidelines, tools and materials developed through the Amhara experience will be refined, documented and adapted for immediate application in other regions.

Overall Program Management

The program will be implemented through a cooperative agreement between the Ministry of Health, the sector ministry providing overall guidance, Amhara Regional Health Bureau (RHB) as the *implementing agency*, the Water and Sanitation Programme (WSP-AF) of the World Bank as the *program managing and coordinating agency*, and the Hygiene Improvement Project (HIP) as the *agency providing focused technical assistance*. HIP is a USAID-funded project providing global technical assistance of hygiene improvement at scale.

The program will support the Regional Health Bureau to facilitate, within the framework of the Memorandum of Understanding, the coordination of an array of multi-sectoral implementation partners in the Region including World Bank, AfDB, UNICEF, FINNIDA, USAID/ESHE, local and international NGOs, private sector, local artisans, and others. Identification or formation of an appropriate coordinating body is essential to program leadership and coordination. A regional coordinating body for hygiene and sanitation will be established.

The Ministry of Health will provide policy guidance, supportive supervision and will facilitate interregional experience sharing and learning with the support of WSP-AF.

WSP will support the program through a fulltime Regional Advisor, an Addis-based WSP Sanitation Specialist, who will provide day to day follow up and technical support to the RHB, and other national and international consultants.

USAID/HIP's Field Implementation Coordinator will provide overall strategic direction, technical supports and daily advice and backstopping to the Regional Technical Advisor. He/she will also work closely with WSP sanitation specialist. In addition, USAID will provide short-term consultancies to address identified gaps.

The anticipated contribution of the Region is counterpart staff time and per diem for RHB staff, office space and logistics support. In addition, the program will be implemented primarily through the resources of participating partners like UNICEF, National Water Supply and Sanitation Project (MoWR/World Bank), FINNIDA and NGOs.

Program Implementation Approach

The joint activities in this proposal will be fully integrated into the activities of the RHB including planning, programming and reporting system.

The program will be implemented through:

- Strengthening regional and woreda capacity for, design, implementation and monitoring of hygiene and sanitation improvement programs, including effective strategic planning, budgeting, coordination;
- Bringing together the combined contributions of participating institutions in the hardware, software, and enabling environment (policies, community organization and capacity) necessary to achieve hygiene improvement and public health outcomes;
- Developing and managing effective implementation partnerships (government, NGOs, private sector, development partners);
- Strengthening the regional and woreda capacity for hygiene improvement, including development of an integrated behavior change communication strategy, preparation and testing of guidelines and materials;
- Supporting the development of regional and woreda-level advocacy strategy;
- Establishing/strengthening regional resource center(s) to document, disseminate and assure easy access to best practices in sanitation and hygiene improvement.
- Supporting the establishment of practitioners groups at all levels

Outputs

The Regional Health Bureau is strengthened to develop and deliver effective hygiene and sanitation improvement programs. Key principles of the national strategy, including minimum standards, are incorporated into the activities of all implementing partners. Varied partnerships are established to ensure comprehensive programming, including hardware, software and an enabling environment. Communication strategies and messages are harmonized across regional actors. Specific outputs include:

1. Implementation Guidelines for the Hygiene and Sanitation Strategy, including tools and materials to support implementation
2. Regional Action Plan for coordinated Hygiene and Sanitation Improvement
3. Regional Capacity-building Plan for Assuring Competencies of Health and Water Bureau Technicians, NGOs, health extension workers, etc. and related capacity-building modules
4. Communication Strategy for Regional Hygiene and Sanitation Improvement and related support materials
5. Regional and woreda-level advocacy strategy.
6. Establishment of a regional resource center(s) to document, disseminate and assure easy access to best practices in sanitation and hygiene improvement.
7. M&E framework and system for program, including indicators developed through a consensus process.
8. Guidelines for conduct of a baseline survey and/or enhanced monitoring data collection.

Timeline and Phases

The proposal is based on the 16 month timeframe covering the fiscal years¹ 2006 to 2007 (FY006-07), the initial stage of a multi-year initiative.

Key Phases include:

Months 1-8:

Assess: Map existing resources (institutional inventory, technologies, promotion materials used, training curricula etc.) and networks for a regional hygiene improvement strategy in the health, water, and education, including public and private sectors. Review and synthesize available epidemiological and behavioral data. Design and conduct baseline.

