
SUSTAINABLE SANITATION AND HYGIENE FOR ALL

PERFORMANCE MONITORING INSTRUCTION



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1 BACKGROUND

1.1 INTRODUCTION AND PURPOSE OF THIS DOCUMENT

This document summarises the performance monitoring framework for the AusAID and DGIS funded “Sustainable Sanitation and Hygiene for ALL” programme implemented by SNV, IRC and local partners in Nepal, Bhutan, Laos, Cambodia and Vietnam. The performance monitoring framework was developed jointly by SNV and IRC, with a large number of inputs from different partners and colleagues from the countries. This was achieved through a preparatory mail discussion and a regional workshop. Performance monitoring of rural sanitation and hygiene was the first of the learning activities for the “Sustainable Sanitation and Hygiene for ALL” programme.

As a learning activity, the discussion on performance monitoring of rural sanitation and hygiene went explicitly beyond the 13 months of the programme, because all partner organisations recognised the limited value of short term project-led monitoring and are aware of the many monitoring systems that have been developed but were unsustainable at local level. In this our challenge was to:

1. Develop a framework that is grounded in the monitoring practices in each country and is relevant to on-going discussions about monitoring of rural sanitation and hygiene in the countries.
2. Develop a framework that allows for comparison and learning across districts within one country and among the countries.

With this document we want to share the framework with the partners and clients that contributed in the different discussions. Also, we hope to inspire further reflection on monitoring in rural sanitation and hygiene. This is work in process and still much needs to be learned about performance monitoring in the sector, therefore your feedback and suggestions are more than welcome.

1.2 HOW TO READ THIS DOCUMENT?

The document describes the thinking behind this performance monitoring framework, as well as the indicators and monitoring details itself. As a result it's rather long and not all parts may be of equal relevance to all. Below we give a short explanation of the contents.

In this first background section, we give the issues and inputs that we considered when developing the framework. We start with an explanation of why performance monitoring of rural sanitation and hygiene programmes is so important and what are the challenges that countries face. These gave us a direction to decide on the principles and objectives for this framework that are presented after that. Then, in section 1.5, we explain why we decided to use QIS for this monitoring system and what is QIS. We also explain shortly how we have developed the indicators and give suggestions for further reading.

In the second section, we give the outlines of this performance monitoring system. These are the definitions that we used, the frequency of monitoring and the list of indicators. Then in the third section, the details for each of the indicators are presented. Finally in the fourth section, we briefly explain how data are used and analysed.

1.3 WHY DO WE NEED TO IMPROVE PERFORMANCE MONITORING OF RURAL SANITATION AND HYGIENE PROGRAMMES?

Monitoring sanitation and hygiene behaviour is a complex topic, and often only the number of toilets is counted. While the introduction of CLTS has changed this “infrastructure focus” towards “use”, what is understood by ODF remains highly variable even within a single area. Moreover, very few reliable data is available over time that

shows whether hygiene behaviours are sustained or moving up the sanitation ladder. SNV and IRC recognise that monitoring of sanitation and hygiene programmes may be one of the weakest areas of our sector. It is a key constraint for improved WASH governance, as the lack of reliable (performance) information limits evidence based decision making especially at local level. Improved performance monitoring is also essential for learning processes at local level.

During the workshop in Laos, there was an extensive discussion on in-country monitoring practice together with the government clients from each country¹. In each country there are good practices that are a source of inspiration for the other countries. Still there are some common challenges seen:

- Most countries use their M&E system as a reporting system, that is “for the collection of data at a local level that go up to a higher level for analysis and interpretation”. The link between data collection and data use (for change) remains weak.
- Most countries do only count toilets, but there is a gradually increasing awareness that this is not enough.
- Hygiene and hand washing has not received much attention for monitoring, but there is interest from our clients to work on it.
- If toilet standards are set very high, then it is difficult to see any change or progress from open defecation till improved sanitation. The introduction of performance monitoring (so allowing for different levels of progress) is important to enhance understanding of the changes needed at local level.
- We know very little about the costs of M&E, in particular the costs of data collection, as it is often done as part of the work of health workers, village chiefs etc. Often the burden is quite high on the people who collect the data and that sometimes may result in “desk-filling of surveys”.
- Few countries have a system to check on the quality of data.
- Some countries are dealing with different indicator-sets and methodologies, related to the different projects/donors/ agencies.
- Poverty data are available in several countries, but not always very reliable and never related to RWSS sector monitoring data.
- In Vietnam there is a specific demand to SNV to help improve the M&E system at the local level.

The review and reflection on in-country monitoring systems, reminds us of the need to keep performance monitoring as simple and small as possible. It also emphasises the need for progress monitoring and participatory monitoring methods that help reflection at local level. In a way, the reflection of in-country systems makes us humble; it is a continuous struggle to keep a government-led monitoring system going with minimal quality and frequency considering the type and amount of resources.

1.4 PRINCIPLES AND OBJECTIVES OF THIS PERFORMANCE MONITORING FRAMEWORK

There are many relevant principles in different monitoring manuals. In our Dgroup discussion on performance monitoring, special emphasis was given to the issue of local ownership and the possibility to show gradual improvements in hygiene behaviour through the monitoring system:

1. Local communities should own the monitoring (together with others) and it should not cause overburdening or tensions. Participatory methods are preferred.
2. Local governments should own the monitoring, and we should seek alignment with national criteria. However, where national toilet standards are too high and do not allow for progress monitoring, “more steps on the sanitation ladder” should be included.

It was also mentioned that gender- and poor-specific results and analysed data need to get the support from the highest government officials.

¹ See report on Lao workshop, block 1, 22nd-24th of August 2010.

This all translated into monitoring that is not only extracting information from household, communities and other local stakeholders, but recognising that they and not external people like us are to own and act on the information. Hence, also sharing that the emphasis will be on assisting household, communities and other local stakeholders not only to generate the data, but to help households, communities and district stakeholders to use the information for their own learning and change processes. This has implications for the number of indicators, the types of tools that we use and how we use those tools. In general we want to have a limited number of indicators, that are sensitive to progress and easy to discuss with the involved stakeholders.

