Swiss Water & Sanitation Consortium

WORKSHOP REPORT

SWSC Interregional Workshop
Addis Ababa, 5 – 9 September 2022

Contents

List of abbreviations:

CMU	Consortium Management Unit
COP	Community of Practice
EB	Evidence Building
GAF	Global Advocacy Fund
GIF	Global Innovation Fund
GPW	Global Program Water
HCF	Health Care Facilities
HWISE	Household Water Insecurity Experience
IN-WISE	Institutional Water Insecurity Experience
IWRM	Integrated Water Resource Management
JMP	Joint Monitoring Program
LMIC	Low- and Middle-Income country
MHH	Menstrual Health and Hygiene
O&M	Operation and Maintenance
PPE	Personal Protection Equipment
SDC	Swiss Agency for Development and Cooperation
SOP	Standard Operation Procedure
SWSC	Swiss Water and Sanitation Consortium
Tdh	Terre des hommes
UNC	University of North Carolina
WASH	Water, Sanitation and Hygiene

I. **Overview and Summary of Daily Highlights**

Every morning a region presented the key points from the previous day in the plenum in the form of a drawing. These are presented below and the main drawing elements are explained in the caption:
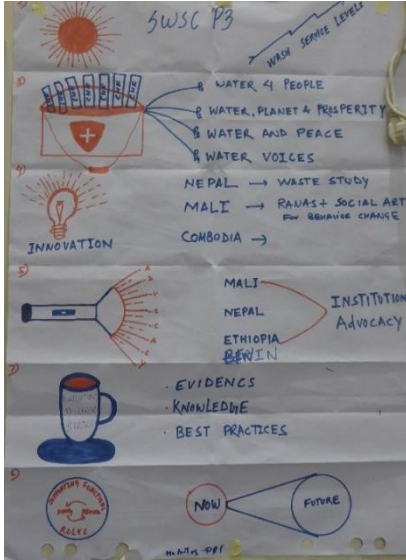

Figure 2: ***Tuesday*** *– car= consortium with phase IV ahead, eye = learning presentations from the projects, antenna = importance of communications*

Figure 3: **Monday** – light bulb = the session on projects with GIF, torch = advocacy session, cup = world café on evidence building, money envelope with Swiss flag = presentation from SDC
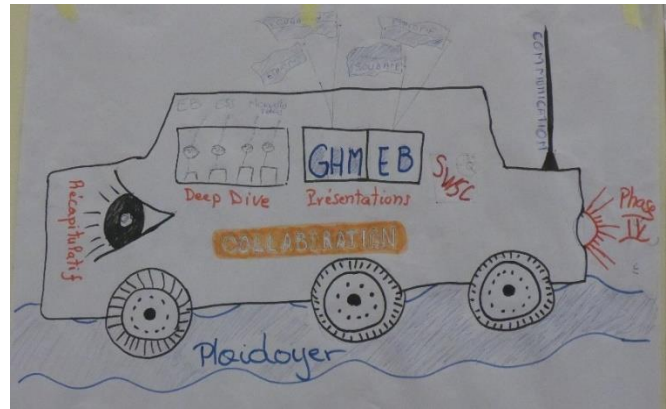

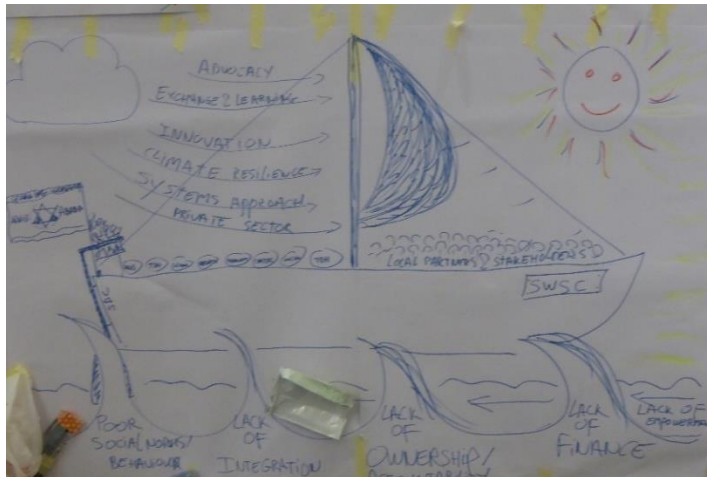*Figure 1:* ***Wednesday*** *– waves/ dirty water = problems and challenges which slow the ship down, sailing ship = consortium with the 8 members steered by the change agents (students, health care workers, patients), wind = new ideas which help the ship to pick up speed, light on the right side = aim/ goal of 100% WASH coverage in schools and HCF. All representing the theory of change exercise which was started on Wednesday*

