

Serving the Rural Poor: A Review of Civil Society-Led Initiatives In Rural Water and Sanitation



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Serving the Rural Poor: A Review of Civil Society-Led Initiatives In Rural Water and Sanitation

A discussion paper prepared by the
STREAMS of KNOWLEDGE for
ASIAN DEVELOPMENT BANK

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Serving the Rural Poor

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Abstract

Globally, there are around 1.1 billion people without access to safe water supply and 2.4 billion without adequate sanitation. Of these, around 700 million without water supply and 2 billion without adequate sanitation live in the Asia and Pacific region. The problem is particularly grave and pressing in the rural areas where 70% of the world's poor reside.

Efforts undertaken and investments made for the development of the rural water and sanitation sector in the past were either limited or plagued by various problems. ADB's [Change Agenda](#), formulated during the 2004 ADB Water Week, calls for increased investments in the rural areas to overcome its inherent disadvantages.

At the 4th World Water Forum in Mexico City, 16-22 March 2006, the Asian Development Bank announced a major new initiative that will double its investment in the region's water sector in 2006-2010. Using new [financing modalities, products, and processes](#), the [Water Financing Program](#) (WFP) intends to increase ADB investments in the sector to over \$2 billion annually, focusing them on three dimensions of water—rural water, urban water, and basin water.

Under the WFP's rural water track, ADB will work on services to improve health and livelihoods in rural communities, including investments in water supply and sanitation, and irrigation and drainage.

In late 2005, ADB commissioned the Streams of Knowledge, a global coalition of resource centers in the water and sanitation sector, to study the extent and contribution of civil society (CS) engagement in rural water supply projects.

Findings from the study indicate that:

- There are at least four models of effectively engaging civil society in rural water projects, as shown by experiences in Bangladesh, India, Nepal, and the Philippines.
- Long-term partnerships of CS organizations in local projects tend to ensure functional and more sustainable systems.
- Investments in rural water supply and sanitation implemented with CS involvement positively impact other poverty reduction efforts.

The study was peer reviewed by ADB staff and discussed in a [seminar](#) last 4 May 2006. Inputs from the seminar will shortly be incorporated into the revised draft.

ADB expects to use the findings from this study to strengthen WFP's program of action for rural water.

TABLE OF CONTENTS

	Page
EXECUTIVE SUMMARY	iii
LIST OF ACRONYMS	v
A. Introduction	1
B. Background and Information	3
C. Analysis of the Case Studies	6
C.1. 100% Coverage and Social Inclusion: The Rural Health And Environment Program of Gram Vikas (PURA-INDIA)	7
C.2. Local NGO Capacity Building and Social Mobilization: The NGO Forum Approach	9
C.3. A Gendered and Poverty Approach to Rural Water, Sanitation and Hygiene: The NEWAH Approach	11
C.4. Institutionalization of Community Managed Approach In Water Supply: The PCWS Model	13
C.5. Insights from the Case Studies Presented	15
D. Conclusions and Recommendations	20
E. Bibliography and References	
F. Annexes	
1. Criteria for the Selection of 4 Civil Society-Led Good Practices	
2. Feature Story- Gram Vikas Case Study	
3. Feature Story – NGO Forum Case Study	
4. Feature Story – NEWAH Case Study	
5. Feature Story – PCWS Case Study	
6. Summary Matrix of the Four Models	

Executive Summary

People around the world without access to safe water supply are estimated at 1.1 billion and those without access to proper sanitation facilities are about 2.4 billion. Of these numbers, about 700 million without water supply and 2 billion without sanitation access are living in the Asia Pacific region. The problem is particularly grave and pressing in the rural areas where 70% of the world's poor reside. Efforts undertaken and investments made for the development of the rural water and sanitation sector in the past have been limited and plagued by various problems. These problems, varied as they may be, point to a general and common trouble: *inefficient and inadequate government strategies to deliver sustained services*. At present, *a national strategy to address the needs of the poorest of the poor* remains lacking in most countries in the region. Furthermore, current potential projects for rural water and sanitation development can hardly qualify for ODA assistance nor attractive enough for private sector participation. This is a sad state of affairs, especially considering that addressing the need for such basic services as water and sanitation in rural areas results to improved health and an overall quality of life for the poor as well as socio-economic development for the community.

The Asian Development Bank (ADB) is targeting water as a core investment area in the coming years by doubling the institution's over-all disbursement to the sector from \$1.2 billion in 1999 to an annual average of \$2.4 billion in the coming years. A study and recent consultations undertaken with civil society organisations (CSOs) by the ADB indicate that the implementation of its Water for All policy has been weak in the past in terms of the low quality and quantity of meaningful participation at the grassroots level. It was pointed out that improved participation could lead to better project successes. Another item that was highlighted during the consultations was the need for a common and differentiated approach to equity.

The big challenge that now faces governments is the establishment of a coherent policy and strategy for sustainable water and sanitation developments. Meanwhile, CSOs have been directly and indirectly filling some gaps in service delivery even as they sometimes work independently from government. Many CSOs are now using different participatory tools, methodologies, and strategies, and most of these are linked with the *empowerment of the poor*. A new setting in the WATSAN sector is thus evolving wherein CSOs play a significant role, the people in the community take an active part, and the government as facilitator and supporter from its traditional role of service provider.

There are different models of CSO-led initiatives in different countries in the Asia Pacific region that showcase successful project implementation and sustainability. Four of these – one each from the countries of Bangladesh India (Gram Vikas), (NGO Forum), Nepal (NEWAH) and the Philippines (PCWS) – are presented and analysed in this paper.

Gram Vikas, a multi-awarded and non-partisan secular voluntary organisation, has been working with the rural poor of Orissa since 1979. The organisation currently serves a population of about 120,000 across 450 villages. Gram Vikas interventions are directed at raising critical consciousness and energizing whole villages. Their strategies are driven by active and meaningful community participation. They are currently receiving support from international donors such as ICCO, Christian Aid and the European Union.

The NGO Forum is an umbrella organisation of more about 665 NGOs in Bangladesh. Since its establishment in 1982, it has directly and indirectly undertaken WATSAN projects that benefit 21 million people in the country. It also plays an active part in achieving the government-declared programme "Sanitation for All by 2010". Aside from its close ties with the government, the NGO Forum is also strongly supported by different donor agencies such as DANIDA.

Nepal Water for Health (NEWAH), established by WaterAid in 1992, is a national level non-government organisation specialising in rural drinking water, health education, and the sanitation sector. It works closely with 334 local CSOs to help poor communities secure water and sanitation services and strengthen their capacity for further developments and sustainability. NEWAH has so far completed, among other things, 697 projects serving 788,014 people and 24,604 school students in 49 districts in Nepal.

The Philippine Center for Water and Sanitation (PCWS) has been working with local government units and communities since 1996. The project that will be analysed here served as a model framework for succeeding

rural water and sanitation projects implemented in partnership by the communities with their respective local government units in the Philippines.

Lessons from these four cases show that partnerships arise from a deep need by the people for basic water and sanitation services. The formula for success may be varied but it always involves the participation of local partners or the CSOs, empowering the community through meaningful participation, support from the government, and assistance from donor agencies. Clearly, CSO partnerships will enhance the capacity of governments and the ADB in the provision of water and sanitation services where these are needed most: the very poor rural areas.

This discussion paper concludes with recommendations that can be undertaken by the ADB under its Water Financing Program to promote and support greater investments in the rural water supply and sanitation sector in selected developing ADB member countries. Specifically, the next steps that are suggested are (1) the convening of a roundtable discussion to disseminate and validate the findings presented here as well evaluate how else CSO participation can be tapped, and (2) to undertake a pilot demonstration project involving strong civil society participation from the planning stage to implementation.

LIST OF ACRONYMS USED

ADB	<i>Asian Development Bank</i>
CSO	Civil society Organization
DANIDA	Danish International Development Agency
DILG	Department of Interior and Local Government
DWSS	Drinking Water Supply and Sanitation
GAP	Gender and Poverty Approach
LGU	Local Government Unit
LGSP	Local Government Support Program
MDG	Millennium Development Goal
NEWAH	Nepal Water for Health
NGO Forum	NGO forum for Drinking Water and Sanitation
NGO	Non-Government Organization
ODA	Overseas Development Agency
PCWS	Philippine Center for Water and Sanitation
PRA	Participatory Rural Appraisal
PPTA	Project Preparation Technical Assistance
PURA	Providing Urban Amenities in Rural Areas
RHEP	Rural Health and Environment Program
RWSS	Rural Water Supply and Sanitation
VDC	Village Development Council
WATSAN	Water and Sanitation
UNDP	United Nations Development Programme

Serving the Rural Poor: A Review of Civil Society¹-led Initiatives in Rural Water Supply and Sanitation²