The specific objectives of this performance monitoring framework are:

- Develop a practical, participatory and quantitative system that fits into the local systems and allows to monitor and compare progress and sustainability of progress for a minimum and common set of key programme indicators;
- Learn and reflect together with clients (at local and national level) as well with communities on whether the cooperating institutions have achieved the expected outcomes and areas to strengthen (and adjust accordingly)
- Strengthen capacity at province/district level for sustained monitoring of rural sanitation and hygiene
- Gather evidence across countries about inputs, outputs and outcomes

Considering the above reflections, principles and objectives, we decided to develop a performance monitoring framework based on qualitative information system (QIS) scales. Within these scales, 5 levels of progress were distinguished for each indicator.

1.5 WHAT IS QIS AND WHY WE USED IT²

Comparison and aggregation of data is important for learning and steering of all types of programmes and projects. This is easiest done through numerical data and statistical analysis. However, in much of what we want to achieve in sanitation and hygiene (“the impacts”) as well as in the change processes needed to achieve that (“the outcomes”) qualitative aspects are essential. The complexity and qualitative nature of the impacts and outcomes that we are talking about, are very difficult to capture in surveys or questionnaires. Also, surveys tend to extract information from people (using their time), but hardly ever return the information or insights to them. Analysis and reflection on the data usually happens somewhere else and the form in which it is presented makes it difficult to access or understand by others.

However, participatory appraisal methods can also generate information. This type of information collection not only allows for local reflection, but also is potentially more reliable and able to capture complex qualitative information (provided the facilitator is good and has an understanding of power relations). The QIS method, through defining common scales for agreed indicators, allows to compare such information across communities and districts within one country and also among countries. See below an example of a QIS scale for engagement of small and medium enterprises in sanitation.

Degree of active involvement and outreach of SME's in sanitation business.

Observation	score
No SME involved in sanitation hardware and/or services at the district level	0
SME involved in sanitation hardware and/or services at the district level	25
SME involved in sanitation hardware and/or services at district level, and marketing sanitation	50

² Large parts of this text are based on: Christine Sijbesma and Leonie Postma, “Quantification of qualitative data in the water sector: the challenges”, Water International, Vol. 33, No. 2, June 2008, 1–12

SME involved in sanitation hardware and/or services, and marketing sanitation, and outreach to communities	75
SME involved in sanitation hardware and/or services, and marketing sanitation, and outreach to communities and reaching the poor	100
<i>Reasons for the score:</i>	
<i>Intended action:</i>	

The different levels on the scales are mini-scenarios describing moments in the change process. So behind each of the scales there is a theory of how change occurs. It is clear that those change processes are not linear and also very much dependent on specific country contexts. The scales and the indicators remain a simplified description of the process. However, we consider that it is possible to make a good approximation by using everybody's experience. Therefore the scales in this framework have been constructed together by a group of people with a thorough understanding of both the country contexts and the sector. Criteria that were considered are:

- Whether the levels capture the key quality issues and process aspects
- Whether the scale as a whole is sensitive to change in the context of the countries where we work. Often we had to be very humble and include "baby steps".
- Whether the scale applied to the key change agent(s)

The capacity of facilitators is essential in applying the QIS method, both for ensuring the quality of the data and to make sure that local learning & reflection actually takes place. (Avoiding that the exercise slips back into extraction of data for upwards reporting only.)

Further reading about the QIS method can be found in:

- Christine Sijbesma and Leonie Postma, "Quantification of qualitative data in the water sector: the challenges", Water International, Vol. 33, No. 2, June 2008, 1–12. Available at <http://www.irc.nl/docsearch/title/171798L>.
- Postma, The Netherlands, A.J. James, India and C. Van Wijk, The Netherlands "QIS: a new participatory management tool to assess and act on field reality, 30th WEDC International Conference, Vientiane, Lao PDR, 2004., 4 pages. Available at <http://www.irc.nl/docsearch/title/150570>
- Leonie Postma, Christine van Wijk, and Corine Otte, "Participatory quantification in the water and sanitation sector", PLA notes 47, August 2003, p13-18. Available at <http://www.irc.nl/docsearch/title/125141>
- Ingeborg Krukkert, Christine Sijbesma, "QIS Qualitative Information System: outcomes of the QIS workshop Nepalgunj, Nepal, 17-22 June 2008." This report describes the steps to develop a tailor-made, simple Qualitative Information System (QIS) that can be used in different phases of a project cycle: baseline, planning, and monitoring and at various levels. [Updated version November 2010] Available at <http://www.irc.nl/page/55567>

2 OUTLINES OF THE PERFORMANCE MONITORING SYSTEM

2.1 INTRODUCTION

The "Sustainable Sanitation and Hygiene for ALL" programme has 5 components:

1. Sanitation demand triggering and follow-up
2. Strengthening sanitation supply chain development
3. Developing behavioural change communication for hygiene and sanitation marketing
4. Improving WASH governance and multi-stakeholder sector development
5. Analysis, dissemination and learning

Relating to the objectives of each component, a total of 18 indicators have been developed. These are the shared indicators among all programme areas. In addition to that, there are other indicators specific to the country or

even districts, that have been added on by the local organisations. On those country or district specific indicators no comparisons are made.

In this part, first we give the definitions used in this framework, some background on timing and sampling and the indicators for each of the components.

2.2 DEFINITIONS

We called this **performance monitoring** because we want to see progress and discuss this progress with the involved people. Therefore we will measure the indicators 3 times during the year: at the beginning (the baseline), half-way (mid-term) and at the end (end monitoring). We know that in the long term, it is not possible to maintain this frequency. If monitoring can be done yearly or every 2 years we think that it will provide relevant change information.