*Figure 4: **Thursday** – aircraft = consortium with all the members which is about to take off from phase 3 to phase 4 not exactly knowing what to expect from it, ownership and advocacy were the main points discussed as something we want to improve in phase 4*

II. Phase III Mid-Term Review

Some of the key take away points from the Phase III internal Mid-Term Review (carried out between March and June 2022) were shared, including progress against outcomes and outputs, financial progress, key challenges and opportunities from global perspective, as well as some feedback from the assessment of the consortium added value.

Despite the delay in start of several projects in 2020 and the impact of the pandemic, the progress against outcome 1 (access to WASH services and behaviours) and related outputs seems well on track to reach phase III targets. Sanitation and hygiene in communities and institutions were assessed as slightly behind. A "positive impact" due to Covid-19 would be expected on the presence of handwashing facilities, but this does not come out clearly. Large variation among projects in terms of internalization of approaches.

With regards to outcome 2 (innovation, evidence, policy & advocacy), the outputs on innovation and knowledge management are assessed as on track, whereas advocacy is more challenging, already at the level of measuring progress. Most SWSC-funded projects have supported advocacy efforts throughout Phase 3, as shown by the Advocacy Advisor's non-GAF advocacy mapping exercise. These advocacy efforts in Phase 3 (and prior Phases) have been relatively informal and have been undertaken for the most part without dedicated budget lines or staff. To ensure that the benefits of SWSC projects long outlive the technical phase, and to make scale more likely, advocacy needs to be more formally integrated into technical WASH projects going forward. (The programme of the workshop will focus heavily on advocacy.)

Financial progress at consortium level, although slightly behind due to slow project start, is now forecasted to be fully on track towards end of phase.

Some of the key challenges are related COVID19 and security and other restrictions (e.g. Myanmar, Burkina, Mali), inflation and rising cost of infrastructure/services. Major opportunities are seen in projects making progress and traction in sector and accelerated learning improving programming.

Among key factors identified as added value of working in consortium, effective knowledge sharing was assessed as most significant, while enhanced collaboration, especially at country level, was still seeing as constrained (due to organizational limitations). Improved project practice was most noticeable direct

result of this, followed by ability to scale up good practices and stronger voice for advocacy. The learning from Phase III to date will be feeding directly into the development of Phase IV programme development.

III.   **SDC Global Programme Water Update**

Pierre Kistler from SDC/GPW gave an overview of the GPW. It started with the context of Switzerland's International Cooperation Strategy 2021-24, and how strategic axes of Peace and Governance, Economic development, Human development and Environmental Protection underpin poverty reduction and sustainable development objectives. There are four strategic components:

Strategic component 1: **Water, Sanitation, Hygiene for People**; Universal access to WASH; Human rights; sustainable management (IWRM)

Strategic component 2: **Water, Planet and Prosperity**; Preserving water quality and quantity; Innovative water-related economic models; Water effectiveness

Strategic component 3: **Water and Peace**; Water as an instrument for peace, cooperation and prosperity (water diplomacy, Blue Peace); Sustainable financial mechanisms; Water-related infrastructure in armed conflicts

Strategic component 4: **Water voices**; Global water crisis on the multilateral agenda; Voices for water of agents of change (youth, women); Water on the agenda beyond the water crowd

The GPW mandate and modalities include influencing policies, systems change, innovative projects, underpinned by knowledge management. Some new elements in the GPW: Water effectiveness; water-related Circular economy; Water pollution; Water & Peace – demand orientation

IV.   **Evidence Building Workstreams: Evaluations, Experience Scales, Storytelling**
Standard Final Project Evaluations / In-depth Evaluation Mandates

A guidance document is prepared (EN/FR) for the mandatory (contractual) **standard final project evaluations** to ensure better comparability and to allow for synthesis at end of Phase III. CMU has reserved some additional funds as part of EB workplan for those projects that are short of budget to reach adequate sample size, that teams can request for in case needed.

