Successfully delivering sanitation to all and leaving no one behind means that everyone, including vulnerable groups, should gain access to suitable sanitation facilities that are acceptable, used and sustained over time.

It is increasingly recognised that a nuanced approach is needed to leave no one behind in the efforts to realise the Human Rights to Water and Sanitation (HRTWS) and meet the Sustainable Development Goals (SDGs). Tailored approaches are being implemented, yet further evidence is needed to understand how, when and where to use these approaches. This is prompting SNV to reflect on the range of possible strategies – including actions by government, private sector and communities – and their timing.

In 2017-2018, the Institute for Sustainable Futures - University of Technology Sydney (ISF-UTS) conducted research on SNV’s experience of striving to reach all through the Sustainable Sanitation and Hygiene for All (SSH4A) programme in rural areas across 5 of the 15 countries in which SSH4A is being implemented: Bhutan, Nepal, Cambodia, Zambia and Tanzania. Based on a review of programme documentation, a regional learning event and Dgroup, interviews with programme staff and insights from disaggregated monitoring data, ISF-UTS investigated the breadth of SNV approaches to understand ‘potential disadvantage’ as well as strategies used to ensure inclusive uptake and use of sanitation services.

This research brief provides an overview of the key findings of the research, contributing to discussions about effective support strategies for achieving inclusive rural sanitation and hygiene.

Diversity across SSH4A contexts
The SSH4A programme has a common framework and guidelines to structure implementation and performance monitoring with approaches that may be tailored to different countries and contexts.

Developed in Asia, the SSH4A approach is now working towards sustainable sanitation services in 135 districts across 15 countries in Asia and Africa. It has so far benefited an estimated 10 million people and provided new sanitation access to an additional 4 million rural women, men, boys and girls.

This research synthesises inputs from five countries in order to reflect on and learn from the diversity of approaches, taking the different nature and duration of country programmes and sector progress and contexts into account.
Reaching all

SNV has a clear vision to reach all through SSH4A, and an organisational commitment to invest in, test and adapt a range of strategies that achieve this. Country programmes have applied different and often combined approaches, with 11 support strategies in use across the five case study countries, as summarised in Table 1.

It is important to note that the scale and focus of the different strategies varies considerably, with some quite specific to a particular aspect of programming, and others cross-cutting and broader in reach. This reflects the importance of context in shaping needs and activities across programmes. Similarly, some of the approaches were targeted at reaching specific vulnerable groups such as people with disabilities or women, however most were designed to be all inclusive.

In Tanzania, in the initial phases of the government’s National Sanitation Campaign (NSC), districts which were relatively easy to access, better off in terms of resources and could show results quickly were selected. In consultation with SNV, lessons learnt from these pilot districts were considered and it was agreed that those villages which were relatively remote, poor and difficult to show results would be included in SNV’s target areas as part of the next phase of implementation.

As a key partner of the government in implementing its national sanitation program, SNV Bhutan is in a strategic position to influence sanitation policies, including supporting the most vulnerable and disadvantaged.

To this end, SNV has worked with government partners on three studies (understanding poverty, gender (in)equality and disability related barriers to WASH) and advocated for findings to inform district activities and national policies. One outcome has been the inclusion in the Rural Sanitation and Hygiene Strategy (2015-2023) of an objective to “ensure the sanitation and hygiene of women, girls, nuns and people with disabilities and their meaningful participation in WASH” and within the upcoming national policy.

Table 1: Approaches used to reach all

<table>
<thead>
<tr>
<th>Approaches</th>
<th>Bhutan</th>
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<tbody>
<tr>
<td>1 Targeting districts, selecting programme locations in more challenging or higher needs areas</td>
<td>Remoteness; poverty levels; access barriers</td>
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<tr>
<td>2 Developing local leadership for collective action mobilisation</td>
<td>Vulnerable groups in general</td>
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<tr>
<td>3 Tailoring social mobilisation, behaviour change communication (BCC), demand creation and follow up</td>
<td>Vulnerable groups in general; women</td>
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<td>4 Inclusive and pro-poor sanitation business models</td>
<td>Women</td>
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<td>5 Inclusive technology</td>
<td>People with disabilities; elderly</td>
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<tr>
<td>Training masons in inclusive designs</td>
<td>Women</td>
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<tr>
<td>6 Integrating in local government planning and budgeting</td>
<td>Vulnerable groups in general; women; people with disabilities</td>
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<tr>
<td>7 Working with rights holders’ groups</td>
<td>People with disabilities; women</td>
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<td>8 Latrine discounts and subsidies</td>
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<td>9 Self-financing mechanism</td>
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<tr>
<td>10 Evidence-based advocacy</td>
<td>Vulnerable groups in general; poor; women; people with disabilities</td>
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<tr>
<td>11 Advocating for appropriate use of sanctions</td>
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</table>
In **Nepal**, once a village reaches 80–85% sanitation coverage, local government leaders and WASH committees engage in discussions to mobilise local support for households who are unable to build a toilet – often due to affordability constraints or lack of access to land – to search for community solutions. However, affordability and land access are not always the barriers, and tailored strategies are needed. In Banke district, where there is a large Muslim population, very little traction was achieved through social mobilisation efforts with the wealthy households. To address this, SSH4A employed a senior social mobiliser, who was Muslim and well versed on the dynamics of the local communities, to oversee and facilitate community mobilisation activities. A female Muslim social mobiliser was also employed to support this work and conduct house-to-house visits to facilitate engagement with women.