Catalyze/Build Partnerships/Strategize: Develop coordinated regional action plan through a participatory process. The outcome of these sessions will be commitments from these players to work individually and in concert toward the common goal of hygiene improvement at scale. This phase will culminate in development of a behavior change strategy that reflects shared goals and individual stakeholder action plans.

Months 9-16:

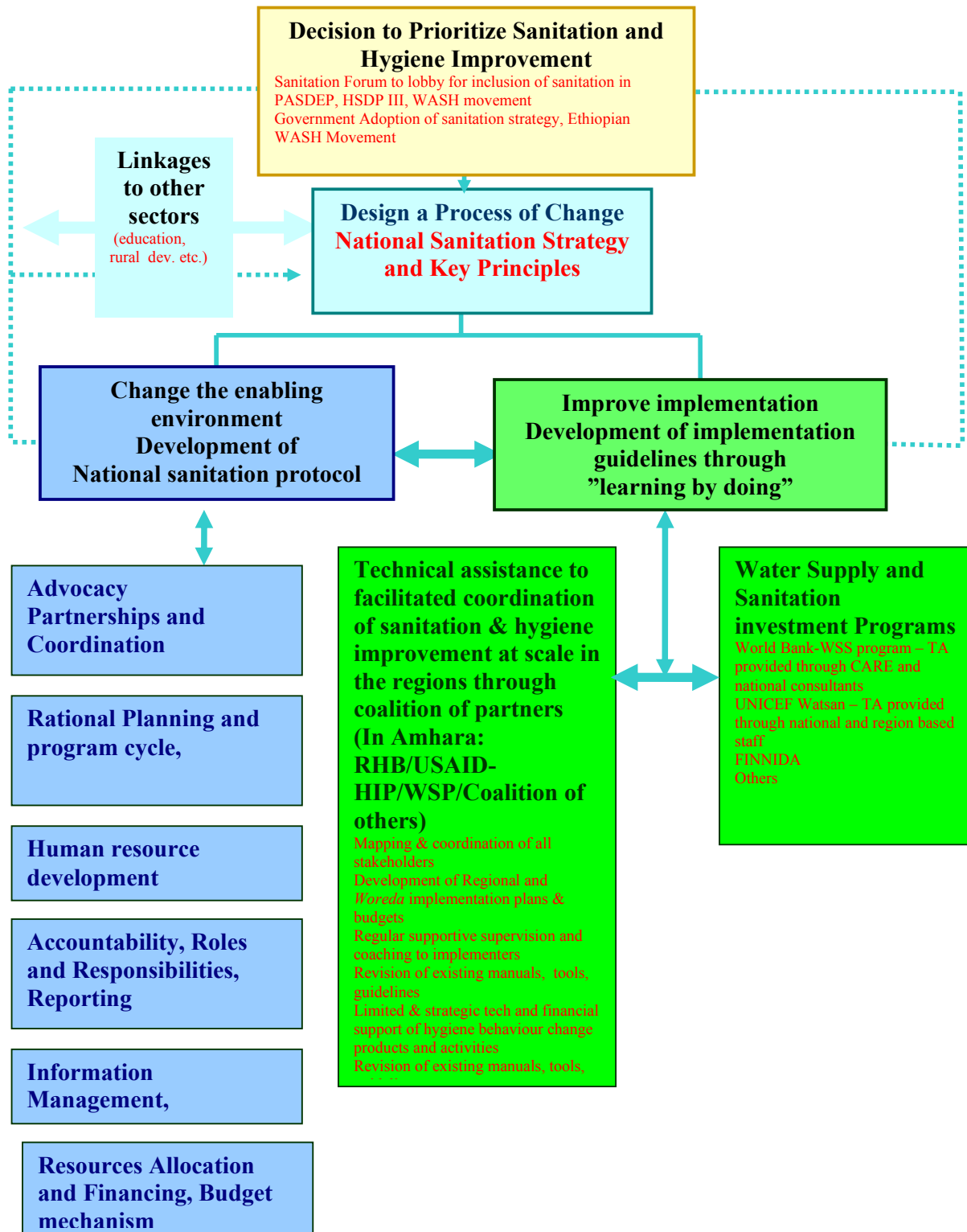
Implement activities & interventions: Multi-sectoral partners will implement the shared behavior change/hygiene improvement strategy, including hardware and software components. Partners bring their own financial resources to implement their action plans.