Six projects that have demonstrated significant uptake and progress on one of the Signature Approaches were selected for a CMU-commissioned **in-depth evaluation mandate** (that replaces the project evaluation for that signature approach). CMU is currently drafting the terms of reference and will launch international tender(s). Selected Blue Schools projects are Fastenaktion Madagascar, Caritas Cambodia and HEKS Ethiopia; and for HCF (WASH FIT): Tdh Nepal, Helvetas Benin and Tdh Mali. Terms of Reference and guidance will be shared shortly with teams. NB: HEKS Ethiopia will still need to do a standard final project evaluation for its work on HCF; similarly, Helvetas Benin and Tdh Nepal for Blue Schools.

WASH in institutions: developing tools to build evidence on people's experiences & costing

i) IN-WISE (Institution WASH InSecurity Experience Scales) with Northwestern University (USA)

A 12-question survey developed by Northwestern measures household water insecurity experience (H-WISE) and is gaining global recognition—even as a potential new indicator for SDG 6. Monitoring WASH in HCF traditionally focuses on availability of infrastructure as measured by the JMP indicators. H-WISE introduces measures of human experiences, including emotions, about water services to "balance the equation". SWSC's idea was to create scales for schools and HCF that cover WASH services beyond water. A four-phase research initiative began led by Northwestern. Teams will be requested to help test survey questions in first half of 2023.

ii) Costing WASH in HCF with Terre des hommes Nepal and University of North Carolina (USA)

Understanding costs is important for improving and sustaining access to WASH in HCFs. The opportunity to collect standardized healthcare costing data is important not only to collect data but also to raise awareness on the importance to have such data available for efficient planning at local and national levels. Capital investment cost data often exists, but the cost of improving WASH services (i.e. of "climbing" the JMP ladder from No Service to Limited or Basic service levels) is poorly understood in LMIC.

Starting in 2021, as part of its advocacy efforts with local governments on how to invest in upgrading and sustaining WASH services and with support from Darcy Anderson, Tdh Nepal collected and developed relevant data into a costed plan for upgrading WASH services. This life-cycle costing effort was inspired by the IRC WASH costing and budgeting tools and the University of North Carolina (UNC) toolkit for costing WASH in HCF. Tdh Nepal used these resources to create, adapt, and apply a costing tool—incorporating several novel measures for assessing cost-effectiveness in terms of WASH functionality—and summarized the challenges and learning in a report to be polished for publication by UNC as a support to SWSC and the global community of practice. A similar effort for WASH in Schools is being explored with UNC.

Storytelling

Data and evidence need to be used for their intended purposes. They need to be fed back into projects for continuous improvement and shared with broader audiences. One way to accomplish that is through the upcoming Storytelling Initiative, for which the SWSC has a small budget. Rahel and John O. facilitated three brief discussions at the Workshop, asking participants to think about their projects in this context. What projects highlight one of the signature approaches? What stories might help other SWSC members best learn from each other? What stories might be most useful to audience far beyond the SWSC?

V.   Summary of Project Learning Journeys

Throughout the week each project shared a presentation highlighting their learning in phase 3. The main learning points are summarized in the tables below for the two signature approaches as well as general learnings:

Topic	What we learned in Schools	How we take the learning forward
MHH – menstrual	Including the boys in MHH activities has the power to change their behavior towards the girls (free discussion, no more teasing, supportive) and together the community's perception on menstruation changed completely (e.g. HEKS Ethiopia: change of local name for menstruation)	Involving boys with MHH activities to the extent that is culturally appropriate including education, group discussions and pad making.

