

Progress Brief: Basedth and Chumkiri Districts



Sustainable Sanitation Hygiene for All (SSH4A)
Programme SNV Cambodia



SNV in Cambodia

SNV has been collaborating with the Ministry of Rural Development and Provincial Department of Rural Development since 2010 on the Sustainable Sanitation and Hygiene for All (SSH4A) programme, which aims to improve the health and quality of life for rural people through improved sanitation and hygiene practices.¹ In 2012, SSH4A was implemented district-wide in Banteay Meas, Kampot, which at that time had sanitation coverage of 16%. After four years of implementing SSH4A, in 2016 Banteay Meas has been declared the first open defecation-free district in Cambodia.

In January 2015, building on the lessons and success of the approach in Banteay Meas, the SSH4A programme was scaled up in two new districts, Basedth, Kampong Speu province and Chumkiri, Kampot province, both of which had low sanitation coverage. Through the programme, SNV is working with local authorities towards elimination of open defecation and enabling equitable and sustained access to improved sanitation and hygiene practices by December 2017.

This brief provides highlights of progress in Basedth and Chumkiri after the first year of the programme.

Progress highlights by 2016

Basedth

90,000
people have
access to
sanitation
facilities

9,380 new latrines were constructed



2,310new
latrines were constructed

people have access to hand washing facilities with water and soap in or near the toilets

people have access to hand washing facilities with water and soap in or near the toilets

Chumkiri

23,000
people have
access to
sanitation
facilities



Sustainable Sanitation and Hygiene for All

SSH4A is SNV's comprehensive approach to ensure equitable and sustainable access to improved sanitation and hygiene by supporting the delivery of district-wide rural sanitation and hygiene services. Developed since 2008, the SSH4A approach is now implemented by SNV in 15 countries in Asia and Africa. More than 2.7 million additional people now have access to improved sanitation and more than nine million have benefitted.

The SSH4A programme integrates best practices in sanitation demand creation, sanitation supply chain strengthening, hygiene behaviour change communication and governance including gender and social inclusion. SNV focuses on strengthening the capacities of local stakeholders to plan, implement, monitor and sustain sanitation and hygiene interventions.

SSH4A globally uses a standardised monitoring framework that measures changes in sanitation and hygienic behaviour and practices, with qualitative information quantified with the help of progressive scales called 'ladders'. Households at the lowest levels at the start of the programme can climb to a higher level on the ladders for each indicator. Each year household surveys² are conducted and district level results reported against indicators for review with projects partners.





Sanitation facilitator conducts BCC event with households who do not use a toilet

SSH4A programme progress, 2015-2016

The results measured in May 2016 are compared against a baseline obtained in March 2015. The programme has now been introduced in all 15 communes in Basedth (covering 29,930 households) and all seven communes in Chumkiri (covering 11,927 households).

Access to sanitary toilets

This indicator is measured at household level and assesses access to toilets.

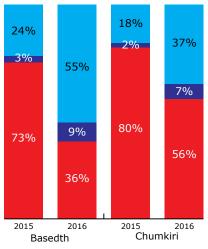
In Basedth

- Access to sanitation has more than doubled, increasing from 27% to 64%.
- Toilet ownership increased from 24% to 55%; with 9,380 new latrines constructed. Ownership for ID Poor households increased from 20% to 23%.
- The proportion of people defecating in the open reduced by 37%. For ID Poor households the reduction was 14% (from 76% at baseline).

In Chumkiri

- Access to sanitation has more than doubled, increasing from 20% to 44%.
- Toilet ownership increased from 18% to 37%; meaning about 2,310 new latrines were constructed. Ownership for ID Poor households has increased from 0% of Poor households to 9%.
- The proportion of people defecating in the open reduced by 24%. For ID Poor households the reduction was 10% (from 96% at baseline).

Household access to sanitation



■ Open defecation ■ Use toilet of others ■ Use own toilet

Access to improved sanitation facilities

An improved toilet means that it has a facility that stores the waste so it does not come into human contact (e.g. through a covered pit or septic tank) and it is not shared with other households. The scale on access and use of toilet facilities is categorised into five levels (0-4) to understand the progressive scale of households' access to sanitation facilities. Level 0 means no toilet facilities and the benchmark level of improved toilet facilities is level 2.

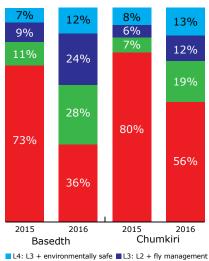
In Basedth

- Households with improved sanitation have increased to 36% from 16%, meaning the number of people with improved toilets have increased by almost 30,000.
- The proportion of unimproved and shared toilets has increased from 11% to 28% of households; this has largely been driven by an increase in houses sharing toilets.

In Chumkiri

- Households with improved sanitation have increased to 25% from 13%, meaning the number of people with improved toilets have increased by almost 6,000.
- The proportion of unimproved and shared toilets has increased from 7% to 19% of households; while shared toilets has increased, the proportion of unimproved toilets has remained the same.