For clarity we make a distinction between a **sanitary** toilet and a **hygienic** toilet. A sanitary toilet refers to the sanitary quality of the construction, while a hygienic toilet on top of sanitary is “well-operated” and “clean”. (Terms in quotation marks are defined in the monitoring system to ensure that the indicators will be measured objectively. For example, the term “clean” is subjective, as different people may have different perceptions of what is meant by “clean”. Moreover, not all ‘dirt’ in a toilet is a risk for health: mud and papers from sweets, while not esthetic, are not a fecal-oral diseases transmission risk while an open bin with used toilet paper is a risk).

The definition of “**access to a sanitary toilet**” builds upon JMP’s definition of improved sanitation: “Facilities that ensure hygienic separation of human excreta from human contact. (=direct human contact and the environment).” However, instead of linking that to a technology options, we defined criteria for measurement at provincial/district level in a QIS scale.

Overall, we use a pragmatic definition of “**household**”, that is: a group of people that live and eat together. There can be one or more families within one household. However, in each country we will follow the local definitions of households (as long as it does not deviate too much from the above). Everybody includes the country specific definition of households in their report.

The definition is **poverty and socially excluded groups** is also specific in each country. Each country is asked to include a description of these definitions and how it is measured in your report. Regarding terminology, we want to talk about “people living in poverty” or “people living in extreme poverty” as opposed to “the poor” or “the ultra-poor”. The thought behind this is that poverty being a state rather than being a descriptor of a person³.

Finally, we are talking about “**small and medium enterprises**”. Obviously scale of enterprises in Bhutan are in no way comparable to the Vietnam. What’s a small enterprise in some countries, may be a micro enterprise in another country. Countries are asked to add their definitions. In the text and reports we will refer to all kinds of micro, small or medium enterprises as SME’s or “small private sector”.

³ As a rule of thumb, people living in poverty would be the two lowest groups of your wealth ranking (with whatever method you use) and people living in extreme poverty would be the lowest group.

2.3 TIMING AND SAMPLING

Under the Sustainable Sanitation and Hygiene for ALL programme, performance monitoring will be done three times:

- Begin (baseline)
- Mid (progress)
- End

After that we hope to continue monitoring with a reduced set of indicators yearly.

For the baseline and end, we agreed to take a stratified sample of a minimum of 10% of the villages/ community, and we will do a randomly sampled survey of a minimum 10% of households. Additional information collected during triggering in each village/community will also be added to the “baseline” in a later stage. Stratified sampling of villages/ communities will be done on the basis of a wealth ranking of villages/ communities and/or ethnicity and other relevant local factors in the project areas, e.g. distance to communities with sanitation good and service providers and/or dry and wet locations.

The mid-way monitoring will be mostly done through village monitoring activities and activities with clients.

For schools, a random sample will be taken among the schools for the baseline, mid-way monitoring should be integrated in the work with the school. (not sampled).

2.4 LIST OF INDICATORS

COMPONENT 1: SANITATION DEMAND TRIGGERING AND FOLLOW-UP

Objective: to enhance access of rural people to improved sanitation and improved hygiene practices

We selected 3 shared indicators across the region under the first component, applied to households and schools separately, this results in 6 indicators:

1. Access to a sanitary toilet:
 - 1a. Progress in the number of households with access to a sanitary toilet
 - 1b. Progress in the number of schools with access to sanitary toilets
2. Use in an hygiene way:
 - 2a. Progress in the number of toilets used in a hygienic way in households.
 - 2b. Progress in the number of toilets used in a hygienic way in schools.
3. Adequate facilities for hand washing with soap (or a soap substitute):
 - 3a. Progress in the number of households with adequate facilities for hand washing with soap (or a soap substitute)
 - 3b. Progress in the number of schools with adequate facilities for hand washing with soap (or a soap substitute)

COMPONENT 2: STRENGTHENING SANITATION SUPPLY CHAIN DEVELOPMENT

Objective: strengthening of market-based supply chains for a variety of sanitation and hygiene consumer needs.

The three selected indicators are:

4. Increase in sales of sanitation hardware and/or paid services by SME's in the last 6 months
5. Progress on female involvement in sanitation related enterprises
6. Progress on SME's engaged in sanitation related business and marketing activities.

**COMPONENT 3: DEVELOPING BEHAVIOURAL CHANGE COMMUNICATION FOR HYGIENE AND SANITATION
MARKETING**

Objective: Supporting local line agencies to develop localised behavioural change communication strategies that are based on formative research and include non-health messages.

The indicator is:

7. Progress in innovation of localised hygiene behavioural change communication (BCC) strategies at province/district/commune level.

COMPONENT 4: IMPROVING WASH GOVERNANCE AND MULTI-STAKEHOLDER SECTOR DEVELOPMENT

Objective: Improving province/district/commune level WASH governance for local business development and pro-poor support systems for sanitation.

Selected indicators are:

8. Progress in multi-stakeholder sector development for sanitation
9. Progress in strengthening the enabling environment for the small private sector in sanitation
10. Progress in the development of pro-poor support mechanisms for sanitation
11. Progress in the degree of influence of women in commune/district/province level dialogue (selected key activities/meetings)
12. Progress in the degree of influence of people from socially excluded groups (ethnic groups/caste) in commune/district/province level dialogue (selected key activities/meetings)
13. Progress in the degree of influence of people from ultra-poor households in commune/district/province level dialogue (selected key activities/meetings)

COMPONENT 5: ANALYSIS, DISSEMINATION AND LEARNING

Objective: Enhance learning, documenting and sharing of best practices of the programme within existing national and regional platforms.