A. INTRODUCTION :

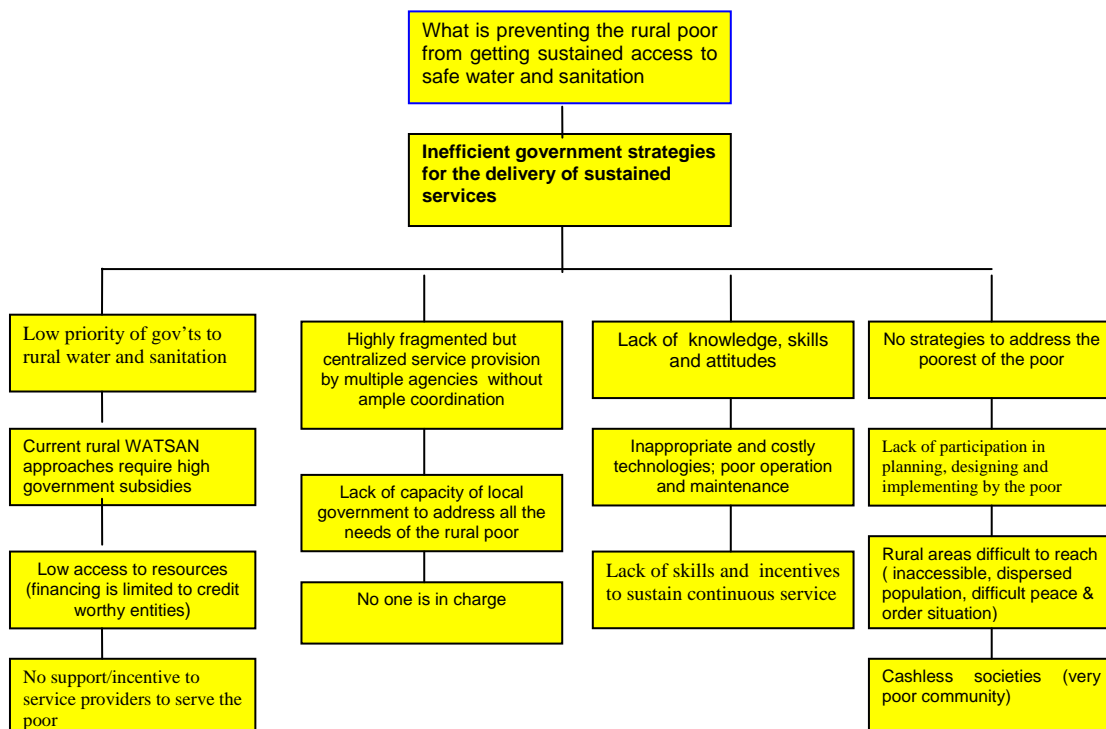
1. About 1.1 billion people do not have access to improved water supply services while 2.4 billion people do not have access to any type of improved sanitation facility. About 2 million people die every year due to diarrhoeal diseases. Most of the affected are populations living under poor conditions in rural, urban and peri-urban areas in developing countries.
2. In the Asia-Pacific region alone, 700 million people still do not have access to safe drinking water and some 2 billion people live without adequate sanitation. Access to safe water and provision of sustainable sanitation facilities including sound hygienic behaviors are crucial to reduce the susceptibility to diseases caused by these factors. With about 70% of the world's poor living in rural areas, it is of utmost importance to give better and increased attention on rural water and sanitation. It is ironic that the rural poor who have lesser economic, institutional and political capabilities to meet their needs by themselves are always left behind in terms of growth and development. Providing urban amenities such as better water and sanitation in rural areas can improve production and rural livelihoods, prevent water related disasters and ultimately help discourage migration to urban cities and slums.
3. **But what prevents the rural poor from getting sustainable access to safe water supply and sanitation?** Despite decades of investment, very little was accomplished in the area of rural water and sanitation. A broad review of the problems besetting the rural water and sanitation sector points out to *inefficient and inadequate government strategies to deliver sustained services*. Many large scale rural water and sanitation initiatives are largely implemented by national government, whose tendency and practice is largely supply driven and infrastructure focused. They fail to work in partnership with communities as they view communities as beneficiaries of projects, rather than project partners. There is also a disparity between what communities are willing and able to pay for and what governments are providing. Connection cost is often high and in rural areas, many of which are cashless societies, this has affected the ability of the poorest of the poor to access basic water and sanitation services.
4. Historically, the water and sanitation sector has a very low allocation of resources. A quick look in the national budgets and public financing of various governments show that *water and sanitation is the lowest among government priorities*. This translates to inadequate and inefficient investment packages. Capacity building is weak and the process of involving other stakeholders in the development and implementation of water and sanitation programs is not built in the project design.
5. Investments for rural water³ are not currently attractive enough for sovereign lending. On-lending of concessional ADB loans at increasing interest rates between different levels of stakeholders means that the end borrowers receive relatively high interest loans. Piped urban water supply gets the bigger share in the very limited water financing programmes. ODA assistance are usually made available to credit worthy local governments and public utilities. Private sector is not attracted to invest in sparsely populated areas where chances of recouping their investment in a relatively short period of time is relatively low. Thus, the rural poor continue to lag behind in terms of growth and development.

¹ In this paper, the term civil society (CS) are interchangeable with non-government organizations (NGOs).

² Discussion paper prepared by STREAMS of KNOWLEDGE, March 2006.

³ Rural Water services improve health and livelihoods in rural communities, and include investments in water supply and sanitation, irrigation and drainage. ADB Water Financing Program, December 2005 draft

RURAL WATER AND SANITATION (RWSS) PROBLEM TREE



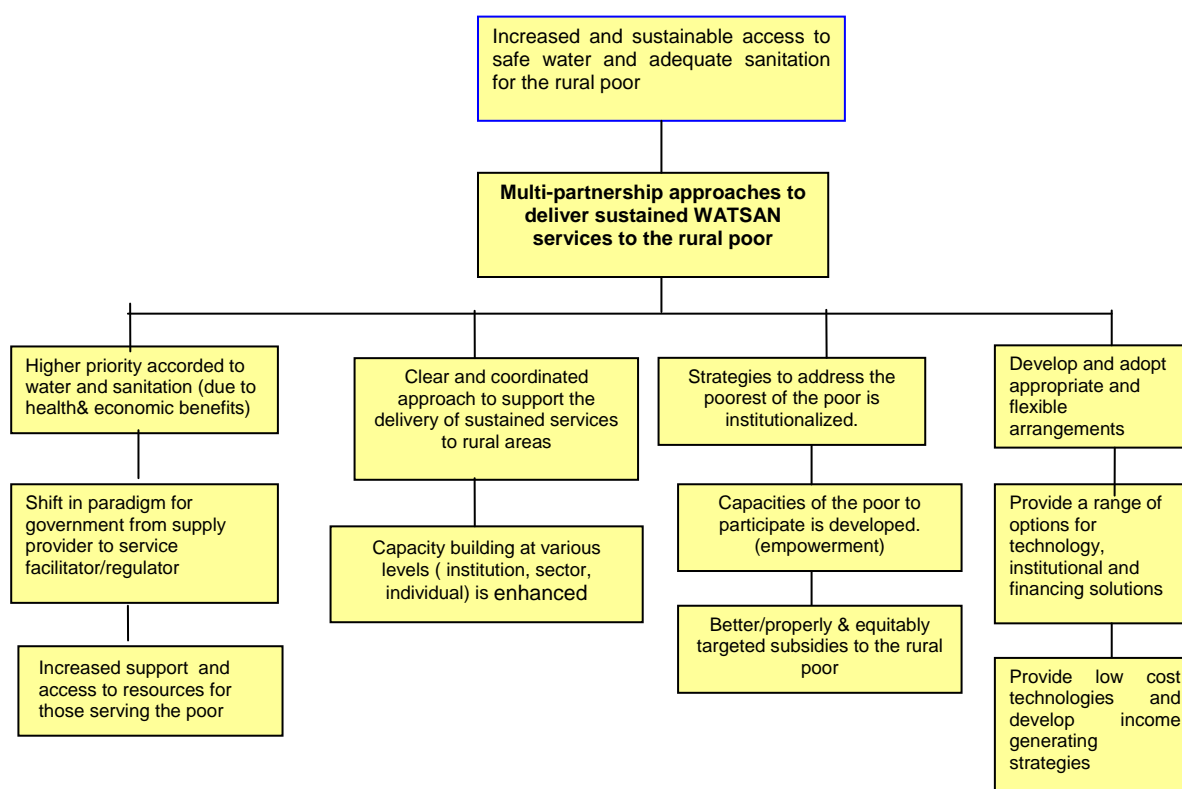
6. From an institutional perspective, while there are a number of government agencies working on water, they are usually uncoordinated and highly fragmented. There is usually no strong sector driver that makes sure the needs of the rural poor for basic services such as water and sanitation are met. At the local level, while service provision has been decentralized in many countries, there is still lack of capacity of local governments to address all the basic needs of their constituencies. There is no one making sure that the service gaps are sufficiently addressed.
7. A more serious and glaring problem is the *absence of a national strategy to address the needs of the poorest of the poor*. While many water projects address the need to increase access coverage, there are no national water and sanitation programmes that make sure that the poorest of the poor is given particular and priority attention. Many national large scale interventions use the common approach of central management with technology, institutional arrangements and financial arrangements pre-determined in the project design. There is oftentimes no flexibility to accommodate innovations and adaptations. There is lack of participation in planning, designing and implementing by the beneficiaries themselves which explains why many rural water projects fail.
8. This sometimes leads to technical-related problems such as inappropriate and costly technologies as well as the lack of awareness of technology options that also hinder the rural poor from having access to water and sanitation. Following this is lack and/or limited capacity of stakeholders to undertake timely operation and maintenance work to sustain the service. The right knowledge, attitudes and skills necessary to achieve optimum and sustained benefits from a rural water and sanitation service is not present.
9. The Millennium Declaration and the Millennium Development Goals have raised an international commitment to reduce poverty over the next decade. Target 10 specifically calls for halving, by 2015, the proportion of people without access to safe drinking water and improved sanitation. This global concern has increased awareness on the necessity of improving water and sanitation services to meet the other poverty reduction, education and health goals. It is widely acknowledged that investing in water, sanitation and hygiene is necessary if the targets of the Millennium Development Goals are to be met. It may contribute significantly to improved livelihoods, improved health and well-being, improved education and better quality of life. These are all linked to poverty reduction.