	Involving male teachers and administration in MHH thematic trainings helps to demystify the topic of menstruation / break the taboo	Involving male teachers and school administration / leaders in MHH thematic sessions
School events	School events/ celebrations are inspiring for the school children and an instrument to promote learning and good practices on Blue Schools topics in a fun way	Work with school administration to schedule and conduct at least one event per school year (Quiz, sport for hygiene, role plays, poems, songs)
Drinking water	Access to drinking water at school (whether on-site or connection to a local distribution system) reduced absenteeism in Sudan	Plan and design for seasonal variations when working with stakeholders on water sources
School gardening	The scope of a school garden is not to mass-produce vegetables but it is supposed to demonstrate good agricultural practices e.g. irrigation technics which require small amounts of water	Consider water availability, climate, equipment costs and the school population when planning with stakeholders. Prioritise water for WASH services and keep in mind that small scale gardening serves for experiential learning
Working through System Actors	Buy-in of the teachers is critical for successful roll out of practical learning sessions. Starting "upstream" by introducing and involving regional or district education authorities in analysing potential entry point(s) for Blue Schools Activities helped in Benin.	Take time to build the relationship, to foster enthusiasm; invite the teachers' perspectives on the value addition of Blue Schools practical learning activities. Agree / co-design classroom and/or extracurricular activities with the local education authorities
	Sometimes the Blue Schools concept resonates so strongly with actors that they self-organise independently of the project team to discuss and guide on integration of new/updated environmental education elements. This included involving students spontaneously facilitating learning for other students in Burkina Faso and Ethiopia	Monitor cases of "self-starting" and the presence of local champions (teachers, students, farmers, gov. forestry experts) through whom Blue Schools sparks a conversation that leads to action. This is important for storytelling and advocacy at national and international levels.
	SWSC WASH teams that lack experience working within the education system can actually be a strength because it helps to automatically place the government education authorities in a more active leadership position.	When approaching actors, cultivate a "We have questions for you…" approach rather than a "We are certain it should be done like this.." attitude.
	Existing Decrees can support integration of Blue Schools; such as mandating "One child One Tree" or Student Health Clubs. In some cases, "Green Schools" promotion is already underway at the national level (Nepal, India)	Analyse the educational decrees to ascertain meaningful opportunities where the project can accompany stakeholders in bringing such mandates to fruition

	While the existence of guides, templates, publications on Blue Schools is a springboard to work with education authorities, giving them space to take ownership and concepts is essential.	After sharing the Blue Schools concepts and tools, allow school stakeholders to propose activities, methods and lead integration.
Blue Schools		

Topic	What we learned in Health Care Facilities (HCF)	How we take the learning forward
System Rules WASH FIT Improvement planning	Sometimes there is no need to set up a committee, club, etc. as similar structures already exist e.g. Kayakalp committees in HCF in India that implement a method similar to WASH FIT	Conduct a situation analysis and work through the existing policies, local structures and methodologies, enhancing with of WASH FIT as needed.
	In Benin, during the first cycle of WASH FIT, all the improvement activities were the responsibility of the SWSC "project". Revisiting the action plans was necessary for each WASH FIT team to identify improvements they could make with little or no external support. HCF directors reported that this led to concrete actions, expressing motivation and pride.	It is important to work with WASH FIT teams during the Planning step to focus on incremental improvements / first steps: what they as a team can achieve.
WASH FIT Cycle and Investments	The experience in Mali and Nepal showed that the ideal order is to start the participatory WASH FIT process and then use the Plans to support infrastructure and equipment. In Benin, the team decided to first work on water and use the momentum of the water works to rouse local interest in WASH FIT. The WASH FIT teams then assessed and planned for Sanitation, Hygiene, Waste, Cleaning).	Water is fundamental for all services and community interest in a new water system can be an effective entry point to introduce WASH FIT. While starting with WASH FIT is a global best practice, the approach can be adapted as appropriate for the local context.
Advocacy by WASH FIT committees	Teams in Mali, Nepal and Benin observed WASH FIT team members and community leaders using WASH FIT Improvement Plans for public accountability and advocacy with locally elected governments. This led to commitments, budgeting and spending of resources on WASH in HCF. In some cases, health authorities proposed to transfer specific activities from the WASH FIT Improvement Plan into Annual HCF planning and budgeting exercises	Building the capacity of the WASH FIT committees (including cleaners) on communication and advocacy enables them to approach duty bearers and to mobilize resources. Document the investments made by community, municipality, and health system in taking action on the WASH FIT plans, use it as evidence for national advocacy
System Actors	Regional and national stakeholder gatherings to select WASH FIT indicators enhances scope for ownership so that WASH FIT is not seen as a UN or NGO tool.	Contextualisation of WASH FIT is a process that needs to be planned and budgeted, including sub-national and national meetings.
Infection Prevention & Control	Structured skill-based trainings for staff and cleaners on cleaning procedures equip them to maintain environmental hygiene and reduce risks of health care acquired infections.	Structured skill-based training and follow ups on cleaning procedures to strengthen IPC in HCFs. Teach Clean is one option used in Myanmar and India.
O&M	Timely O&M of WASH facilities is key to sustain their cleanliness. Regular assessments by the WASH FIT committee help to spot gaps in O&M quickly	Encourage WASH FIT committees to conduct regular six-monthly (or yearly) assessments of the WASH facilities

