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MAXIMIZING THE BENEFITS FROM WATER AND ENVIRONMENTAL SANITATION

Assessing Nepal's national sanitation policy

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Many researchers and commentators on sanitation have recognised that relevant and effective policies play an important role in ensuring sanitation is addressed at sufficient scale that progress is made towards national sanitation targets in support of the Millennium Development Goals (MDGs). With this in mind, the Environmental Health Programme (EHP) of USAID developed a written 'Guidelines for the Assessment of National Sanitation Policies' in 2002, to help countries assess the effectiveness of policy in enabling an environment that encourages effective programmes and strategies. Nepal was selected as one of two countries for field-testing the EHP Guidelines as part of DFID-funded research carried out by WEDC in collaboration with Development Network, a national consulting research firm in Nepal. This paper highlights key findings based on the research process, with implications for challenges facing Nepal in effectively implementing sanitation policy

Background to the policy assessment

Nepal has had a separate national sanitation policy since 1994. More recently the Rural Water Supply and Sanitation National Policy, Strategies and Sectoral Strategic Action Plan-2004 (RWSSNPSSSAP-2004), the integrated policy for both sanitation and water supply, was developed by the His Majesty's Government of Nepal (HMGN). This was followed by development of National Guidelines for Hygiene and Sanitation Promotion–2005 within the integrated policy framework. Overall policy and guideline objectives are framed in terms of the sanitation coverage to be achieved and the institutional arrangements for implementing policy. There is scope for improvements in the policy content, but a key challenge in Nepal is how to effectively implement policy.

Recent DFID-funded research has field-tested Guidelines for the Assessment of Sanitation Policy (Elledge et al, 2002) in relation to sanitation policy in Nepal, while also seeking to contribute to the ongoing policy dialogue, development and implementation process in Nepal.

Two national and one regional level workshops with sanitation related stakehlders were organized as part of the research. The prominent stakeholders found this most appropriate at a time when national guidelines for hygiene and sanitation promotion were under develoment, within the framework of existing policies. The stakeholders have appreciated the initial findings of the research, that policy is generally good but implementation of the policy remains poor. The Nepal Government has referred to the research reports, incorporating findings into the latest sanitation guideline document. This is expected to increase the long term impact for saniation policy implementation.

Sanitation and health status of Nepal

Infant and under five mortality rates remain high throughout Nepal with an estimated 15,000 children dying each year due to diarrheal diseases caused by poor environmental sanitation and lack of access to quality water supply. The Department of Health Services Annual Report for 2001/2002 reveals that the national infection rate of intestinal worms, directly attributable to poor sanitation and hygiene, stood at over 7%, while overall morbidity levels associated with poor sanitation were rated at over 40%. The burden of such disease falls disproportionately on women and the girl child, who conventionally are the primary carers of young children.

Coverage data and policy targets

Different data sources give different assessments of national sanitation coverage, varying from 25% (NPC, 2001) to 47% (CBS, 2000) in 2000. Coverage was considered to be 6% in 1990. This variation in coverage estimates has important implications for policy objectives. If sanitation coverage has increased from 6% in 1990 to 47% in 2000, as claimed by the Department of Water Supply and Sewerage (DWSS), the national target of 100% sanitation coverage by 2017 seems achievable. However, WaterAid Nepal has recently developed its own coverage estimates, based on a best fit regression analysis of all available data. These estimates indicate an increase in coverage from 18% in 1990 to 27% in 2000, which are are consistent with available information on the level of investment and per-capita expenditure. (WaterAid, 2004)

If correct, these figures suggest that meeting the Millinium Development Goals (MDG) targets, let alone the more ambitious national target set in policy, will be very difficult to achieve. Achieving the national policy goal of 100% coverage

by 2017 will require a substantially higher rate of investment and construction than is currently happening.

Sanitation policy development

Nepal's first National Sanitation Policy was produced in 1994 under the Ministry of Housing and Physical Planning (MHPP, now named the Ministry of Physical Planning and Works, MPPW). The Policy itself is concise, containing a policy statement, directive and objectives, together with a section headed 'strategies' that are in the form of principles. It is supported by a longer set of guidelines for planning and implementation contained in the same publication. An unofficial revised version, produced in 2002, was not ratified by the HMGN.

The government approved an integrated RWSSNPSSAP-2004 which was developed through holding 18 consensus workshops attended by central and regional level stakeholders. This policy focuses strongly on rural water supply and does not consider sanitation in the same detail as the 1994 sanitation policy.

The Ministry of Physical Planning and Works (MPPW) has carried out two further initiatives following approval of the national RWSS policy.

- The first is the development of National Guidelines for Hygiene and Sanitation Promotion – 2005 with support from UNICEF. The National Steering Committee for Sanitation Action and a Saniation Task Force have taken a lead role to formulate the guideline document with consulting support of the Nepali author of this paper. While clearly linked to the 1994 policy, this is a substantially new document and places the national sanitation policy within the context of the RWSS policy. It is currently in the process of receiving official government approval.
- The second ongoing initiative is the development of a National Urban Water Supply and Sanitation Policy with support from of Japan International Cooperation Agency (JICA). This document, like the RWSS policy, focuses substantially on water supply in urban and semi-urban areas.