Selected indicators for this component are:

14. Available documentation on each of the 4 components of SSH4A across the 5 countries
15. Engagement of clients and partners in regional thematic discussions and sharing events
16. Sharing of lessons learned in national RWSS platforms or thematic groups

In addition to the above, two specific indicators were selected in relation to strengthening of capacity of partner organisations:

17. Progress in the capacity of implementing organisations (local NGO's and other local implementing organisations) to facilitate quality CLTS processes at community level
18. Progress in the capacity of local line agencies to steer and monitor performance in rural sanitation and hygiene

3 DETAILS PER INDICATOR

3.1 INTRODUCTION

We used different ways for defining and measuring the indicators, basically:

1. QIS scales
2. List of quality criteria
3. Other methods such as narratives, or counting of events, documents etc.

As described in section 1.5, QIS refers to qualitative information system. To measure purely qualitative aspects such as process characteristics in a quantified and comparable manner, the QIS uses ordinal scales. For each scale the project/programme develops a short description or 'mini-scenario', ranging from the worst (= 0) to the best (=100) situations aimed for. Through these 'scoring scales' communities and programme staff can see, score and discuss how they perform on these aspects in comparison with other communities, districts and NGOs, and over time. The scales in this framework have been constructed during the regional workshop and finalised at in-country follow-up meetings by participants with a thorough understanding of both the country contexts and the sector.

Criteria that were considered while constructing the scales are:

- Whether the levels capture the key quality issues and process aspects
- Whether the scale as a whole is sensitive to change in the context of the countries where we work. Often we had to be very humble and include "baby steps".
- Whether the scale applied to the key change agent(s)

The list of quality criteria is not a ladder, but a list of independent criteria against which performance is scored on a scale from 1-5. The score 1 means that this is non-existent, while the score 5 means that the criteria is fully present. In the lists there are 10 quality criteria, and the total score is doubled, to make it comparable with the scores for the QIS scales: both have 100 as a maximum.

Besides the QIS scales and the lists of quality criteria, there are a few indicators that are measured in a narrative and/or through counting specific outputs such as events or reports.

Below the details of measurement for each of the 18 indicators is presented.

INDICATOR 1A PROGRESS IN THE NUMBER OF HOUSEHOLDS WITH ACCESS TO A SANITARY TOILET

WHAT WILL WE MEASURE?

- Degree of sanitary quality⁴ on a QIS scoring scale
- Type of toilets (frequency)

We will mention reasons for giving the score and observations.

Degree of sanitary quality

Observation	score
No toilet/ open defecation	0
Toilet human faeces are not contained and are accessible for human contact and contact by animals (=unimproved toilet)	25
Toilet human faeces contained in such a way that it is inaccessible for human contact and	50

⁴ Following the JMP definitions this is: Facilities that ensure hygienic separation of human excreta from human contact. (=direct human contact and the environment). It is clear that open defecation is the lowest step on the ladder towards a sanitary toilet.

contact by animals other than flies	
Toilet human faeces contained in such a way that it is inaccessible for human contact and contact by animals and no flies or rodents going in and out.	75
Toilet human faeces contained in such a way that it is inaccessible for human contact and contact by animals and no flies or rodents going in and out and human faeces are contained in such a way that it cannot contaminate surface- or ground-water.	100
Reasons for the score:	
Intended action:	

Type of toilet

Types (relate to country definitions of toilet types)	Numbers or frequency
...	
..	
..	
..	

How?

- At which level: The data will be measured at household level.
- Who will measure in the community: Country dependent
- Tools: Example: through village mapping as in Bhutan:
 - Make sure that the people understand the criteria
 - Making a map of the current the situation (and scale scoring)
 - Making a village monitoring chart...? The village monitoring chart is updated (not the map)
 - Household survey by village health worker
- Example: Household self-assessment with photographs (with the scale scoring in it)
- Example: survey by village health worker or chief using the scale scoring.
- Other comments:

Idea: in the beginning with the baseline there would be facilitators that train the people on using the scale and than for mid-term and end people/ leaders could do it by themselves. This depends upon the local situation. Do we include shared toilets or should each hh have its own? This refers back to the definition of households, but put it as a note if sharing toilets is there between hhs.
- Means of verification: Village map or household observation formats

INDICATOR 1B PROGRESS IN THE NUMBER OF SCHOOLS WITH ACCESS TO A SANITARY TOILET

WHAT WILL WE MEASURE?

Degree of sanitary quality⁵ on a QIS scoring scale for boys and girls respectively.

Type of toilets (frequency)

Number of boys per toilet

Number of girls per toilet

We will mention reasons for giving the score and observations. We will make reference to the official standards of toilets per number of boys and girls respectively. In the type of toilet we will include reference to urinals.

⁵ Following the JMP definitions this is: Facilities that ensure hygienic separation of human excreta from human contact. (=direct human contact and the environment). It is clear that open defecation is the lowest step on the ladder towards a sanitary toilet.

Sanitary quality of toilets for boys and girls respectively

Observation	score
No toilet/ open defecation	0
Toilet human faeces are not contained and are accessible for human contact and contact by animals (=unimproved toilet)	25
Toilet human faeces contained in such a way that it is inaccessible for human contact and contact by animals other than flies	50
Toilet human faeces contained in such a way that it is inaccessible for human contact and contact by animals and no flies or rodents going in and out.	75
Toilet human faeces contained in such a way that it is inaccessible for human contact and contact by animals and no flies or rodents going in and out and human faeces are contained in such a way that it cannot contaminate surface- or ground-water.	100
Reasons for the score:	
Intended action:	

Type of toilet

Types (relate to country definitions of toilet types)	Numbers or frequency
...	
..	
..	
..	

Number of boys per toilet (absolute number)

Number of girls per toilet (absolute number)

How?

- At which level: The data will be measured at school level.
- Who will measure in the school: Country dependent
- Tools: Example: School self-assessment with photographs (with the scale scoring in it)
Example: survey by village health worker or school teacher using the scale scoring.
- Other comments: none
- Means of verification: School observation formats

INDICATOR 2A PROGRESS IN THE NUMBER OF TOILETS USED IN A HYGIENIC WAY IN HOUSEHOLDS.

WHAT WILL WE MEASURE?

Hygienic quality of used toilets, and mention reasons for giving the score and observations.