Topic	What we learned in general	How we take the learning forward
SWSC members &	We need to be role models for what we teach and display good practices in our offices as well as at home e.g. washing hands at critical times, keeping the environment clean	Sensitize everyone involved in the project (not only program staff but also support staff like drivers as well) on environmental conservation, infection prevention and control, etc.
Exposure visits	Exposure visits between institutions improved the implementation	Organise exposure visits in-country and inter-country for experiencing and seeing WASH FIT / Blue Schools in practice for scaling up and advocacy
	Exposure visits by government officials (local, province and national level) demonstrating good practice influences the officials	

VI.   Introduction to Systems Thinking Approach

Adopting a systems strengthening approach has been discussed at key moments during Phase III and some projects have positioned planning tools that facilitate inclusive decision making and secure local government policy and budget commitments for WASH in institutions and communities. It was also an outcome of the April 2022 Phase IV development workshop where steering board members, focal points and the CMU team identified systems strengthening as a strategic intervention for guaranteeing sustainability and scaling up; namely to better embed interventions in local structures, develop capacity and ensure a strong focus on local ownership.

This session gave a conceptual background on systems thinking, working on the WASH system, system strengthening and system actors with examples from Helvetas Haiti and Helvetas Mali.

"Systems Thinking": to focus on understanding the complex, interconnected relationships which make up the system, and the incentives, ideas, norms, and power which sustain it.

Working on the WASH System means address the "behaviours, policies, processes, resources, interactions and institutions necessary for delivery of inclusive, lasting, universal access to WASH". (WaterAid).

System strengthening involves taking actions and supporting interventions that are considered likely to strengthen one or more elements of a <u>whole system</u>. This includes: strengthening the capacity of actors to fulfill new or existing functions and their relationships with other actors; and strengthening factors or building blocks that are essential to the functioning of the system (policy & legislation, institutional capacity & coordination, infrastructure development & maintenance, monitoring, planning & budgeting, finance, regulation & accountability, water resource management, and learning and adaptation), **WASH Agenda for Change,**

IRC WASH defines **system actors** as "stakeholders that directly or indirectly influence the WASH system, including specific individuals or organisations." They are typically national and local, public, private, academic sector actors, including water operators, health extension workers, water committees, NGOs, government agencies, and may also include media and traditional / religious leaders. International entities with less direct links to a local system, such as UN agencies, SWSC members and SDC, are "outside" of the system and have a role of temporary facilitation.

WASH Systems Strengthening and SWSC

The existing legal and institutional frameworks in many countries establish the structure and responsibilities for the provision of WASH services; however, many such policies are yet to be fully implemented. A common example is the existence of national decrees by governments for the decentralization of the of WASH services to municipalities, whereas these municipalities have not been enabled and authorized as duty bearers to assume their roles as contracting authorities. While the work of drilling wells and installing toilets is important, the role of overseas development assistance (donors) and INGOs is increasingly shifting away from substituting local actors (i.e. INGOs leading construction work) toward enabling the concerned ministries and local governmental authorities in their mandates for coordination, planning, financing, technical supervision and coaching on infrastructure installation, operation and maintenance so that the overall direction, contracting and delegation of WASH service-related works is assured by local actors. In this sense, SWSC members taking a system approach play a role of facilitation through temporary actions to bring about system-level changes with a focus on benefitting WASH service users.