B. BACKGROUND INFORMATION :

10. The ADB management is targeting water as a core investment area in the coming years. The plan is to double its over-all investments from \$1.2 billion in 1999 to an annual average of \$2.4 billion. A major strategy is to meet the exponentially growing water needs of the region by increasing the share of rural water supply and sanitation from 12% to 25%.
11. Lessons from a recent study on the “Effectiveness of ADB Funded Water And Sanitation Projects In Ensuring Sustainable Services For The Poor”⁴ indicated that while all of the ADB projects in the different countries result in overall improvements in access to water and sanitation, the concern has been raised as to whether the poor are actually benefiting from these improvements.
12. During the recent consultation of the ADB with the civil society in relation to the review of its Water for All policy, the civil society representatives in the meeting strongly pointed out that the major weakness of the ADB policy in its implementation is the low quality and quantity of meaningful participation. It was pointed out that improved participation can lead to economic efficiency, environmental soundness of projects, equity and self-reliance. They also cited the need for a common and differentiated approach to equity. This means that projects that consider both the common needs of the communities and the particular special needs of its different target beneficiaries will benefit more in terms of sustainability. They advocated for better partnership arrangements with organizations who have demonstrated that they can work effectively with the poor.
13. It is best to invest where the needs are greatest! This is the challenge that must be effectively addressed by national governments for rural water supply and sanitation. National governments must have a coherent policy and strategy in addressing the needs of the rural poor. These national strategy and action plan must be developed in partnership with different stakeholders to enable a concerted action of multi-partite approaches to deliver sustained water and sanitation services to the rural poor. But sad to say, in many countries, even the integrity of data used for national planning purposes are questioned. How can the ADB assist national governments in developing these coherent, comprehensive policies and strategies? Can national governments have a clear framework plan that will rally local governments to put rural water supply and sanitation as one of their top priorities?
14. Clearly, having a national strategy and action plan is important. It is the roadmap that should guide implementation. However, implementing the plan is a bigger challenge. Many governments are now realizing that it can not do the job alone. It has to work in collaboration with different partners, taking advantage of the knowledge, skills and resources that other partners can bring into the plan. Even civil society realizes a huge gap in service delivery that many are actually directly and indirectly filling in a gap. Some of them are working independently of government, while others work in partnership with government where sometimes, CSOs act as sub-contractors or consultants of government to implement particular projects with the communities. Almost all of them work in the area of capacity building addressed to both the communities who are expected to manage the systems and to the government whose role of being a service provider is slowly evolving to that of a facilitator and supporter of the community management systems.

⁴ Water for All? A Study on the Effectiveness Of ADB Funded Water And Sanitation Projects In Ensuring Sustainable Services For The Poor, November 2005, WATERAID

RURAL WATER SUPPLY AND SANITATION OBJECTIVE TREE



15. In their quest to improve rural socio-economic situation, some CSOs have slowly evolved into one of the successful partners of government and development institutions in the implementation of water and sanitation initiatives. In an effort to address the needs of the poor in the rural areas, many CSOs have initiated and supported programmes using innovative approaches and strategies to increase the rural poor's access to safe water supply and sanitation, while at the same time linking this to other aspects of development such as education, health, income generation and others. Usually community-based, their interventions are focused and targeting specific geographical areas, where interventions are sorted out with the communities to improve the lives of the poor. These are usually places not reached by the water markets and where service providers do not consider profitable to invest in.
16. Many CSOs are now using different participatory tools and methodologies to assess demand, plan interventions and monitor progress. Many of these strategies are linked to the **empowerment of the poor** – building up their capacity to collectively act on their common needs. Many have also employed the strategy of *differentiation of the poor* – reinforcing the idea that even among the poor, there are the poorest of the poor whose needs, capabilities and capacities are to be prioritized and as such, need a differentiated approach. In some instances, differentiation happens across gender and wealth, recognizing that there are some particularities in terms of strategic and practical needs of poor men and poor women.
17. This is the strategic advantage of CSOs. In many countries, the CSOs manage to work at all levels: national, intermediate (with local governments, other CSOs, academe etc) and with local communities. The starting point is their direct work with local communities which enable them to work closely with the target beneficiaries. Together they identify concrete needs and tailor strategies to specific circumstances. The more effective interventions and approaches are **highly context-specific**. Many of these community based approaches require greater time and commitment to see the project through. This is to ensure that the expected outcomes, especially in terms of behavior changes, happen. CSOs, through their closer contact with the poor communities and their flexibilities, are able to experiment and are often in the forefront in developing new approaches which governments can adopt.
18. Through time, some CSOs have evolved to a level where they are now responsible in supporting other CSOs so that they in turn do the direct grassroots work. This is a strategy that enabled CSOs to support each other and build capacities so that more areas can be reached. Smaller CSOs which operate in specific

areas benefit from this network where by working in partnership with other CSOs, they not only share knowledge but also benefit in contributing to new knowledge. They also have a stronger collective voice in advocacy work, both for national policy reforms and social change.

19. Where in the past, CSOs were seen as sub-contractors of government for community organizing and capacity building, today, many of them are considered major partners of government in implementing sustainable water and sanitation projects. Their understanding of the realities on the ground put them into a central playing field. Many donors are now recognizing this as evidenced from the amount of resources channeled through CSOs.
20. A study of 121 projects by Narayan in 1995 has shown that NGO-supported projects were of higher quality than purely government-run projects. This was attributed to the ability of NGOs to respond quickly to project demands as opposed to large government agencies and the inherent bureaucratic red tapes.
21. WaterAid's Looking Back Report in 2001 showed how continued and on-going support to communities facilitated sustained development within communities. Projects that have been in existence for longer periods tend to have a greater impact than those that are relatively new. Continued visit and advice by CSO project staff to communities have increased impacts to interventions.
22. The CSOs have shown islands of success in sustainable rural water supply and sanitation interventions. There are many examples in the field that show how to implement rural water supply and sanitation. There are different approaches to ensure sustainable access. However, the challenge is how to scale up these achievements to meet the goals of universal access for all. What are the opportunities for replication? What kind of support is necessary to build on these initiatives to have greater impact?

Some of the key lessons learned from the collective experiences of CSOs:

1. An **enabling environment with adequate policy frameworks, with adequate funding and sufficient local capacities** are prerequisites for sustainable service provision. While it is the government's responsibility to ensure that the basic right of the people to safe water and sanitation is delivered, they need partners to make it happen.
2. Managing partnerships with the different stakeholders is also a skill. Each stakeholder would have their own interests. They bring into the table different perspectives. They have their own strengths and weaknesses and the trick is to **build strong linkages and capacities to work together towards a common and coherent goal.**
3. Working with the poorest of the poor require specific techniques. There are **specific knowledge, attitudes and skills necessary to work effectively with different types of poor people.** Projects that strongly consider the context, local cultures and provide adequate information to the people have higher chances of being supported by the local communities. There is also costs and timescale implications of genuinely working with the poor. Project policies and procedures must be flexible enough to allow the poor communities to explore ideas and make their own decisions.
4. **Public awareness and community participation are critical aspects of any development intervention.** If water and sanitation are strongly perceived as a need, communities may be prepared to make significant time and labour contributions.
5. Hygiene promotion and sanitation will help water achieve the full potential of health benefits. **Social marketing and participatory health education materials** have been found to be successful in raising awareness and promoting positive behavior change.
6. **Investments for institution building processes** is worth it if the local stakeholders at various decision-making levels accept their specific roles and responsibilities towards project sustainability.
7. Sustainable service delivery depends on decentralized authority. Local communities with **adequate support systems** who are empowered to make well-informed choices in technical, management and financial options will make sure that services are sustained.
8. Provision of **water supply and sanitation could be an effective entry point for other development initiatives** to enhance growth potential of a particular defined area in a rural community.

C. ANALYSIS OF THE CASE STUDIES

23. The different models of the selected CSO led initiatives showcase a set of factors that make can make a rural water supply and sanitation project successful. Four models coming from India, Bangladesh, Nepal and the Philippines shall be examined and analyzed here. Two additional cases from India were also reviewed and some information about them will be provided in the analysis and in the annex. All these models are not ADB funded and were chosen on the basis of the following criteria: innovativeness, potential for replication, promotion of institutional strengthening and partnership building, value adding, sustainability and responsiveness. (Annex A Criteria for the Selection of Civil Society-Led Good Practices on Water and Sanitation).