Observation	score
Toilet not in use as toilet	0
Toilet in use for urination and defecation	25
Toilet in use as toilet and no flies able to fly out of hole(s)	50
Toilet in use as toilet and no flies able to fly out of hole(s) and toilet free from any fecal smears in/on pan, floor, walls in place and/or anal cleansing materials/sanitary materials not left open after use	75
Toilet in use as toilet and no flies able to fly out of hole(s) and toilet free from any fecal smears in/on pan, floor, walls in place and/or anal cleansing materials/sanitary materials not left open after use and with adequate privacy	100

Reasons for the score:	
Intended action:	

How?

- Level: The data will be measured at household level.
- Who: country specific. Health worker/ women worker/ Youth club etc. Rather not by health worker alone, because then it becomes top/down. Example: in Nepal we mobilise youth clubs to visit a sample of households.
- Tools/ method: This will be measured through observation of a sampled group of households in the community.
- Means of verification: Household observation formats

INDICATOR 2B PROGRESS IN THE NUMBER OF TOILETS USED IN A HYGIENIC WAY AT SCHOOLS

WHAT WILL WE MEASURE?

Hygienic quality of used toilets, and mention reasons for giving the score and observations.

Observation	Score
Toilet not in use as toilet	0
Toilet in use as for urinating and defecation	25
Toilet in use as toilet and no flies able to fly out of hole(s)	50
Toilet in use as toilet and no flies able to fly out of hole(s) and toilet free from any fecal smears in/on pan, floor, walls in place and/or anal cleansing materials/sanitary materials not left open after use	75
Toilet in use as toilet and no flies able to fly out of hole(s) and toilet free from any fecal smears in/on pan, floor, walls in place and/or anal cleansing materials/sanitary materials not left open after use and with adequate privacy	100
Reasons for the score:	
Intended action:	

How?

- Level: The data will be measured at school level.
- Who: country specific.
- Tools/ method: This will be measured through observation of a sample of the schools (for the baseline). Afterwards it will be integrated in the hygiene work with schools.
- Means of verification: School observation formats

INDICATOR 3A PROGRESS IN THE NUMBER OF HOUSEHOLDS WITH ADEQUATE FACILITIES FOR HAND WASHING WITH SOAP (OR SUBSTITUTE)

WHAT WILL WE MEASURE?

We will measure the presence of facilities as a proxy for hand washing practices. We will mention reasons for giving the score and observations.

Observation	Score
Home has no specific place with provision for washing hands within accessible distance to toilet facility	0
Home has provision for washing hands with open bowl or container of water for washing hands but does not prevent contamination of water	25
Home has provision for washing hands with water and soap/substitute for washing hands within accessible distance to toilet facility	50
Home has washing station that prevents water contamination (such as a water container with tap, ladle or tippy tap) with water and soap/substitute for washing hands	75
Washing station with running tap water and soap	100
Reasons for the score:	
Intended action:	

HOW?

- Level: The data will be measured at household level.
- Who: idem indicator 2a
- Tools/ method: This will be measured through observation of a sampled group of households in the community. It will be combined with the observation for indicator 2a.

INDICATOR 3B PROGRESS IN THE NUMBER OF SCHOOLS WITH ADEQUATE FACILITIES FOR HAND WASHING WITH SOAP (OR SUBSTITUTE)

WHAT WILL WE MEASURE?

We will measure the presence of facilities as a proxy for hand washing practices. We will mention reasons for giving the score and observations.

Observation	Score
School has no specific place with provision for washing hands within accessible distance to toilet facility	0
School has provision for washing hands with open bowl or container of water for washing hands but does not prevent contamination of water	25
School has provision for washing hands with water and soap/substitute for washing hands within accessible distance to toilet facility	50
School has washing station that prevents water contamination (such as a water container with tap, ladle or tippy tap) with water and soap/substitute for washing hands	75
Washing station with running tap water and soap	100
Reasons for the score:	

Intended action:	
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How?

- Level: The data will be measured at school level.
- Who: Idem indicator 2b.
- Tools/ method: This will be measured through observation of a sample of the schools (for the baseline). Afterwards it will be integrated in the hygiene work with schools. It will be combined with the observation for indicator 2b.
- Means of verification: School observation formats

INDICATOR 4 INCREASE IN SALES OF SANITATION HARDWARE AND/OR PAID SERVICES BY SME'S IN THE LAST 6 MONTHS

WHAT WILL WE MEASURE?

The amount of money client SME's have made in the past 6 months in sanitation related sales of hardware and/or services.

How?

- Level: SME level
- Who: SNV advisor working with SME's
- From the value chain analysis it should be clear what kind of sanitation related sales of hardware and/or services are relevant in the area. (So that's what are the hardware products and services we are talking about).
- It should also become clear in the value chain analysis how many SME's there are overall.
- On that basis, we will make a selection of client SME's. The indicator concerns those SME's only. The information should be gathered in a conversation with the SME's For the baseline we also expect the descriptive information the two bullet points above.
- This is about sales, not profit.
- We are aware that sales are seasonal, so the mid-way measurement may not have much value for comparison.
- The consolidated information of the first 3 bullet points should be fed back to the group of client SME's for their reflection.
- Verification: Discussion report with the client SME

INDICATOR 5 PROGRESS ON FEMALE INVOLVEMENT IN SANITATION RELATED ENTERPRISES

WHAT WILL WE MEASURE?

Change in female involvement in sanitation related micro-enterprises on a QIS scale.

Observation	Score
No females engaged in sanitation related SME	0
Females engaged in unskilled sanitation related work	33
Females engaged in skilled sanitation related work providing products and services	66
Females engaged in managing (making decisions) in a sanitation related business	100
<i>Reasons for the score:</i>	
<i>Intended action:</i>	

How?

- Level: SME level
- Who: SNV advisor working with SME's
- Method: follow the female participants within client SME's. For the baseline we should have a number of SME's with female involvement. This should be collected through the value chain analysis.
- We need to define which types of sanitation services to include. (see indicator 4)
- Means of verification: Discussion report with the client SME

INDICATOR 6 PROGRESS ON SME'S ENGAGING IN SANITATION RELATED BUSINESS AND MARKETTING ACTIVITIES

WHAT WILL WE MEASURE?