In **Zambia**, masons were trained in the construction of inclusive designs. Demonstration toilets were built at clinics, schools and homes of PLWDs. Lessons learnt include the need to locate demonstration toilets where they will be needed (not only in district centres) and the importance of understanding the specific needs of target communities. Many designs available in the market assumed the use of wheelchairs, which were unaffordable for most people with disabilities in rural areas.

In **Cambodia**, SNV worked with rights holders’ groups to reach potentially disadvantaged individuals and groups. This included engaging the Disabled People’s Organisations (DPOs) in district level multi-stakeholder workshops. At the sub-district level, SNV worked with the Commune Committee for Women and Children (CCW/C) to generate demand for toilets among women.

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<th>Nepal</th>
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<td>Remote; poverty levels; access barriers</td>
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<td>Ethnic minorities; people with disabilities; female-headed households (HHs)</td>
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<td>Women; children; elderly</td>
<td>Vulnerable groups in general</td>
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Reflecting on the SSH4A approach

To enable reflection on the breadth of SSH4A support strategies, Figure 1 maps strategies with reference to the scale(s) at which they typically focus across community, local and national levels.

According to recent literature and in line with the principle of subsidiarity, preferentially using the lowest appropriate level of support mechanisms is likely to be least disruptive to the social and economic dynamics of a community, facilitate accountability and strengthen sustainability. SSH4A strategies dominantly span the community and local governance levels, aligning with this approach and demonstrating SNV’s focus on strengthening local governments and building capacity to take responsibility for reaching all in the communities they serve. Ultimately, in designing an approach to reach all, the aim is to identify the strengths and limitations of support strategies at each of the three levels and seek to build on strengths and address constraints in the way a program works across all. This also means acknowledging and seeking to balance trade-offs when required.

Figure 1. Locating SSH4A support strategies
Reflections and complexities

Reflections

- Disaggregated monitoring data indicates success in reaching potentially disadvantaged groups including the poor, PLWDs, female-headed HHs and older people. Most case study countries saw improvements for these groups across both access and use indicators.

- Undertaking focused studies in collaboration with local government and civil society partners is a valuable way to generate insights that are then used. Studies of this kind can assist with identifying vulnerable groups and considering the support mechanisms that might be needed.

- Consistent, long-term engagement with governments at different levels provides a foundation for achieving structural change towards a greater emphasis on inclusion.

Continuing challenges and complexities

- It is important to be realistic. Working in a complex system, and addressing systemic issues of ‘potential disadvantage’ through a single sector, inevitably places limitations on what can be achieved.

- Recognising that reaching all is resource and effort intensive is necessary, along with thinking about inclusion from the outset instead of ‘last mile’. This is essential to achieve area-wide sanitation and truly leave no one behind.

- There is an inherent tension between the need for focused research and tailoring of programmes to the local context on one hand, and the imperative to aim for scale and efficiency on the other.

- Identifying potentially disadvantaged groups is one challenge, ensuring their voices are heard is another. These require different strategies.
Principles for leaving no one behind

Recent CLTS (Community-Led Total Sanitation) Knowledge Hub publications have identified principles for supporting the least able (Myers et al. 2017) and ensuring that the benefits of rural sanitation reach potentially disadvantaged individuals and groups (House et al. 2017). These two sets of principles were developed with input from a range of sector actors and programmes, and draw on discussions from a workshop on supporting the poorest and most vulnerable (May 2017 in the Philippines), in which ISF-UTS and SNV participated.

As part of the analysis of SNV activities, these two sets of principles were distilled to identify seven themes. SNV activities were considered against these themes to situate experiences regarding the latest sector thinking and inform future directions.

Understanding ‘Who’

The SSH4A approach is area wide, and does not target particular villages or households. Within this approach, reaching all requires careful consideration of how and when to focus efforts on specific groups.

In SNV’s experience, it is important to start from a clear understanding of who the potentially disadvantaged groups might be, the specific barriers they face and the capacity of the market and local government to respond at scale, taking into account affordability as well as other barriers. Tailoring support mechanisms that take into consideration these realities is likely to prove more sustainable and effective.