Systems strengthening was the fundament behind "deep dive" exercises and Phase IV theory of change reflections during the interregional workshop in Addis Ababa. Participants representing all eight SWSC members agreed on the importance of pursuing "systems strengthening" for health, water and education systems in Phase IV programming. The need for more focused programming on systems strengthening, affirmed by workshop participants calls for the overarching strategy for Phase IV to explore integrating a Systems Strengthening Approach. The aim will be to support system actors to improve the quality and sustainability of WASH services and ensure that all populations are served.

VII. Deep Dive: Ideating on health & education systems strengthening

The Deep Dive is a method that enables conversations and group ideation. The focus of the session was to highlight ways the signature approaches can influence and support national and local WASH actors to assume new roles that ensure long-term sustainability of WASH service provision. For the deep dive session seven groups were formed (3 French speaking and 4 English speaking groups of 4 to 6 people). Each group first ideated on their topic and the related question (see below) and then agreed which approach to elaborate. After the elaboration, two team members remained to present and take notes. The other team members rotated twice to other groups where they listened to presentations on other topics and gave feedback. Then the original groups reformed and elaborated further considering the feedback from the other groups. At the end the final versions of the seven approaches were presented to the plenum for a final round of feedback. Discussions were focused on the Signature Approaches with curated questions for each and an open "Blue Sky" to encourage out of the box ideation:

- **Blue Schools**: What **more** can we do with local governments/ national level education authorities that would enable them to take the lead on integrating SWSC approaches and processes within the education system?
- **Health Care Facilities:** What **more** can we do with local governance/ national level health authorities that would enable them to take the lead on integrating SWSC approaches and processes within the health system?
- **Blue sky:** Open for any other ideas or solutions to implement in Phase IV

A short summary of the elaborated approaches is listed below while a more extensive summary of the Deep Dive can be found in **Error! Reference source not found.**:

- **Blue Schools:**
    - o Group 1 (EN) Sergio (presenter), Debi, Shilmat, Duressa, Aderu: Developing an advocacy plan targeting education and WASH authorities with concrete steps; timing = before the start of the academic year.
    - o Group 2 (FR) with Dah (presenter), Espérance, Jerry, Ibrahim, Bachir: Evidence building for effective advocacy on local and national level; working through champions of education system and national WASH in Schools taskforce.
    - o Group 3 (EN) Miada (presenter), Prakash, Alex, Zekarias, Yohannes: Engaging the government through demonstrating success of the Blue School approach with emphasis on joint field and learning visits.
- **HCF:**
    - o Group 4 (FR) Alice (presenter), Bruno, Idrissa, Aboubacar, Moutari): Stepwise journey focused on *actors* from partnership to WASH FIT to presenting evidence and learning.
    - o Group 5 (EN) Kallol (presenter), Andrea, Shoeb, Rogers, Tigist, Takele: Influencing national and local level health authorities to adopt WASH FIT within the health system through an integrated and participatory approach.

- **Blue sky:**

    By chance both groups focused on the scaling up the Blue School approach with different approaches:

    - o Group 6 (EN Zemichael (presenter); Laxman, John O., Ali, Gemedo: Achieving scale-up to other primary schools in rural areas through the government system to ensure sustainability.
    - o Group 7 (FR) Arsène (presenter), Adam, Worokuy, Abdoussalami: Introducing a virtual platform for Blue Schools that can be used offline and online.

Common themes that emerged, such as: system-wide actions, strategic advocacy, evidence for success, stepwise journey to change, simultaneous work at the national level, and working in partnership with like-minded national and international actors

VIII.   Advocacy Experience and Moving Forward

Several hours of the workshop were dedicated to various efforts to better understand if and how to more systematically integrate advocacy into the WASH programming of SWSC members. Partners from Ethiopia, Mali, Benin, and Nepal reported on their advocacy efforts in their respective programs, and partners from Uganda, Mozambique, Benin, Madagascar, Bangladesh, Mali, India, Burkina Faso, Ethiopia, and Nepal participated in brief role-playing advocacy presentations designed to give us a taste of what advocacy efforts look like on the ground. On the last day of the workshop, the group discussed how to best monitor and evaluate advocacy efforts, including a vigorous discussion about how challenging this type of evaluation can be.