C. 1. 100% Coverage and Social Inclusion: The Rural Health and Environment Programme of Gram Vikas (PURA-INDIA)

24. Gram Vikas is a multi-awarded⁵ non-partisan, secular voluntary organization working in partnership with the rural poor of Orissa since 1979. The organization currently serves a population of nearly 100,000 across 450 villages in different districts of Orissa. Gram Vikas interventions are directed at raising critical consciousness and energizing whole villages/habitations and are driven by the involvement of entire community in planning, implementation and monitoring. They are currently supported by international donors such as ICCO, Christian Aid and the European Union.
25. The Rural Health and Environment (RHEP) programme is an integrated rural development intervention being implemented by Gram Vikas in the severely underdeveloped regions of Orissa. Its core thrust is to harness the physical, natural, social and human capital in every village through convergent community action to create a spiraling process of development.
26. 100% coverage, involvement of all families in the village and raising a corpus fund of Rs1000 from each family on an average are non-negotiable conditions in the Gram Vikas approach. Adult men and women are motivated to work together and transcend caste, gender and class differences to work collectively to ensure the construction of toilets and bathing rooms by all families. Work for the supply of protected piped drinking water to all families in the village is undertaken only after toilet construction for all is completed.

Box 2: Salient features of the Gram Vikas model:

Issues Addressed	Solutions adapted	Remarks
Low priority of governments to RWSS	The RHEP program targeting 100% sanitation coverage, prior to piped water supply and as an entry point to other development initiatives Use of village and donor fund to leverage additional resources from government's water program	Strong awareness building and motivation to whole community to collectively address need for 100% coverage CSO facilitating community action and social mobilization
No one is in charge; no strategy to address the poorest of the poor; lack of participation of the poor in planning, designing and implementing projects	Made it a 100% village affair to be in-charge by addressing collectively the community problem; community strategy developed not only for present needs but also for future requirements	Numerous village consultations Facilitated by CSO to determine community strategy of addressing the needs of all
Poor Operation and maintenance Low access to resources; Cashless societies;	Subsidies provided as incentives to leverage village resources Proxy user charges as the mechanism for maintenance (i.e. community income generating projects such as fish culture and horticulture)	Village funds created and utilized to enable all to be served Village fund used as collateral for bank loans for community business masonry training creates job opportunities

27. In the 106 villages covered by RHEP so far, the communities take care of effective use and maintenance of infrastructure. Water and sanitation is the core rallying element bringing communities together and a springboard for collective action in other programmes of the Gram Vikas. Maintaining all facilities

⁵ Among awards received to date are: Allan Shawn Feinstein World Hunger Award for 1995-1996 from the Brown University, USA; Most Innovative Development Project Award, 2001 from the Global Development Network; World Habitat Award, 2003 for their RHEP programme.

created by the Programme is the responsibility of the villagers. Local youth are trained to undertake minor repairs and maintenance of the pump, motor and pipelines. The corpus funds are placed in a fixed deposit. The interest of the fund is reserved for extending support to new families in the village for building toilets and bathrooms with piped water supply.

28. By 31st March, 2005, Gram Vikas, through its network of barefoot engineers, has designed and developed low cost functional water supply systems in 211 villages. Each household in these villages have their own toilets and bathing room units, and three faucets – one for the toilet, one for bathing room and another for the kitchen. In addition, they have also able to put up 64 common units in schools and community halls. The cost of water infrastructure is provided for through government support of 70% of the cost of the water system.
29. By improving village living conditions through the provision of basic services such as toilet and bathing units and piped water, Gram Vikas is confident that this will help effect a ‘reverse migration’ from cities to villages.
30. However, the story does not end in toilets, bathing rooms and piped water supply. The process of empowering the marginalized groups, especially the women, paved the way for other community interventions such as health care, children’s education, women’s savings and income generation groups. In K. Samantrapur alone, there are five savings groups with 97 members and Rs120,000 of their own funds.
31. Gram Vikas is now utilizing additional government resources for rural water supply under the Swajaldhara⁶ scheme. Government is currently providing them 1% of the cost of hardware for the efforts of GramViaks. They are now currently lobbying government to increase it to 3% to enable them to cover their costs. They are now having some difficulties balancing the requirements of government outputs with the short time frame and limited resources vis a vis their model of supporting community social mobilization processes.

32. **How did this work:**

- Strong awareness building and motivation for the community to transcend their personal, caste and gender differences and work together to achieve 100% sanitation and piped water coverage. Initially, separate meetings with men and with women were undertaken, until later on, when the women representatives started to feel comfortable meeting together with men.
- Requiring the collective decision of the village to work according to the Gram Vikas norm: 100% contribution of the community on the basis of Rs1000 per household. The poorest sectors of the community end up paying only what they can afford and the rest of the community members organising ways of covering deficits. This fund ensures perpetual 100% coverage.
- Mechanisms for continued operation and maintenance and repairs are in place. The village (mostly the women) manages a common fund from the income generated by the fish stocks of the 15 acre community pond (normally reserved for religious processions). Wasteland is developed for horticulture. If this is not enough, as in the case of a few villages, the relatively well-off village people agree to contribute about 0.25% to .50% of the total gross produce at harvest time. In other villages, the richer ones agree to contribute a monthly fee. All these agreements are formally signed and binding between the contributor and Gram Vikas.
- The total cash and non-cash cost of one toilet with bath is Rs7,500. Gram Vikas, through its own funds sourced from its pool of donors (including its partnership with government⁷), is providing an initial subsidy of Rs3000 for toilet construction. This is generally for construction materials like cement, steel, pan etc. which they consider as social costs. The labor and local materials (costed at Rs3500) is contributed by the communities.
- Gram Vikas also provides a comprehensive 60-day masonry skills training for unskilled men and women who, after the training, construct the toilets and bathing rooms. They are continuously

⁶ India’s Swajaldhara scheme is the national government’s program designed to support rural water supply service provision.

⁷ Government used to contribute Rs500 for every toilet and bath. Starting April 1,2006, government subsidy for toilet and bath will increase to Rs1500.

monitored for 2-3 years. If they don't have work (which is seldom the case), Gram Vikas guarantees paid work for the first year.

- Apart from toilets, bathrooms and piped water supply, Gram Vikas also works with the communities in an integrated approach. There is support for community mobilisation, education, community health management, small scale income generation activities and rural industries, housing support, community infrastructure such as construction of biogas plants and compost tanks, check dams and diversion weirs. They have also improved access by building approach roads for villages. They also organize self-help groups among women who can eventually access credit from the local banks up to 90% of the value of their village corpus fund. The corpus fund can also support housing loans.
- Gram Vikas works with the communities to build their capacities. They organize them, institutionalize them through formal registration and most importantly, they continuously monitor and support communities for three to five years after the water systems are set-up. This ensures continued community development even beyond the requirements of sustaining water projects.

C. 2. Local NGO Capacity Building and Social Mobilization: The NGO Forum approach

33. The NGO Forum is the outcome of a consultation meeting, jointly organized by the leading national NGOs and UN-Steering Committee for Water and Sanitation in Bangladesh in 1982. To date, it has already benefited 21 million people in Bangladesh. NGO Forum as an apex national network service delivery organization maintains a nationwide structure of 14 regional offices to facilitate support to its 665 CSO partners. It has been strongly supported by different donor agencies such as DANIDA as a strong partner of government in the implementation of the *Bangladesh National Policy for Safe Water Supply and Sanitation*.
34. NGO Forum has been working with national government as a major sector partner throughout the years. They succeeded in influencing the creation of national policies in water supply and sanitation provision. For instance, in partnership with other civil society organizations, they managed to influence the government of Bangladesh to declare 'Sanitation for All by 2010'. Under this programme, the NGO Forum for DWSS has planned to bring 500 unions under 100 percent sanitation coverage during the years of 2006-2010. The Forum started a union-based sanitation coverage programme from 2003. During the years of 2003-2004, the Forum introduced the programme in 106 unions. Out of those, 56 unions have already been covered and it is expected that 50 more unions will be covered within a few months. Over the last two decades, the Forum through its partner NGOs and community-based organizations, installed around 3,581,716 latrine sets, which constituted 15 percent of the national latrine installation throughout the country. It is expected that as a result of the intervention in 606 unions by the end of 2010, a total of 2,605,000 households will come under 100 percent sanitation coverage.
35. The NGO Integrated Watsan (Water and Sanitation) Approach earned the NGO Forum the Dubai International Award for Best Practices for its outstanding initiative "Piped water supply in Rural Areas-Bangladesh" last May 2005.⁸ It bested around 650 submissions from around the world. It was also recently honoured by the national government for achieving 100% sanitation coverage in 16 unions.

Box 3. Salient features of this particular NGO Forum model:

Issues Addressed	Solutions Adapted	Remarks
No strategies to address the poorest of Poor; rural areas difficult to reach; Very poor cashless societies, lack of participation of the poor in planning and decision making	Targeted service provision to indigenous peoples of far flung areas of CHT district Mobilization of local intermediary partners and networking with other stakeholders to help facilitate social mobilization process in the hard to reach area Target of 100% sanitation coverage in 49 unions in CHT	11 other local NGOs (whose staff are from the areas itself) were mobilized and empowered to implement health focused sustainable water and sanitation programmes Partnership building with local government institutions, religious

⁸ The UN Human Settlements Programme (UN HABITAT) and the Dubai Municipality jointly initiated this award for those who have significantly contributed to improve the living conditions of people everywhere around the globe as part of their celebration of World Habitat Day on Oct. 4, 2004.

