

DEVELOPMENT EFFECTIVENESS COMMITTEE

Chair's Summary of the Committee Discussion on 23 September 2009

Impact of Rural Water Supply and Sanitation in Punjab, Pakistan

1. The Development Effectiveness Committee (DEC) highlighted the importance of combining water and sanitation components in water supply projects to maximize the health-related benefits. However, in this case, the impact on health was found "insignificant." The Independent Evaluation Department (IED) emphasized that the incidence of diarrhea was low to start with, so there was little room for improvement. Besides, the sanitation component was under-funded. Clearly the local communities also needed training in hygiene. They also appeared not to have been told that they did not need to boil the piped water since they continued doing it. Better extension work would improve the impact on health of these water and sanitation projects. The Management representative explained that health awareness was covered in these projects, but he noted the need to strengthen this area. He acknowledged the need to include more sanitation components in such water projects for increased health effectiveness.

2. DEC noted that sustainability was a key issue in these projects, and maintenance of the water supply systems was poor due to financial constraints and lack of training. DEC wondered as to what should be done with these non-functioning schemes. Management did not appear to be keen to follow up with the government of Punjab on sustainability issues. IED noted that the Asian Development Bank (ADB) is continuing its dialogue with the government on sustainability. Management representatives pointed out that ADB is working with the government of Punjab on secondary cities, bringing in management incentives and accountability measures to address some of the sustainability issues. They also emphasized the need for constant follow up to ensure sustainability; it would be a mistake to simply organize and train the community, and then leave it to them. If the system breaks down, the district government must provide the necessary support, and it must monitor the quality of the water. With respect to chlorination, the community is given the kit; but because they are poor, they want to cut costs by using fewer tablets, and thereby end up reducing the effectiveness of the treatment. Constant monitoring is needed if such projects are to be successful.

3. One DEC member noticed that the project did not include provisions to ensure that the poorest of the poor households would benefit, as some of the rural water supply and sanitation projects required up-front payments. This was seen as a serious flaw in the project design.

4. Referring to data in Appendix 1, DEC inquired why the more recent project preparatory technical assistance in Pakistan was more successful than the older one, even though the first one had involved a higher cost. IED explained that the second project followed on from the first one, and it had benefited from lessons learned from the first project. Management representatives added that policy was developed during the first project, as well as relevant procedures, which had contributed to the success of the second one.

Conclusions

5. DEC underscored the importance of health and water supply in ADB's operations.

6. DEC saw further scope to improve the health benefits from water supply schemes by including a larger component of extension work through training, education on hygiene, better utilization of chlorination plants, and integrating sanitation with water supply projects.

7. DEC reiterated the need for post-completion monitoring to ensure that ADB's projects are sustained even after the project is "officially" closed.

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Chair

Development Effectiveness Committee