Degree of active involvement and outreach of SME's in sanitation business.

Observation	Score
No SME involved in sanitation hardware and/or services at the district level	0
SME involved in sanitation hardware and/or services at the district level	25
SME involved in sanitation hardware and/or services at district level, and marketing sanitation	50
SME involved in sanitation hardware and/or services, and marketing sanitation, and outreach to communities	75
SME involved in sanitation hardware and/or services, and marketing sanitation, and outreach to communities and reaching the poor	100
<i>Reasons for the score:</i>	
<i>Intended action:</i>	

How?

- Level: SME level
- Who: SNV advisor working with SME's
- Method: During the value chain analysis, there should be a description of the sanitation related sales of hardware and/or services relevant for the area. Also, the value chain analysis should gather information about the type of marketing activities that SME's do and for whom. For mid-way monitoring, a quick and dirty survey among SME's should be complement participatory monitoring here.
- The consolidated information of should be fed back to the group of client SME's for their reflection.
- Means of verification: Discussion report with the client SME

INDICATOR 7 PROGRESS IN INNOVATION OF LOCALISED HYGIENE BEHAVIOURAL CHANGE COMMUNICATION (BCC) STRATEGIES AT PROVINCE/ DISTRICT/ COMMUNE LEVEL

WHAT WILL WE MEASURE?

Degree of adoption of innovative hygiene behavioural change communication by public sector-led BCC communication for hygiene.

1=non-existent; 5=fully present

Criteria:	1	2	3	4	5
• Existence of any BCC activities related to sanitation and/ or hygiene					
• Has focus (on specific selected behaviours and target groups)					
• Engages other actors, besides the lead line agency					
• Is based on (formative) research with target group					

• Includes other motivators besides health					
• Includes other communication channels besides health sector					
• Uses communication methods based on adult learning principles					
• Is monitored for outcomes					
• Is sustained (>6 months)					
• Is integrated into a broader WASH or planning strategy such as a local sanitation plan?					
<i>Describe strengths and weaknesses</i>					

How?

- Level: province/district or commune level (where the strategy is made& implemented)
- Who: SNV's BCC advisors
- Based on a joint review of the current strategy/ activities.
- The maximum score for this indicator is 50 points. To align this with the other indicators multiply the score by 2. After multiplication the maximum score is 100 as with the other indicators. The benchmark is 50.
- Means of verification: Discussion report with the relevant client for BCC

INDICATOR 8 PROGRESS IN MULTI-STAKEHOLDER SECTOR DEVELOPMENT FOR SANITATION

WHAT WILL WE MEASURE?

Degree to which there is joint planning and alignment in implementation among province/district/commune level actors for sanitation, and whether this is on the basis of collected information (=evidence base) about the sanitation & hygiene situation in the province/district /commune.

Observation	score
No dialogue	0
Dialogue among province/district/commune level actors for sanitation	25
Inclusive dialogue province/district/commune level actors for sanitation, stakeholders and civil society groups	50
Joint review of existing hygiene and sanitation situation and evidence (note: sharing)	75
Joint planning and alignment of activities at local level with key stakeholders / actors(e.g. joint sanitation plan) based on evidence / data about the sanitation and hygiene situation	100
<i>Reasons for giving the score:</i>	
<i>Intended action:</i>	

How?

- Level: province/district/commune level
- Who: SNV advisor for WASH governance
- Method: reflection exercise with the involved WASH stakeholders. As some of the wording in this scale is still very subjective, so it will be necessary to have a collective understanding of what constitutes: "dialogue", "inclusive", "evidence base", "alignment", before ranking.
- Means of verification: Discussion report with the multi-stakeholder sector group

INDICATOR 9 PROGRESS IN STRENGTHENING THE ENABLING ENVIRONMENT FOR THE SMALL PRIVATE SECTOR IN SANITATION

WHAT WILL WE MEASURE?

Degree to which the local government actively addresses the barriers for engagement of the small private sector in sanitation.

We will also describe the situation.

Observation	score
Government does not recognise a role for the private sector in sanitation	0
Does recognise a role, but not know how to support or what are the issues	25
Local government has knowledge about the barriers and enabling factors for private sector development in sanitation.	50
Starts dialogue about addressing the barriers for the small private sector in sanitation	75
Takes measures to address the barriers for the small private sector in sanitation	100
<i>Reasons for giving the score:</i>	
<i>Intended action:</i>	

+ Narrative about the local business climate (type of barriers and how it is limiting increased engagement of private sector)

How?

- Level: province/district/commune level
- Who: SNV advisor for WASH governance and/or SME advisor
- Method: reflection exercise with the involved WASH stakeholders based on the outcomes of the value chain analysis, plus a dialogue with the group of client SME's.
- Means of verification: Discussion report with multi-stakeholder sector group

INDICATOR 10 PROGRESS IN THE DEVELOPMENT OF PRO-POOR SUPPORT MECHANISMS FOR SANITATION

Note: indicator 10 is actually about 2 sides of the coin:

- a. Progress in the development of pro-poor support mechanisms for sanitation related to the attention given by local agencies
- b. Progress in the development of pro-poor support mechanisms for sanitation related to the capacity of right holder groups to demand and defend their rights

WHAT WILL WE MEASURE?

- Access to finance of the poorest and excluded groups in the province/district/commune.
- Attention to the consumer needs of the poorest and socially excluded groups in the province/district/commune.
- Capacity of these groups to demand and defend their rights.

The first point will be a narrative describing at least:

- How the poorest and socially excluded groups are defined and identified.
- The existing financial support mechanisms for the poorest and socially excluded groups
- The degree of use by the poorest and socially excluded groups of these support mechanisms
- How it is monitored

The second point will be a narrative describing at least:

- What are the specific consumer needs of the poor and socially excluded groups regarding toilet designs and information about toilet options.
- To what extent are these needs included in existing toilet designs offered to communities?

- To what extent is there special attention to providing information for the poorest and socially excluded groups during post-triggering?