	No cash counterpart required upfront Social mobilization to facilitate agreements in terms of cost sharing, water levies, etc	heads, teachers, ethnic leaders and tribal lords Introduction of other possible income generating projects such as management of sanitation mart; training of masons to supply latrines, etc.
Lack of knowledge and technology options; lack of skills and incentives to sustain operation of the system and provide continuous service	Integration of hardware solutions with strong capacity building intervention both for the local NGOs and the village development councils (VDCs) Well-informed choices of technology solutions made available Monthly water levies for operation, maintenance and major repairs	Training were directed both at the level of communities, the VDCs and the local NGOs. 58% of the budget was allocated for software components against almost 35% for hardware costs
Lack of local government capacity to address all the needs of the rural poor; No one is in charge	Institutionalization of VDCs as a centre for coordinating other community level interventions;	Local government is involved in social mobilization and advisory role for technology solutions, site selection and costs that can be covered by the communities

36. How does their model work?

- The Chittagong Hill Tracts Project is a two year DANIDA supported project to the tune of Tk 30,020,000 (US\$ 442,288) that started in 2003. The project successfully served around 2,800 households through 65 safe water facilities and 2800 latrines.
- They implemented an Integrated Watsan Programme Approach – this is a combination of hardware (material and technology support for water supply and sanitation) and software support (building capacities of local organizations and mobilizing people at various levels towards a common goal of (a) ensuring access to safe water supply and sanitation facilities, (b) promoting sustainable change of hygiene behavior and (c) contribution to the reduction of mortality and morbidity.
- They had worked with indigenous communities in the very difficult to reach areas with an unpredictable law and order situation by coordinating with 11 local civil society organizations supported by their partner NGO- the Hill Tract NGO Forum.
- They built the capacity of local CSO so that they can help in awareness raising and capacity building of the village development councils (VDCs). VDCs are primarily responsible for the operation, maintenance and sustainability of the water systems. While at the moment, they are functioning mainly for water and sanitation, they are also starting to be involved in other development initiatives such as the UNDP project on livelihoods and infrastructure development.
- Cost recovery policy of the government of Bangladesh was implemented by the VDCs through the water levy and other income generating activities such as the sanitary mart.
- Capacity building of local partners was given prime consideration. Apart from institutional and technical options, local partners were trained on accounts administration, maintenance and management of rural sanitary marts, masonry skills training, communicating with different stakeholders and participatory mechanisms.
- Local organizations implement the program at the field level and conduct complete door to door visit to motivate people on safe sanitation and hygiene practices. Periodical meetings held at community level, courtyards, schools, community centers etc to drive home the concept repeatedly so that they are pushed to a point to agree to the concept. Strong advocacy work is done at the community level through the use of various communication means such as holding community dramas, rural local language songs, posters, and rallying etc so that the concept is accepted by the people at grassroots level.

- There was no upfront cash counterpart required from the communities. However, those who can afford contributed land or cash while the hardcore poor contributed in terms of labor and materials. This facilitated connection to the system. However, a monthly water levy was collectively agreed upon to support operation and maintenance. Community contribution ranged from 5% to 10% of the installation costs for water and about 20% of toilet construction.

C. 3 A Gendered and Poverty Approach to Rural Water, Sanitation and Hygiene : The NEWAH Approach

37. Nepal Water for Health (NEWAH) is a national level non-governmental organization specializing in the rural drinking water, health education and sanitation sector. It was established by WaterAid in 1992 and has been working in close partnership with local CSOs to help poor communities secure basic services of water and sanitation and also strengthen the capacity of these partners to undertake further development activities.
38. As of July 2005, NEWAH has completed 697 projects serving 788,014 people and 24,604 school students in 49 districts of Nepal in partnership with 334 local partners. The following were achieved:
- 12,508 community tap stands
 - 41,484 improved domestic latrines constructed
 - 181 improved school latrines constructed
 - 7 public latrines in urban and semi-urban areas
 - Trained 14,879 members of NGOs, SFDPs, Women Credit Groups and community groups
39. NEWAH has institutionalized a Gender and Poverty Approach (GAP) in Rural Water, Sanitation and Hygiene Promotion. Their definition of absolute poverty is as follows: "The condition of the households which have been categorized in the lowest quintile using a well-being ranking tool of the participatory rural appraisal (PRA) method by the local key information as the poorest, most vulnerable and marginalized: who have no or limited land and therefore can not meet the food requirements of their family through their regular income and production: and who are forced to take loans and to do daily wage labour activities in their landlord's farm or elsewhere."
40. NEWAH has developed a number of strategies to provide various subsidies to the poorest households to meet the basic requirements. NEWAH's philosophy behind its subsidy policy is that no households in NEWAH's programme areas should be deprived of its services because of the difficulty they have to fulfill NEWAH's requirements. An equally important principle guiding the formulation of these strategies is that NEWAH's requirements for community women and men to participate and contribute in its activities should not further deteriorate the economic condition of the poorest households nor should it widen the existing gap between the rich and poor⁹.

⁹ <http://www.newah.org.np/genderpoverty.htm#GAP%20Strategy>

Box 4. Salient features of the NEWAH GAP Model

Issues Addressed	Solutions Adapted	Remarks
<p>No strategies to address the needs of the poorest of the poor</p> <p>Lack of participation in planning and decision making by the poor</p>	<ul style="list-style-type: none"> • GAP strategy of well-being ranking of households • Gender and poverty balance in terms of project paid jobs, trainings, project management committees, water and sanitation users committee • Adoption of context specific strategies 	<ul style="list-style-type: none"> • Disaggregated data collection across gender, wealth and caste • Men also trained in health and sanitation promotion • Increased participation of women in decision-making roles • Contribution of community beneficiaries are based on well-being ranking
<p>Lack of knowledge and technology options</p> <p>Inappropriate and costly technologies</p>	<ul style="list-style-type: none"> • Capacity building of local implementing partners (CSO, local governments, poor women and men) • Child and girl friendly school latrines introduced • Flexibility of rules regarding location and use of water points 	<ul style="list-style-type: none"> • Five other local NGOs were trained in the NEWAH GAP approach • Gender awareness training given to partners and communities
<p>Lack of resources</p>	<ul style="list-style-type: none"> • Graded rate system of operation and maintenance payments according to socio-economic group • Kitchen garden training to augment income 	<ul style="list-style-type: none"> • Free latrines to poorest households • 50% unskilled labor contribution from the poorest households • Use of village development fund and maintenance fund collection system

41. NEWAH piloted the GAP approach in 5 project sites and compared it to another ten areas that did not employ a GAP approach. Findings revealed that projects that employed the GAP strategies had better and more sustainable results. For instance, it was observed that that there is greater number of poor women participating in meetings and project decision-making processes, there is increase equity in household decision-making and the percentage of poor households with latrines were nearly twice as high in GAP project.
42. Due to the benefits derived in implementing GAP sensitive projects, NEWAH decided to mainstream this strategy in their institutional approach. They also managed to contribute the GAP learnings to the ADB supported Community-Based Water Supply and Sanitation Project Preparation Technical Assistance (PPTA) in Nepal in 2003.
43. **Some of the significant lessons learned on how this model worked are as follows:**
- The need to disaggregate data by gender, socio-economic groups and caste/ethnicity to identify to what extent women , the poor and the socially excluded groups are being reached. This can be used as basis to understand the situation better and guide future planning
 - Using children and out of school youth as change agents in promoting good hygiene behaviors and health education
 - Training male community health workers- traditionally seen as women's role in fostering change in men's attitudes
 - The need to provide special support to improve latrine coverage (i.e. possible further subsidies for superstructures for the most destitute households and special construction support to the physically handicapped)
 - The usefulness of context-specific strategies (tailor made materials in local languages, use of cheaper locally available materials etc)

- Long term planning and support is necessary when attempting to change entrenched socio-cultural beliefs and behaviors
- Skills capacity of the staff and project partners will continue to be an important aspect to ensure that gender, caste/ethnicity, and poverty sensitive approaches are utilized.

44. NEWAH's project cycle is **normally 4 phases spread across 3.5 years**. The project preparation phase is 6 months and covers activities such as partner appraisal, orientation and proposal development. Phase 2 is the social preparation phase where community meetings and a few community trainings are organized. It is during this phase that user groups are organized to take control and authority. Phase 3 is Project Implementation phase that includes infrastructure building, continued health and hygiene education, regular O and M meetings and fund collection. Phase Four or the post-commissioning phase entails **regular follow-up within a two year** time frame where there is regular monitoring and follow-up visit to the communities. During this period, there is regular operation and fund collection for operation and maintenance.