Household access to improved sanitation facilities



■ L2: Improved toilets ■ L1: Unimproved and shared ■ L0: No toilet (open defecation)

Access to improved hand washing facilities with soap

This indicator assesses the existence and quality of hand washing facilities in or near the toilet (as a proxy indicator for the practice of hand washing after defecation). The hand washing facilities are ranked from level 0, means no existence of hand washing facilities near a toilet (or toilet). The benchmark level of improved hand washing facilities is level 2, meaning a hand washing facility is available near the toilet with soap.

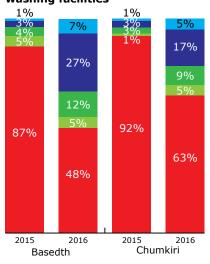
In Basedth

- There has been a 39% increase in improved hand washing facilities, most with running water.
- As a result, about 54,380 more people have access to improved hand washing facilities.

In Chumkiri

- There has been a 25% increase in improved hand washing facilities, most with running water.
- As a result, about 12,960 more people have access to improved handwashing facilities.

Household access to hand washing facilities



■ L4: L3 + no contamination ■ L3: L2 + running water ■ L2: HW with soap ■ L1: HW without soap ■ L0: No facility

What next?

The lessons learned from the success of Banteay Meas, the first ODF district in Cambodia, will be used to reinforce scaling up of the integrated SSH4A approach. Local authorities in Basedth and Chumkiri have already benefitted from learning events and exchanges from Banteay Meas counterparts. SNV will continue to provide support and coaching to build the capacity of local stakeholders in the target districts.

An important feature of the SSH4A programme is the multi-stakeholder cooperation in promoting access to improved sanitation and hygiene. In addition to PDRD/DORDs, district governor's offices, the Department of Education, Youth and Sport, all the primary and secondary schools in the target districts, pagodas, health centres at district and commune level, and all the commune councils and village leaders are actively engaged in promoting the improved sanitation and hygiene in the SSH4A target districts.

The emphasis of the current phase of the SSH4A programme is on further ensuring quality, equity and sustainability in scaling up a government-led, district-wide approach. While ODF provides a milestone for leaders to mobilise around, it is not the end point. The challenge is looking beyond ODF towards the vision of the Sustainable Development Goals and universal access.

First full open defecation-free commune in Basedth district

Basedth commune is the first out of 15 communes in Basedth district declared as open defecation-free in October 2016. Before the SSH4A programme commenced, 54% of the households had access to toilets and people's awareness on the importance of improved sanitation and hygiene was low. In September 2016, the ODF verification committee declared all households in the 22 villages of Basedth commune have access to and are using toilets. The practice of open defecation has been successfully eliminated and more than 12,000 people now live in the healthy open defecation-free commune.

"Before we arrived at this point, our commune and village focal points had worked very hard and were faced with many challenges, but we all tried our best to overcome those challenges... with good solutions to make people change their behaviour from open delectation to using a latrine in every household... We will continue to encourage our people to upgrade their toilet from dry pit to pour flush toilet, wash hands with soap and drink safe water."

Mr Sok Thouch, Basedth commune chief

One of the key successes recognised by the Basedth district and Kampong Speu provincial governor is the local government-led multi-stakeholder approach where village, commune, district, schools, health centre and pagodas work together with technical support from SNV and PDRD to plan, implement, monitor and follow up programme activities.

"The success of Basedth provides a good role model for other communes in Basedth district and other districts in Cambodia. To achieve this ODF result is not easy and I would like to encourage all villages that have ODF today to continue the effort on monitoring after getting ODF to sustain sanitation and hygiene practices in the district."

Mrs Teng You Ky, MRD advisor

The SSH4A programme will continue to work with local authorises in addressing:

- universal access for all through capacity building to steer, finance, regulate, enforce and monitoring linked to a vision beyond ODF;
- environmentally safe sanitation by focusing on the entire sanitation service chain, including services for construction, upgrading, repair and safe timely emptying and informed choice;
- the "last mile" by ensuring progressive equitable access to services and facilities; and
- sustained behaviour change by responding to the changing priorities, including safe handling and menstrual hygiene management.

Authors

Sodany Saing and Jenni Lillingston, November 2016

<u>SNV</u>

SNV is a not-for-profit international development organisation. Founded in the Netherlands nearly 50 years ago, we have built a long-term, local presence in 38 of the poorest countries in Asia, Africa and Latin America. Our global team of local and international advisors work with local partners to equip communities, businesses and organisations with the tools, knowledge and connections they need to increase their incomes and gain access to basic services – empowering them to break the cycle of poverty and guide their own development.

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- 1. Pilot activities were developed and tested in 10 villages across Kampot and Kratie from 2010-2011.
- Trained enumerators collect data from an adult member of the sampled households using a structured questionnaire (supported by observations). Enumerators are largely drawn from MRD and PDRD. The Akvo FLOW tool, an Android smartphone application and an internet-based management tool, are used for data collection and reporting.