Good afternoon, I’m Susan Davis from Improve International. I founded Improve International five years ago to improve water and sanitation service delivery for poor people in developing countries.

If you are a government, donor, or development organization, you probably have asked at some point: what’s the best way to invest in sanitation?

Today I want to tell you about how we sought evidence of sustained sanitation successes.
Sustainable Development Goal 6 aims “to ensure availability and sustainable management of water and sanitation for all” in just 14 years.

What’s the best way to do this?
We thought we could learn from the past. The purpose of this meta-evaluation was to identify which sanitation approaches in developing countries have been effective and sustainable.

The work was funded by Catholic Relief Services (CRS)
We hope this information will ultimately help sector actors can position themselves for achieving lasting universal sanitation access.

Today I’ll describe the output of Phase I (desk review and expert consultation) and recommends countries for Phase II (case studies).
Phase I of the evaluation consisted of a desk review and an expert consultation. In the desk review we identified 195 journal articles, conference and webinar presentations, and grey literature reports (dates ranged from 1995-2015). We looked for quantitative data on specific indicators, such as number of communities sustaining ODF post-triggering, or latrines used post-project.

We contacted 43 sanitation experts and were able to interview 28.

There have been some isolated efforts by NGOs to look back over several years at impact and sustainability of their past WASH efforts, for example WaterAid’s and IFRC’s

We found little quantitative evidence of long-term (in this case defined as more than 5 years post-intervention) for NGO-led sanitation interventions. Our findings reflect those of other sector-wide reviews such as the DFID Evidence Paper in 2013 and the WASH Landscape report for the Bill & Melinda Gates Foundation in 2006.
This of course depends on what we were able to find, but gives a sense of the number of studies (the dark blue bars) with quantitative evidence of success more than 5 years post intervention.

You can see that we found many more studies for India.

Challenges related to finding and comparing evidence of results or success include: programs are generally under-studied and results are under shared; progress may be over-reported; collection of data has not been consistent; indicators are not consistent; even where common indicators were used, the definitions of the indicators are not consistent; And approaches have been implemented differently
While some attempts to determine what works over time have been made, comparable information is scarce.

Organizations and governments use various definitions of sanitation. ‘

Many have recognized that toilets are only one element in an entire sanitation system, which should include collection, transport, treatment, and use of excreta

Sanitation can also include hygiene, animal excreta management, solid waste management, and managing young children’s faeces
We started with a working definition of sanitation success as continued hygienic use of improved sanitation facilities at least 5 years after the initial intervention.

We found there is no one widely accepted definition of sanitation success, just as there is no one definition of sanitation.

Furthermore, the factor of scale means being clear about whether a success or failure refers to a local-level project, a national program, or an international policy.

We asked 22 sanitation experts to define sanitation success. This slide shows an analysis of the results as a word cloud where the most frequently mentioned key words or phrases are the largest.

The most commonly mentioned words or phrases were “behaviour” (9 respondents mentioned), “service” (8), “sustainable” or “sustained” (8), “location” (7), “waste management” (7), and “sanitation facilities” (6).

Source: Improve International
While this study originally aimed to find approaches that were successful, it has become clear that success depends more on a set of enabling factors that come together in complex ways.

Two overarching lessons from the MDG era are that political will is critical in achieving universal sanitation, and that sanitation is not just about building toilets.

Other factors that were frequently mentioned as critical to sanitation success, but that have been rarely studied include:
- appropriate roles and responsibilities: if sanitation needs to be government-led, what is the appropriate role of donors and NGOs?
- wastewater treatment and latrine pit emptying
- quality of latrine construction
- use of toilets
- cleanliness of toilets
- availability of water for construction, repair, sewerage and cleaning
This is a sample of the table we assembled. The full table is available in the paper.

The idea was to triangulate with quantitative data, MDG progress, and expert opinion.

The blue highlighted countries are the ones selected subjectively in consultation with CRS. They wanted to select countries where CRS had a presence. We are open to additional countries as we look for collaborators.
It is likely no country – developed or developing – would be considered to have achieved successful sanitation if all of the sanitation targets for SDG 6 were included.

Based on the evidence and the expert consultation, there has been no NGO-led sanitation approach that led to success at scale.

While sector actors don’t necessarily share views on what needs to be done to achieve universal sanitation, it is clear that it requires shifts in mindsets, attitudes and ways of learning, collaborating and being accountable by all actors involved.

We believe it will be useful to identify countries moving toward successful sanitation and describe the support roles that NGOs have or should play.
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Thus, CRS wanted to identify countries moving toward successful sanitation and examine through the Phase II case studies the useful support roles that NGOs have played or could play.

Thank you.