C. 4. Institutionalization of community managed approach in water supply: the PCWS model

45. The Philippine Center for Water and Sanitation (PCWS) has been working with local governments and communities since 1996. This particular case is a follow-up project to the UNDP funded project managed by the Department of Interior and Local Government (DILG). The DILG project then called for the installation of point source water systems at particular water points in the numerous communities in the provinces. The PCWS was working as a national partner of the DILG in institution building for decentralized water and sanitation. However, after the project officially ended, the PCWS decided to work more closely with one province, the Agusan del Sur and one municipality to strengthen its institutional capacity to support community-managed water and sanitation programmes. The strategy is a partnership approach to address the water needs of Dona Flavia in the municipality of San Luis, in Agusan del Sur, one of top 20 poorest provinces of the Philippines located in Mindanao.
46. The PCWS helped organize and institutionalize the Provincial Water and Sanitation Center that provided technical and financial support to the municipal level implementers. The PCWS also trained the Municipal implementers to provide a sustained support role for the community water and sanitation association. In this project, the infrastructure cost was shouldered by the municipal government. Additional resources were provided for capacity building by the Local Government Support Program¹⁰. The communities decided on the technology, the location of the water points, the tariff levels and rules of connections. The tariff is set at a level that provided for a full time caretaker and the costs of operation and maintenance and potential major repairs to ensure sustainability of operation.
47. The community demanded ownership of the system prior to its acceptance of the responsibility to operate and maintain it. They organized the Dona Flavia Water and Sanitation Association (DFWSA) to manage the water system. Through their own efforts, they have expanded coverage and is now serving 100% of their population.
48. The model served as a framework for future rural water and sanitation projects implemented in partnership with local governments in the Philippines. The support that the municipal local government has provided enabled the community to replicate its processes in all their other villages in the same municipality and to 33 other municipalities in Mindanao. The DILG has adopted the strategy of local government capacity building to support community managed systems and all the provincial water and sanitation master plans that was developed with JICA support mentioned the strategy of institutionalizing the water and sanitation centers similar to the Agusan del Sur model as the way forward.
49. The continued support of the provincial watsan center and the municipal government ensured continued operation of the system in Dona Flavia. This comes in the form of monitoring visits and trouble shooting when the local caretaker is unable to repair the system.

¹⁰ The Local Government Support Program (LGSP) is mainly funded through Canadian International Development Aid.

Box 5: Salient features of the PCWS model:

Issues addressed	Solutions Adapted	Remarks
<p>Highly fragmented but centralized service provision by multiple agencies without coordination</p> <p>Lack of capacity of local government to address all the needs of the rural poor; no one is in charge</p> <p>Low priority of government to rural water and sanitation</p>	<p>Advocacy and eventual institutionalization of multi-level local government support system for community managed water and sanitation programs through legislation and capacity building interventions;</p>	<p>Local legislation created water and sanitation center at the provincial government level tasked to oversee coordination and support to municipal and community level water and sanitation projects</p> <p>Annual budget allocated by local government from their own funds that they use to leverage external resources</p>
<p>Lack of skills and incentives to sustain operations and provide continuous service</p>	<p>Capacity building of community association through the government institutions who were trained as trainers continued responsibility, authority and control of system was vested in community association</p>	<p>Frequent monitoring and evaluation and trouble shooting by the PCWS trained government trainers to ensure that the system is operating optimally</p>

50. How did this model work?

- Government champions realizing the need to prioritize water and sanitation and acknowledging the need for increase capacities at the local level. In this case, the champions were not necessarily very high-level but strategic in the sense that they had the ability and the drive to push for water and sanitation among the decision makers and they knew how the processes necessary to come up with local legislations and budgets. This ensured continuity of initiatives despite change of government political leaders
- Donor support to augment local resources. In this case, a grant was organized for capacity building to help compliment the funds allocated by the local government for a water supply project
- Strong political support at the municipal and provincial levels enabled the partners to work together towards a common goal of providing access to safe water supply to the community
- The provision of funds by the local government for the hardware (mainly coming from internal revenues) and the support of LGSP for the capacity building component made possible a partnership that integrated both hardware and software concerns
- Strong capacity building intervention and backstopping support at various levels even after the project has been completed served to strengthen the support system for the community association
- Capacity building was about 25% of the cost of the hardware
- The provincial and municipal government and the LGSP continued to monitor the project. LGSP supported the municipal government in its other development interventions. It also strongly supported that replication of the Dona Flavia experience with other local governments using the Flavia experience as a demonstration area

C. 5 Insights from the Case Studies Presented:

51. The following insights are derived across the four models. It will attempt to highlight some of the significant conclusions from the four case studies.

Addressing a Serious Need in the provision of sustainable water and sanitation services for the poor

52. It must be noted that the civil society initiatives herein presented did not operate in a vacuum. Rather, all four models showed how cooperation with local stakeholders, including but not limited to local authorities was significant to achieve the goals of the programme. In most cases, the start of the partnership is a profound **need** that has to be addressed in a particular community. The magnitude of the need can be gauged by the extent the people are willing to invest the time, effort and local resources to respond to this need.
53. Understanding how important the goals relating to water and sanitation was for particular projects was a very important part of a deliberate social mobilization process. A common goal of all the projects was to improve the lives of the poor through better health, hygiene and water supply. There has to be a clear demonstration of commitment by the local project beneficiaries to the common goal. In the Gram Vikas case, the CSO will not start any intervention in the village until the villagers are all committed to achieve 100% sanitation and water coverage and are able to demonstrate their collective demand through a contribution amounting to Rs1000 each for all the households. In the NGO Forum model, the local NGO (who are composed of local staff) and the village development council took it upon themselves to do the house to house visitation to explain the program, generate interest and gauge demand. In the NEWAH case, all projects start with the request from local partners and proposal development where the particular water and sanitation needs and desires of particular communities are articulated.
54. Exhibiting a different approach from the three cases is the PCWS case wherein the entry point was the addressing the need of local government to increase their capacity to respond to the requirements of the communities. In this particular case, the government worked with the PCWS in a partnership supported by a donor programme to provide water services to their constituents.

Engaging and Building Capacities of Local Partners

55. In the four models presented, the CSOs have generally assumed the role of a major stakeholder in ensuring sustainable water and sanitation access to the rural poor. The Gram ViKas, NEWAH and the NGO Forum models have shown that they have provided the much needed leadership and have facilitated social mobilization either directly (as with the GramVikas case) or indirectly through local NGO partners (NGO Forum and NEWAH case.) Again, in the PCWS, it has shown how CSOs can substantially provide help strengthen the leadership and initiatives of local governments.
56. A local partner, in addition, to the beneficiaries themselves is common in the above projects. Local partners, being home grown and with their deep rooted-ness in their respective communities and organized structure may directly implement projects, mobilize and organize the community, and serve as an in-place organization for subsequent system operation and maintenance. Local partners can be village, municipal and provincial local governments, or area civil society organization and or a people's organization.
57. Apart for direct community interventions, the four CSOs helped build and enhance the capacity of local partners through a variety of means all geared towards knowledge building, skills training and behavior modification.

Box 6: Major Stakeholders and Strategy of Engagement

Case	Major Partners engaged	Strategy of engagement	Role of local governments
Gram Vikas	Community, Local government	Contractual agreement for 100% contribution to Village Fund	Subsidies for toilet construction and water supply
NGO Forum	Local NGO partners, VDCs,	Sub-contracting local NGOs; organizing VDCs	Technical advice, social mobilization to accept cost sharing
NEWAH	Local NGOs	Contractual agreement based on approved proposal	Support role
PCWS	Local government	Consultancy arrangement for capacity building	Support for infrastructure development; facilitated continued monitoring at community level

58. The four cases also showed that the role of government has started to veer away from that of a conventional provider to that of a development supporter and facilitator. Instead, in all the cases the government has in a way provided” a space” where the CSOs have worked more with the community with minimum intervention from the national government. In all the cases, the CSOs work with local governments supporting each other in providing services Case in point was the PCWS case which showcased how local government champions can play a role as capacity builders, enabling communities to operate and manage the systems themselves, instead of directly operating and maintaining the system.

59. Village development councils and local partners (both government and non-government) are critical actors that the four CSOs helped organize (when non-existent), or strengthen (if already existing) through a package of support. This includes financial, technical and institutional building support over a period of three to five years to ensure that adequate capacities are built and put in place where it is needed. The three CSOs (GramVikas, NGO Forum and NEWAH) had enough resources under its control to facilitate the timely integration of the different kinds of support required by its different partners for a longer period of time. This enabled them to move into other development interventions including sanitation, hygiene education and livelihood generation. This ensured behavior changes and optimal benefit from the water supply and sanitation intervention.

60. However, on the other hand, the short term consultancy arrangement for the PCWS did not allow it to fully support the process. It was a very limited engagement specifically for a water supply project. It did not allow for stronger sanitation and hygiene promotion activities to take place. The Local Government Support Program (LGSP) however, continued to monitor the project and worked with the PCWS to replicate the water service delivery processes with other local governments. It was nonetheless very encouraging that the local government champions trained were effective and conscientious enough to continue supporting and monitoring the program and the community processes.

Significant Community Participation and Empowerment

61. Strong community participation and a process driven approach of empowering the poor and the marginalized also characterizes all of the CSO initiatives. It starts with a process of awareness building, helping them critically understand their situation and use this information to act collectively to improve their situation towards a better quality of life. This is similar to the demand responsive approach where interventions are based on community planning and decision-making processes.

62. The process of building the confidence of the marginalized groups of poor people to participate in planning and decision-making, especially among women is not an easy task. In the cases of both Gram Vikas and NEWAH, they had to start by organizing separate meetings for women and men. This is something that most government implementers opt not to undertake as they do not have the time nor the skill to do it. For the CSO projects, it is not enough that water and sanitation is provided. The provision of

water and sanitation is just a means to build up the ability of the traditionally marginalized groups to participate fully in their development and growth as a community. The process of building up their confidence to participate meaningfully in the decision making process and making well-informed choices is one of the major value added of engaging civil society as partners in implementing rural water and sanitation projects.