The third point will be a narrative describing what kind of activities right holder groups have done to demand their rights and how successful they've been. This should also reflect on their capacities.

How?

- Level: province/district/commune level
- Who: SNV advisor for WASH governance
- Method: interviews, observations, notes from meetings.
- Means of verification: Discussion report with multi-stakeholder sector group and right holder groups.

INDICATOR 11 PROGRESS IN THE DEGREE OF INFLUENCE OF WOMEN IN COMMUNE/ DISTRICT/ PROVINCE LEVEL DIALOGUE

WHAT WILL WE MEASURE?

Degree of participation and influence of women in key activities/ meetings for:

- Community triggering/ post-triggering activities
- Multi-stakeholder activities at commune/ district/ province level

Observation	Score
No participation of women in the meeting	0
Females participating in the meeting, but do not speak	25
Females attend, speak, but are not listened to	50
Females attend, speak, are listened to, but do not influence decisions	75
Females attend, speak, get heard, and influence or take part in the final decisions	100
<i>Reasons for giving the score:</i>	
<i>Intended action:</i>	

How?

- For a. (community level influence) the measurement is at community level. One key meeting/ activity has to be identified at the 3 points of measurement. Measurement will only be for the group of sample communities as defined for indicator 1. Measurement should be done by the facilitator in dialogue with female participants or through a voting system with pictures.
- For b. (commune/ district/ province level influence), the measurement is at commune/ district/ province level. Again, one key meeting/ activity has to be identified at the 3 points of measurement. Measurement should be done by the SNV WASH advisor through a voting system. Dialogue could be done after the voting.
- Means of verification: QIS scale discussion notes

INDICATOR 12 PROGRESS IN THE DEGREE OF INFLUENCE OF PEOPLE FROM SOCIALLY EXCLUDED GROUPS IN COMMUNE/ DISTRICT/ PROVINCE LEVEL DIALOGUE

WHAT WILL WE MEASURE?

Degree of participation and influence of socially excluded groups (caste or ethnicity) in key activities/ meetings for:

- Community triggering/ post-triggering activities
- Multi-stakeholder activities at commune/ district/ province level

Observation	score
No participation of people from socially excluded groups in the meeting	0
People from socially excluded groups participating in the meeting, but do not speak	25

People from socially excluded groups attend, speak, but do not get heard (?)	50
People from socially excluded groups attend, speak, get heard, but are not taken into account in the final decision	75
People from socially excluded groups attend, speak, get heard, and take part in the final decisions	100
<i>Reasons for giving the score:</i>	
<i>Intended action:</i>	

How?

- First of all, describe how socially exclusion is defined and how these socially excluded groups are identified.
- For a. (community level) the measurement is at community level. One key meeting/ activity has to be identified at the 3 points of measurement. Measurement will only be for the group of sample communities as defined for indicator 1. Measurement should be done by the facilitator in dialogue with female participants or through a voting system with pictures.
- For b. (commune/ district/ province level), the measurement is at commune/ district/ province level. Again, one key meeting/ activity has to be identified at the 3 points of measurement. Measurement should be done by the SNV WASH advisor through a voting system. Dialogue could be done after the voting.
- Means of verification: QIS scale discussion notes

INDICATOR 13 PROGRESS IN THE DEGREE OF INFLUENCE OF PEOPLE FROM ULTRA-POOR HOUSEHOLDS IN COMMUNE/ DISTRICT/ PROVINCE LEVEL DIALOGUE

WHAT WILL WE MEASURE?

Degree of participation and influence of people from ultra-poor households in key activities/ meetings for:

- Community triggering/ post-triggering activities
- Multi-stakeholder activities at commune/ district/ province level

Observation	Score
No participation of people of ultra-poor households in the meeting	0
People from ultra-poor households participating in the meeting, but do not speak	25
People from ultra-poor households attend, speak, but do not get heard	50
People from ultra-poor households attend, speak, get heard, but are not taken into account in the final decision	75
People from ultra-poor households attend, speak, get heard, and take part in the final decisions	100
<i>Reasons for giving the score:</i>	
<i>Intended action:</i>	

How?

- First of all, describe how poverty and extreme poverty is defined and how the ultra poor are identified.
- For a. (community level) the measurement is at community level. One key meeting/ activity has to be identified at the 3 points of measurement. Measurement will only be for the group of sample communities as defined for indicator 1. Measurement should be done by the facilitator in dialogue with female participants or through a voting system with pictures.
- For b. (commune/ district/ province level), the measurement is at commune/ district/ province level. Again, one key meeting/ activity has to be identified at the 3 points of measurement. Measurement should be done by the SNV WASH advisor through a voting system. Dialogue could be done after the voting.

- Means of verification: QIS scale discussion notes

INDICATOR 14 AVAILABLE DOCUMENTATION ON EACH OF THE 4 COMPONENTS OF SSH4A ACROSS THE 5 COUNTRIES

WHAT WILL WE MEASURE?

Relevant documentation for each of the 4 components.⁶

HOW?

Reports and case studies

INDICATOR 15 ENGAGEMENT OF CLIENTS AND PARTNERS IN REGIONAL THEMATIC DISCUSSIONS AND SHARING EVENTS

WHAT WILL WE MEASURE?

- Participation of key clients and partners in thematic discussions (numbers)
- Participation of key clients and partners in regional thematic workshops. (numbers)
- Participation of key clients and partners in relevant national sharing events. (numbers)
- Perception of usefulness by key clients and partners

HOW?

- Every country, please make a list of your key clients and partners, and share with region. (organisations not persons)
- As defined in the work plan with IRC, during the course of the year we will have another 2 thematic discussions + workshops (value chains and WASH governance respectively). So we'll count their participation in that as well as in your national events.
- Regionally we will count the participation in thematic discussion and workshops. Please count your participation in national sharing events and indicate why it is relevant.
- The perception of usefulness by key clients and partners will be described in a narrative on the basis of workshop evaluations and the "what do you take home" reflection with workshop participants.
- Means of verification: Participation lists, workshop reports and evaluations

INDICATOR 16 SHARING OF LESSONS LEARNED IN NATIONAL RWSS PLATFORMS OR THEMATIC GROUPS

WHAT WILL WE MEASURE?