Approaches used by the SNV teams to identify potentially disadvantaged groups comprise programme initiation and planning activities, as well as ongoing analysis, with a focus on monitoring, reflecting and adapting the programme throughout its life cycle. Working closely with local partners is prioritised, as well as taking a phased, responsive approach to programme implementation. Conducting formative and targeted research is another key activity that ensures the programme approach is grounded and evidence-based.

This research found that the ‘last mile’ differs across programme locations, comprising a mixed group of people, and that affordability should not be assumed as the main barrier for access to sanitation.

Across case study countries, SNV teams have made efforts to include and engage potentially disadvantaged groups in identification processes and during programme implementation. Strategies include: working with rights holders’ groups such as with Ability Bhutan, Commune Committees for Women and Children in Cambodia and advocating for DPOs members within the district WASHCC in Nepal; undertaking tailored social mobilisation, such as employing female and Muslim mobilisers in Nepal; and promoting inclusive business models, for example training female sanitation entrepreneurs in Nepal.

SNV systematically monitors the success of SSH4A activities in reaching programme communities including household level data on (i) access, (ii) use of toilets, (iii) ability to use toilets and (iv) toilet type (among many other indicators). Monitoring beyond access to include use of toilets is a critical part of understanding the ways in which potentially disadvantaged groups benefit (or not) from sanitation and hygiene programmes. Since 2014 this data has been disaggregated to focus on groups that may experience disadvantage including lower wealth quintiles, female-headed households, households with people with disabilities and households with older people. SNV also has an established and widely respected learning programme involving programme staff and other sector professionals in group discussions and face-to-face learning workshops. In 2017, a learning event specifically focused on ‘reaching the last mile’ was held in Lampung, Indonesia. In 2011, an event in Nepal focused on governance addressed gender and social inclusion (GESI), the outcomes of which were reflected in GESI guidelines. Monitoring results, follow-up processes and learning outcomes inform guidelines and adaptations of programme activities on an ongoing basis as part of SSH4A’s responsive approach.

These principles relate to the idea of subsidiarity, in which decisions and actions are taken at the lowest appropriate level. As such, the message is not about only relying on local support, but about identifying the strengths and limitations of support strategies at each level and seeking to build on strengths and address constraints in the way a programme works across all. This also means acknowledging and balancing trade-offs when required. SNV’s approach reflects this principle, with a focus on strategies that aim to facilitate local governments to fulfil their role as duty bearers in ensuring sanitation for all without discrimination.

Working closely with local government partners is core to SNV’s approach, and their commitment to reaching all has influenced the emphasis placed on equity and inclusion in several case study countries. In countries where SNV has established relationships with government, evidence-based advocacy has also been an effective strategy for raising the profile of inclusion, for example working with the Government of Bhutan towards stronger disability-inclusive sanitation in the national programme and with the Government of Cambodia to strengthen subsidy approaches.

SNV’s responsive approach to programme implementation reflects these principles. Use of monitoring data as well as learning and reflection processes have informed specific programme activities across SSH4A countries. The evolution of support strategies is particularly evident in countries where SNV has a longer history of engagement and where the sanitation sector is active and well established. Investment in research, including both formative research and targeted studies, also facilitates context-specific identification of potentially disadvantaged groups and appropriate support strategies.

These principles are reflected in the ways SNV works with local government. For example, in Cambodia the SSH4A team engaged with local government and actors to provide input into guidelines for applying the sanitation subsidy to ensure appropriateness and transparency for all, and a pilot was undertaken to test and refine the subsidy communication strategy. The result was a clearly defined and transparent process with strong accountability mechanisms (Murta et al. 2017).
Future directions

- **Strategic timing:** Timing is a critical consideration. What works at one stage of programming might not work at another. SNV is thinking through when as well as what for reaching all, and how best to move from ‘last mile’ thinking to inclusion from the outset.

- **Tapping existing social support:** SNV is looking at opportunities to learn from and tap into existing social support mechanisms that may be outside the sanitation sector focus. Working with rights holders’ organisations and with government may provide insight into existing support mechanisms for potentially disadvantaged groups, including lessons learnt and opportunities to draw on these to advance sanitation.

- **Institutionalising inclusion:** SNV is focusing on the institutionalisation of considerations for potentially disadvantaged groups. It is working in close collaboration with local government and other partners towards this end.

- **Connecting strategies to results:** Continuing to invest in and innovate in monitoring approaches is of the highest priority, including intra-household measures. There is also opportunity for SNV to undertake more explicit, regular reflection on monitoring results to more readily connect strategies to results and know if and how investments are leading to the desired results.

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