63. CSOs who have the ability to work within specific contexts show that strong linkages with the communities as partners and not as passive beneficiaries will spell a difference. Partnership and relationships are built through a series of consultations, endless meetings and even debates that are facilitated towards a productive output.
64. The ability of the CSO led initiatives to sustain itself is strongly linked to the empowerment of the poor communities. The process of empowerment necessitates a strong capability building component. This is evidenced by the hand-holding strategies that many CSOs employ for a **period of at least three years** to support the process even after the water and sanitation infrastructure has been installed.
65. Water and sanitation projects that have evolved into other development initiatives is a strong indication of the readiness of the poor communities to engage in other self-help initiatives. This includes some livelihood and income generating opportunities and in some instances, even infrastructure development (housing projects, for instance). This is one of the positive outcomes that results from a process-driven development intervention. This can only happen if there is a focused capacity building approach that equips the community leaders to perform task that deals more with the process rather than the tangible outputs within a government deadline.

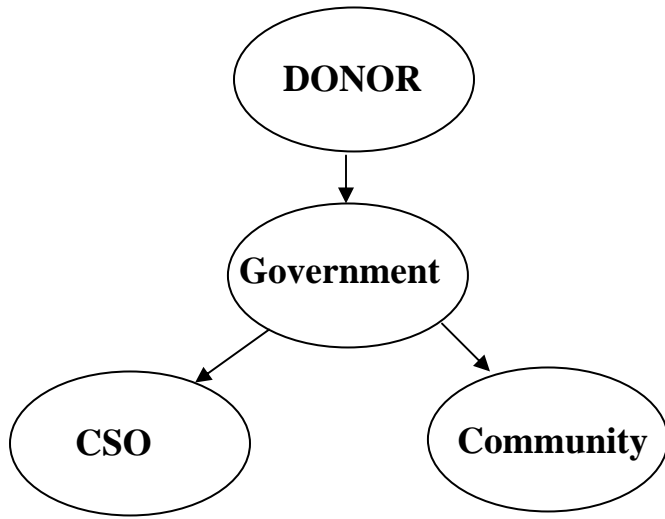
Donor relations and Transaction Costs

66. All of the CSO models were made possible through donor grants, some of which are long term (20 years and counting)¹¹, while others, short term (six months minimum). This is a tribute to favorable evaluations of the outcomes and impacts of the CSO projects. On the other hand, it would be detrimental to these organizations if a long term donor suddenly changes policies and decide not to fund the programs of these organizations. This is mainly because the way fees are structured within CSOs, it is more bias towards projects and operations and no funds are actually allocated for organizational sustainability. The notion of operating not for profit organizations do not allow enough resources for the continued “operation and maintenance” and sustainability of CSOs.
67. Gram Vikas is currently receiving 1% of the hardware costs as its fee for facilitating government funded water supply projects. They are advocating for at least 3% but getting government to agree is a challenge. Gram Vikas, NGO Forum and NEWAH’s core operations are subsidized by their donors. And their donors are helping them generate local income in an attempt to reduce donor dependence. NGO Forum has a robust water quality laboratory and a documentation and reference centre operating daily on a commercial basis. NEWAH is being trained by WaterAid on public fund raising initially targeting tourists and employed local residents. PCWS is continually engaged on a consultancy arrangement with different local governments. Costs of the consultancy are paid either from the government funds or directly by the donor.
68. From the four cases, we can already ascertain some possible workable arrangements for rural water supply with strong CSO participation:

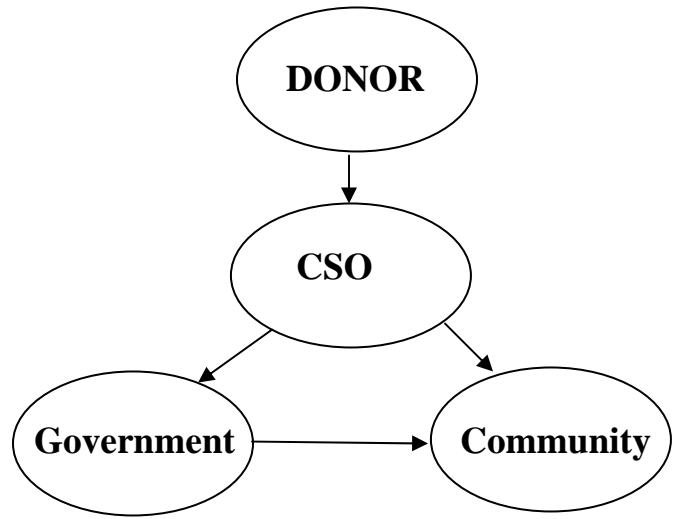
¹¹ Five year programmes renewed four times already

MODELS OF RURAL WATER SUPPLY WITH STRONG CSO PARTICIPATION

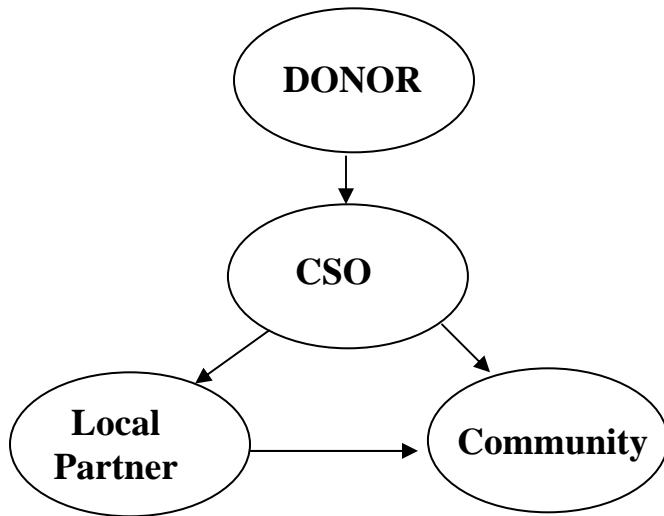
Model 1: Donor supports government; government sub-contracts CSOs to deliver particular services (conventional model)



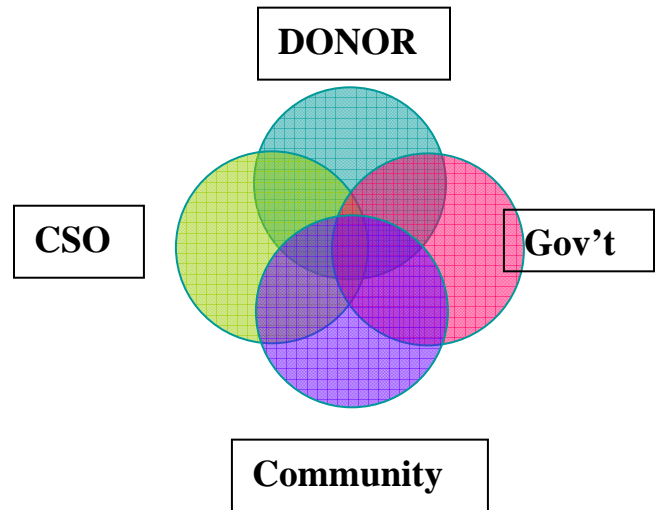
Model 2: Donor supports CSO directly; CSO works with government and community



Model 3: Donor funds CSO directly; CSO funds local partners and works both with local partners and the communities.



Model 4: Donor funds both CSO and Government to work together in particular communities.



Box 7: Analysis of the Models

Model	Strengths	Weaknesses	Remarks
Model 1: donor supports gov't; CSO is sub-contracted by gov't.	Government takes full responsibility for community managed schemes; CSO supports	Short term CSO involvement; gov't may have other priorities,	Advisable in cases where gov't has put water and sanitation high on its agenda; willing to invest (i.e.full time staff and resources in building its capacity (knowledge, attitude and skills)
Model 2: Donor supports CSO directly; CSO works with gov't and community	CSO takes full responsibility of supporting community managed schemes; LGU supports	Local gov't may relinquish its responsibility in favor of a strong CSO at the local level	Advisable in areas where CSOs have proven track record.
Model 3: Donor funds CSO directly, CSO funds local partner who will implement at the local level	CSO builds up capacity of local partner;	Skilled local partner is not always available; need for capacity building and strong network building	CSO should have a network of local partners that can implement at the local level
Model 4: Donor funds both gov't and CSO for community level projects	Donor, Gov't and CSO can be long term partners in a coalition to deliver services and gain optimum impact	Donor transacts with both government and CSOs.	Need for stronger tri-partite collaboration; willingness to go through a process of listening and building together this model in a per country basis.

69. In all the models presented, the CSOs had never acted as a government agent nor does it depend highly on government financing. CSOs have their own peculiar strategies of mobilizing additional human, technical and financial resources to support their work. However, with donor support for core subsidies decreasing, it is increasingly becoming difficult to balance the delivery of service with the business orientation of having to earn for its own upkeep. The quality of the work however has attracted recognition and more support from donors.

70. Governments are quite reluctant to replicate the CSO approaches as they do not have the time, the skills and the expertise to do so. In such cases where there is recognition on the value of CSO involvement, a partnership is built with each one growing stronger with "borrowed strength". The concept of borrowed strength is similar to the idea of complementation where one partner builds on its own strength and links with another not just to share and exchange but more to develop synergies based on clear and transparent partnership arrangements.