The Department of Local Infrastructure Development and Agriculture Roads (DoLIDAR), under the Ministry of Local Development (MLD), is reponsible for small scale water supply and sanitation programmes. It has recently been developing "Procedural Guidelines for Rural Water Supply and Sanitation Programmes", targetting its 75 District Technical Offices.

Guidelines, being prepared by two separate departments, need greater coordination to avoid duplication, ensure standardization and uniformity for implementing national policy and strategies.

Impact of decentralisation on clarity of roles

In common with many other countries, Nepal is going through a process of decentralization. The various policies relating to sanitation and water supply have been produced by MPPW. However, in line with rural and urban WATSAN policies, hygiene and saniation promotion guideline documents and also policies relating to decentralization, responsibility for implementation lies with Water User and Sanitation Committees (WUSCs). These are linked to Village Development Committees (VDCs), which in turn link upwards to the District Development Committees (DDCs), which are responsible for overall planning. The whole decentralized DDC/VDC/WUSC structure falls under MLD. So, for rural and small town programmes at least, the policy and overall lead agency function is the responsibility of one ministry (MPPW), while the day-to-day implementation of that policy is carried out by organizations falling under a second ministry (MLD). This is shown in Figure 1.

Recently, the DWSS has been adopting devolution of roles, mainly for projects relating to urban, large and technically complex schemes needing wastewater treatment. The result is a potential for misunderstanding and duplication of roles, as the DWSS, its 22 divisional offices (being proposed for approval) and 58 municiplaities adjust to their new roles and responsibilities – some of which are not clearly identified in the policy and guideline documentation. At the time when DWSS has initiated an overwhelming emphasis on scaling-up sanitation coverage, the role of implementaion has been shifted, particularly for rural sanitation, to the DoLIDAR and its District Technical Offices (DTO).

Resource gaps

Expenditure in the water and sanitation sector is currently dominated by water supply projects, in particular the Melamchi scheme to supply water to the Kathmandu valley. This scheme in itself is projected to require about 70% of the available WATSAN budget between 2000 and 2015. A WaterAid Nepal report in 2002 estimated that the funds available to support sanitation improvement and expansion fall short by about US$9 million per year, or over 25% of the level required to meet the MDG sanitation target[1].

There are also concerns regarding human resources as the sector adopts decentralized service provision. Local government bodies, with limited technical capacity, struggle to fulfill the roles assigned to them by policy. Sanitation is not prioritized in locally generated plans and programmes, partly because household sanitation is not a shared 'public' responsibility. The District Technical Offices (DTO) which have recently been set up under DDC in all the 75 districts, lack institutional experience on sanitation and water supply prgramme. The DWSS's regional and divisional structure is remotely located for many districts, while a lack of coordination between ministries (notably health and education) means that organizations with locally based human resources are not involved in promoting and supporting sanitation programmes. The result is that responsibility for promoting sanitation and supporting sanitation improvement efforts rests largely with NGOs.

[1] A more recent assessment by WaterAid Nepal in 2004, identifies the resource gap to be $6 million per year.