Number of relevant national sharing events. These may be dedicated events or just part of the agenda.

HOW?

Each country keeps a list of the relevant events, and makes a small note of your discussion of the programme/ part of the SSH4A programme in national groups. Register how many participants where there from which organisations (see above).

⁶ This component should contribute to an evidence-base about effective WASH approaches, so that's the relevancy part. According to the work plan we will do a comparative analysis for each of the 4 components of SSH4A. In addition to that we will do at least 2 of the experimental topics. We will have the reports of these things. So that's at least 7 reports. I suggest that we do country-level case studies, but that we do not put that as an additional indicator. (we'll fit it under the comparative analysis documents)

Means of verification: Notes and reports

INDICATOR 17 PROGRESS IN THE CAPACITY OF IMPLEMENTING ORGANISATIONS (LOCAL NGO'S AND OTHER IMPLEMENTING ORGANISATIONS) TO FACILITATE QUALITY CLTS PROCESSES AT COMMUNITY LEVEL

WHAT WILL WE MEASURE?

Performance related to quality criteria list on facilitation of CLTS processes at community level.

1=non-existent; 5=fully present

Criteria:	1	2	3	4	5
• Ensures that workshop invitations and motivation is done adequately as to ensure participation of different genders, ethnic groups and wealth groups					
• Monitors attendance and makes additional efforts to reach groups who do not attend (if needed)					
• Facilitates does not lecture					
• Demonstrates a respectful attitude towards participants and adapts to local customs					
• Is clear about agreements, roles & responsibilities of the community and outside organisations (does not create false expectations)					
• Gives specific attention and/or uses methods to enable participation of different genders, ethnic groups and wealth groups					
• Starts post-triggering activities within 3 weeks of the triggering					
• Includes informed technology choice activities and understanding of <u>sanitary quality</u> of toilets in post-triggering					
• Includes hygiene and hand washing in post-triggering					
• Gives attention to special needs in triggering and/or post-triggering (disabled, elderly, poor)					
<i>Describe strengths and weaknesses</i>					

How?

- Score together with your implementing organisations on quality criteria above. The maximum score is 50. To align this with the other indicators multiply the score by 2. After multiplication the maximum score is 100 as with the other indicators. The benchmark is 50.
- Cross-check this in the field as part of your on-going work with them.
- Means of verification: Client capacity assessment report, including rating

INDICATOR 18 PROGRESS IN THE CAPACITY OF LOCAL LINE AGENCIES TO STEER AND MONITOR PERFORMANCE IN RURAL SANITATION AND HYGIENE

WHAT WILL WE MEASURE?

We want local government agencies to take the lead in sanitation and hygiene. That also has to do with their internal organisation and leadership capacities. This should focus on steering and monitoring.

Observation	score
The official in charge knows who the key sector stakeholders in his/her area are and what they are doing in rural sanitation and hygiene.	0
The above and the official in charge regularly receives and reviews reports of key stakeholders	25

and provides feedback to them	
The above and the official in charge sets priorities and targets for investment in rural sanitation and hygiene in line with national policies and planning documents and on the basis of local information.	50
The above and the official in charge promotes and reaches consensus among sector stakeholders about their roles, responsibilities and activities in achieving set targets.	75
The above and the official in charge gives active follow-up and enforces agreements on the above.	100
<i>Reasons for giving the score:</i>	
<i>Intended action:</i>	

How?

- Sit with your client and score in a bi-lateral conversation.
- Means of verification: Client capacity assessment report

4 DATA RECORDING, ANALYSIS AND FEEDBACK

4.1 INTRODUCTION

This section very briefly mentions some recording, analysis and feedback issues related to this performance framework.

4.2 DATA RECORDING AND FEEDBACK

Collection of data is done together with stakeholders, and we expect you to feedback directly to the communities, local organisations and partners that are participating in the scoring with. The conversation should be used to reflect with them on the situation. It is important to note down the reasons for deciding on a particular score and also the intended action.

For community level data, in particular the three indicators that relate the sanitation & hygiene conditions at household level, the discussion should take place at the community not at household level. (especially for indicator 2 and 3 that are collected through household observation). Intended action will then refer to the decisions that the community takes towards improvement. The aggregate data on indicators 1-3 should also be discussed with local implementing organisations, local governments and WASH stakeholder groups.

The following excel tables (see below) may be used for data recording and processing:

1. Table 1 For the community level data. The scores for indicators 1,2,3 should be noted in numbers of households.
2. Table 2 For data at school level
3. Table 3 for district level data

4.3 DATA PROCESSING AND ANALYSIS

With exception of the indicators that use narrative or output numbers, each indicator in this framework has a maximum score of 100. This will help to identify those areas that need most attention both within a community, school and also within the district. In a discussion with the stakeholders further priorities can be defined within each of the components of the programme.

Table 1

COMMUNITY LEVEL DATA: one row per community

country	province	district/ commune	community	number of households	express in number of households per score															Score indicator 11 (female influence at community)	Score indicator 12 (influence socially excluded groups at community)	Score indicator 13 (influence ultra-poor at community)		
					Score indicator 1 (sanitary quality)					Score indicator 2 (hygienic quality)					Score indicator 3 (hand washing facility)									
					0	25	50	75	100	0	25	50	75	100	0	25	50	75	100					

Table 2

SCHOOL DATA: one row per school

country	province	district/ commune	school	total number of boys	total number of girls	boys per toilet	girls per toilet	Score indicator 1 (sanitary quality boys toilets)	Score indicator 1 (sanitary quality girls toilets)	Score indicator 2 (hygienic quality boys toilets)	Score indicator 2 (hygienic quality girls toilets)
			1								
			2								
			3								
			4								
			5								
			6								
			7								
			8								
			9								
			10								
			11								
			12								
			13								
			14								
			15								