D. CONCLUSION AND RECOMMENDATIONS

Lessons learned and Best Practices:

The following are the significant lessons learned and best practices validated by this paper:

1. CSO partnerships will enhance the capacity of governments and the ADB to serve the rural poor.

71. CSOs work with different levels and types of stakeholders which makes them strategically positioned along the development continuum and it gives them elbow room to engage in innovative schemes. Of the examples shown above, it may be observed that while most of these initiatives are implemented with minimum government support, it is also used to demonstrate to government what could be done. All the pilots implemented above have already managed to find its way in national sector goals and strategies. CSOs recognize this space and they work in partnership with the governments to meet ambitious MDG targets.
72. ADB has been challenged to go beyond the rhetorics of its Water For All policy to improve and strengthen how it currently works with the poor. There must be a way for the Bank to work in strong partnerships with CSOs that can demonstrate its ability to work with the poor. ADB should recognize CSOs and create a specific niche for them. Harness the potentials of CSOs. Support knowledge networks that can help develop and expand CSO capacities. Strengthen the delivery of information and knowledge bases so that other CSOs can replicate worthy practices. CSOs can also help ADB and the governments strengthen their people's participation and pro-poor approaches; they can also help in monitoring and evaluating water supply and sanitation projects especially its pro-poor elements.
73. The government's role is now evolving from a service provider to a facilitator and supporter of community managed schemes. Community management schemes is still necessary for very poor, dispersed rural communities. CSOs have also participated in building capacities of local governments in a decentralized mode of service delivery. They will be able to bridge the gap and serve as a link between governments and the communities. This kind of support also changes over the years, evolving and adapting according to needs and capacities.

2. Greater investments in the rural water supply and sanitation sector can jumpstart other poverty reduction interventions

74. Evidence of the impacts of water and sanitation projects on livelihoods, people's mental and physical well-being and the economic growth and development of the communities, gender relations have all showed that water and sanitation projects are central to poverty reduction strategies at the local level.
75. Adopt an integrated approach to rural water and sanitation and link it to broader poverty alleviation and rural development goals and strategies. However, decentralize management to the lowest appropriate level possible. Disaggregating communities and transcending gender, caste and poverty inequities will help empower the marginalized groups to participate more actively not only in sustaining their water services but also in other community development activities. Strong community involvement in critically understanding their situation and identifying their change objectives should manifest itself in the planning, financing, implementation and operations of the water and sanitation service.
76. Investing in software, specifically in capacity building initiatives ensures an effective and efficient water and sanitation service provision. For CSO-led initiatives, this is an integral part of their efforts from which they draw their strength.

3. Longer term presence is necessary to ensure that a good and functional system is in place to provide for sustained operation of water and sanitation services.

77. Building up local capacity to sustain the water service and sanitation provision is a process that starts with cultivating demand and catalyzing action to respond to a local felt need. It includes developing both administrative, technical and financial skills to manage the system. However, the CSO models have also shown that building a support system – such as a the development of sources of village funds or even building local skills (such as masonry training) can effectively sustain operation and maintenance of the systems.

4. Clear national goals and transparent strategies will be a good basis to engage a multi-partite complimentary approach to reach the unserved and the underserved.

78. The ADB can utilize the financing package as an incentive to promote clear and coherent national strategies that put water and sanitation as its top priority. Make sure governments work together with other stakeholders such as CSOs to develop their time bound action plans to meet the localized millennium development related goals. Support CSOs and local governments who are politically determined to work together to have 100% coverage in specific geographic locations and help them achieve it through a combination of support (technical, institutional and financial).

Suggested Next Steps:

79. Convene a knowledge sharing roundtable discussion to disseminate and validate the above findings and recommendations and see how else could CSO participation in the delivery of water and sanitation services to the poor be strengthened, replicated and scaled up;

80. Engage the civil society representatives in discussion with ADB operations people and some government representatives to share the results of the study. Discuss possibilities in replicating and scaling up these strategies.

81. Pilot a demonstration project that is developed through a joint planning and preparation process with strong civil society participation.

PROPOSED ACTION PLAN

Activity	Time Frame	Who
Round table discussion with CSO representatives, government representatives, ADB operations and	April 2006	STREAMS with the Water Team
Project Planning and Design	May to July 2006	Consultant with CSO representatives
Project Approval	September 2006	ADB
Pilot Project Implementation	October 2006 onwards	CSO partners

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Annex A: CRITERIA FOR THE SELECTION OF 4 CIVIL SOCIETY-LED GOOD PRACTICES ON WATER AND SANITATION

1. The Concept of Civil Society Organizations (CSOs)

There has been a growing global interest in civil society over the past decades matched by a growing number of definitions of civil society. The concept of civil society is one of the 'hottest' concepts in all of the social sciences that touch on political life. Common to most popular academic concepts, there is no universally accepted definition of either civil society or the related notions of a civic culture and social capital. All observers, however, agree that civil society refers to voluntary participation by average citizens and thus, does not include behavior imposed or even coerced by the state. Civil society includes not just the individuals who participate but the institutions they participate in. Thus, civil society is strong to the degree that those institutions are large and powerful.

In the 1990s, the expression civil society gradually came to pervade the language of policy documents of various international organizations but its meaning has remained unclear. Since early 1990s, civil society, especially in and around the United Nations (UN), has been commonly associated with the NGO movement. The UNDP has defined civil society as the space between family, the market and the state; it consists of non-profit organizations and special interest groups, either formal or informal, working to improve the lives of their constituents. Similarly, the term civil society organizations (CSO) can cover a wide range of organizations, from non-governmental organizations (NGOs) and non-profit organizations (NPOs) to loose associations of people with a common cause in public interest. In practice and implicitly, business and government have been excluded from 'civil society' and placed in two different categories. As a 1997 UNDP policy document explains, the concept of "governance" rests on this tripartite division: government, business and **civil society**.

For the purpose of the study, the UNDP concept of civil society and civil society organizations is hereby adopted.

2. Defining "Good Practice" in Water and Sanitation

Defining what a "good or best practice" tends to be complex. There is no universally accepted definition of a good or best practice. Various bodies and institutions differ in the way they define what is good or best practice depending on the context of the area where these definitions are used. For instance, best practice can be defined as projects aimed at improving the quality of life of individuals suffering from poverty or social exclusions. UNFPA defines best practice as planning or operational practices that have proven successful in particular circumstances and which are used to demonstrate what works and what does not work and to accumulate and apply knowledge about how and why they work in different situations and contexts. **Advance Africa** describes best practice as a

specific action or set of action exhibiting qualitative and quantitative evidence of success together with the ability for replicability and potential for adaption and transferability. Furthermore, **UN Inter-Agency Committee on Women and Gender Equality** chose to define “good practice, rather than best practice, as one that meets at least two of the following: leads to an actual change, has impact on the policy environment, demonstrates innovative or replicable approach , or demonstrates sustainability.

It is also interesting to note that Advance Africa has made a differentiation between a promising practice and best practice. A promising practice is a specific action or set of actions exhibiting inconclusive evidence of success or evidence of partial success. It may or may not be possible to replicate a promising practice in more than one setting.

The study intends to document “good practices” of civil society-led initiatives in rural water supply and sanitation. The preference towards “good practices” rather than “best practices” is the fact that within the spectrum of ‘practices’ “best practices” will be at the extreme positive end of the spectrum. As such, there are no longer room for improvement as compared to the concept of “good practices” which can still evolve and mature into “best practices” over time and as the demands of time changes. The concept of documenting good practices also precludes the documentation of *promising practices* as defined by Advance Africa. Ideally, documentation of both promising and good practices will capture practices that are likely to succeed in pursuing rural water supply and sanitation agenda.

Thus, good practices are pro-poor projects/activities and initiatives in the area of water supply and sanitation that demonstrate success or have an impact, and can be successfully replicated.

3. **Criteria for Selecting “Good Practices” in WATSAN**

For purposes of selecting the four case studies of the STREAMS research, an activity or project to qualify as “good practice” it must **be initiated or led by civil society without ADB support**. The cases will be chosen based on the following characteristics:

Main criteria:

- a. **Innovative** – has developed a new and creative solution to problems related to the provision of rural water supply and basic sanitation services (e.g. affordable technologies, financing mechanism, application of advanced technologies to services to the poor, institutional arrangements and partnerships design to promote efficiency in delivery of WATSAN services, innovative contracting instruments, people-centered approaches) while demonstrating a positive and

tangible impact on improving the quality of life of the poorest of the poor by way of providing WATSAN services and contributes to the eradication of poverty

- b. **Potential for replicability and scaling up** – can be replicated elsewhere with minimum inputs or the extent to which project can be transferred or replicated (internally or in other countries) as well as the potential for the idea to be applied at a larger scale
- c. **Promoting institutional strengthening and partnership building** – should be based on partnership among at least two or more key actors; project outputs contributes towards strengthening of WATSAN institutions, improves multipartite coordination, promotes accountability and transparency of concerned institutions, facilitates the federation of CSOs into an apex or umbrella organizations
- d. **Value-adding** – should have elements of added value by way of contributing wholly or partially to water and or sanitation goals with a clear strategy on **social inclusiveness and equity of benefits**. Benefits are appropriately targeted at vulnerable groups, ensure benefits are appropriately shared by women and men; performing a catalytic function, promoting gender equality and employment, ensuring good environmental practice, promoting local/national/regional cooperation
- e. **Sustainability** – How project/s contributes to the attainment of MDG targets on WATSAN and have long lasting tangible/measurable impacts. Promotes pro poor policies; demonstrates their tangible impact in bringing about improvement in the provision of WATSAN services and the extent to which the project is able to sustain its activities beyond the funding provided