Monitor Progress, collect process, key outputs and impact data and analyze using agreed upon indicators. Only process and some key outputs can be evaluated within the initial 16-month period.

Synthesize and document process. Finalize and disseminate implementation guidelines.

¹ WSP fiscal year follow the Bank-wide Fiscal Year extending from July 1 of the preceding calendar year to June 30 of the corresponding calendar year.

Figure 1: Towards National Sanitation and Hygiene Improvement in Ethiopia



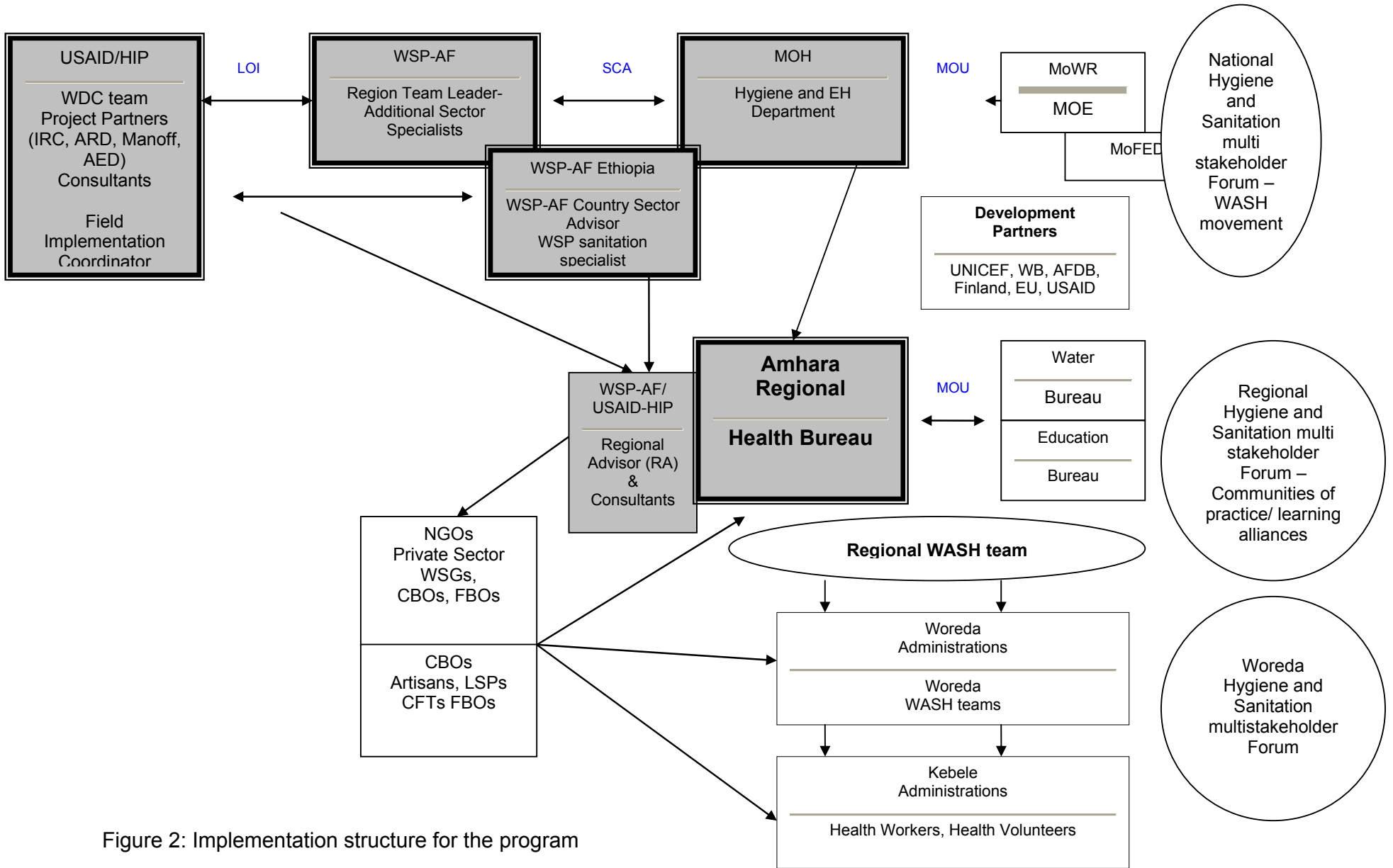


Figure 2: Implementation structure for the program