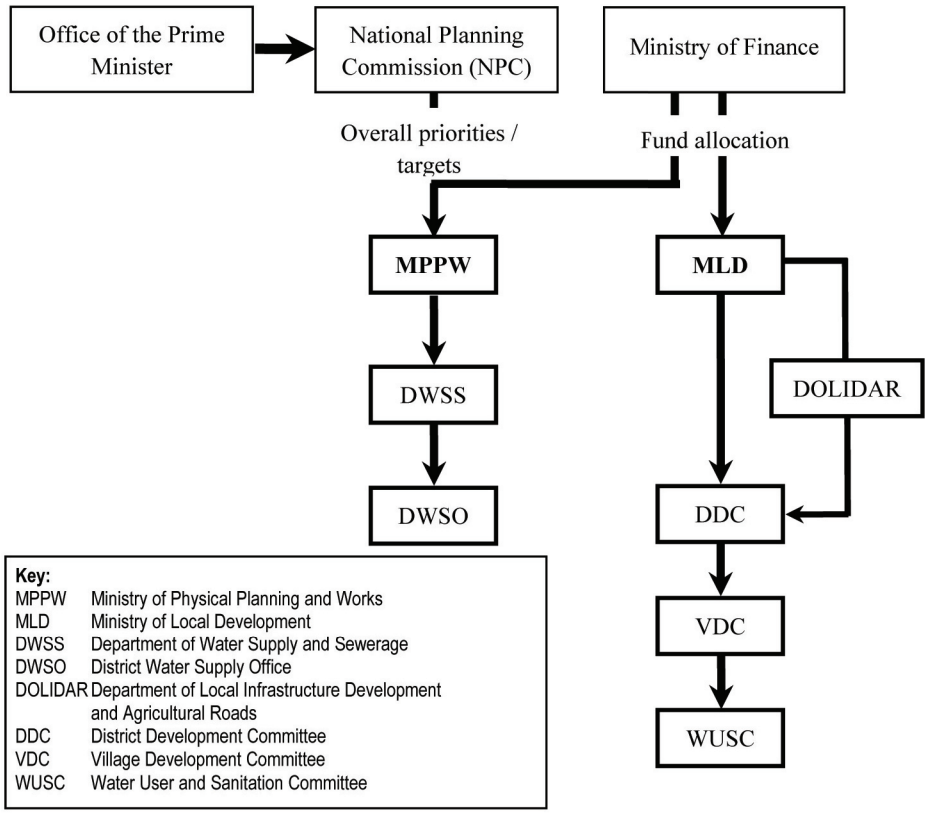


Figure 1. Parallel arrangement between the lead agency and implementing bodies

Coordination issues

Several key requirements of the 1994 National Sanitation Policy that were implemented have continued to influence developments in the sector. At the national level, the creation of a sanitation cell within DWSS provides a focal point for the coordination and development of sanitation-related efforts. Coordination arrangements stipulated in national sanitation policy have been put in place, including a National Steering Committee for Sanitation Action (NSCSA) and a Sector Stakeholder Group, covering both water supply and sanitation.

The NSCSA that is represented by most of the central level ministries and departments including donor and I/NGO community members, is active in overall policy matters, including organizing the National Sanitation Week and coordination among stakeholders. District-level water and sanitation committees have been formed in all 75 districts, although most meet infrequently. This is further exacerbated by the ongoing political and social instability throughout the country.

Engaging other actors

A key challenge is to engage departments and ministries other than DWSS and its parent ministry in policy implementation. While most other government stakeholders recognize the existence of sanitation policy, they make limited use of it when planning their activities. There is a particular need to ensure that the National Planning Commission (NPC) and Ministry of Finance (MoF) actively support sanitation policy and ensure that it is reflected in poverty reduction papers and strategies.

Practice drives policy

While all NGOs within Nepal work within the basic decentralized arrangements, required by policy in general and national sanitation policies in particular, many recognize that their activities are situation-driven rather than policy-driven. Aspects of policy, such as the role of women in sanitation promotion, the use of appropriate technology and media channels to promote sanitation messages are reflected in their activities. However, it appears that NGOs have emphasized these aspects because they are widely recognized as important, rather than because they are required to do so by policy.

Conclusions and recommendations

With a new National Guideline for Hygiene and Sanitation in place, the sector should focus on improving the *implementation* of policy. This will require ongoing review of guidelines and action plans based on experience, although the eventual

revision of the policy itself should also be considered. Policy and guideline development and formulation should therefore aim to address the following issues:

be realistic and relevant

There is a great need to ensure that policies and guidelines are realistic. Political commitment cannot simply be to formulate the policy in itself, but also to an effective *process* that is based firmly in current realities, together with what is and is not likely to be achieveable. Revised policy and supporting guidelines should be the end product of a process of shared learning and analysis – only in this way can it be realistic, relevant and accepted by the majority of stakeholders.

be information-based

There is currently considerable uncertainty about existing sanitation coverage figures. Measuring progress towards policy objectives requires efforts to develop an improved information-base on sanitation coverage and use.

develop local targets

Efforts to implement policy should include a focus on improving sanitation coverage at district level. This will ensure that national targets are broken down into more realistic and therefore achievable local targets. It will also facilitate comparison between different districts and allow assessment of the factors that make some districts more successful than others. This in turn will help to ensure that future revisions to policy are grounded in experience.

create informed demand

Given the shortfall of funding, there is a strong case for an increased focus on promoting user awareness and creating informed demand for improved sanitation and hence increasing user willingness to contribute to the capital costs of improved facilities. Female Community Health Volunteers (FCHVs) who are based at ward level could play an increased role in sanitation promotion. This will require closer liaison with the Ministry of Health (MOH) and once the idea has been accepted in principle, technical and financial assistance to ensure that community-level health staff receive appropriate training and support.

enable a role for the private sector

Opportunities for the private sector to work in partnership with government and the NGO community, supporting capacity gaps, should be further explored and optimised.

improve coordination

Efforts should be made to build on existing coordination arrangements, with the aim of widening government involvement in sanitation-related decision-making. Greater engagement with and of the National Planning Commission and Ministry of Finance is required to ensure that sanitation issues are adequately addressed in national poverty reduction programmes.

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Note:

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Broader findings of the research are disseminated through a range of channels and formats:

- Detailed assessment reports for Nepal and Ghana, targeted to key stakeholders in each country.
- Briefing notes summarizing findings from each country and a longer note on overall findings of the research.
- Conference papers presented at the 31st WEDC Conference.

A project website provides access to the main research outputs:http://wedc.lboro.ac.uk/projects/new_projects3.php?id=142