John Oldfield, the Consortium's Advocacy Advisor, reiterated the three main reasons why he considers advocacy vital: 1) Sustainability: advocacy makes it more likely that the results of projects will long outlive their technical lifespans, 2) Scalability: advocacy with governments at local and national levels increases the likelihood of other stakeholders scaling up project successes, and 3) Outreach: well-designed advocacy initiatives enhance the WASH sector's influence beyond the WASH sector, into health, education, gender, climate, and other sectors. John Oldfield also briefly presented the Six Key Elements of Advocacy (Message, Target, Messenger, Timing, Platform, and Follow Up).

Highlights of the workshop included an increased recognition of the importance of advocacy across the work of SWSC partners, and an honest discussion about the challenge of strengthening the capacity of technical WASH leaders to engage successfully in advocacy. It became clear throughout the week that most projects have been implementing advocacy efforts for years, under different names and with approaches less than entirely systematic. Participants also introduced and discussed various aspects and approaches to WASH advocacy. These included menstrual hygiene management, the return-on-investment of WASH, cross-sectoral approaches, laws and regulatory environments, a focus on the most vulnerable communities, advocacy at different levels (local/national), how to best leverage the evidence we currently have while supporting more research efforts, how to 'speak the different languages" of health and education, and many others.

Participants tackled several key questions to be addressed after the workshop. These include:

- How should each project best incorporate advocacy into Phase IV proposals and budgets? What additional guidance (e.g. templates, models, resources) can the CMU provide?
- How can SWSC strengthen its advocacy efforts in each organization? Should we train current WASH staff, and/or hire advocacy experts internally, and/or engage with outside advocacy experts and networks?
- SWSC members often have longstanding, trusted relationships with local and national government stakeholders. How can we best leverage those strengths through concerted advocacy efforts?
- What efforts can we undertake to reach out more effectively into the health and education sectors? To what extent should we push further, and incorporate into our work experts on climate, gender, and economic empowerment?
- How can we best strengthen the capacity of local partners, to ensure that our advocacy efforts continue to bear fruit after a Consortium-funded effort comes to an end?
- The CMU will prepare an advocacy template for SWSC partners to consider using as they consider how to incorporate systematic advocacy into their Phase IV proposals.

*** Per the suggestion of the Swiss Red Cross / Sudan team, John Oldfield facilitated a brief session during the Workshop on evaluating advocacy. Each advocacy program, and therefore each evaluation, is unique, but participants suggested a number of ways to measure and evaluate advocacy efforts, from inputs through to eventual outcomes.

In the absence of a Global Advocacy Fund for Phase IV, the Phase IV Global Innovation Fund will consider both technical and policy innovations. For those SWSC members seeking additional advocacy funding beyond the core funding included in their projects, GIF will be an option in the future.

IX. Innovation Update

CAMBODIA: Developing an e-learning Platform and content for the Blue Schools Kit

E-learning has become an **alternative way of teaching** – even in Cambodia during Covid-19. To reach more schools and cost-effectively **scale out the Blue Schools approach**, this GIF project was approved by SWSC in 2021 and initiated in 2022 in coordination with the Ministry of Education. The platform is under development and will be designed to **support teachers** in delivering the Blue Schools Toolkit already contextualized for Cambodia.

SWSC arranged a technical backstopping consultancy for Eawag-sandec's Digital Learning Manager, Fabian Suter, to support CaCH Cambodia in the selection of a suitable e-learning service provider. The platform will be compatible with the Ministry of Education's e-learning portal. Key features include

- Interfaced Blue Schools e-learning website and a mobile app,
- E-learning content/video tutorials by topic for teachers to prepare and conduct practical exercises,
- Graphic content to adapt the Blue Schools Kit for e-learning applications,
- Additional animated / interactive graphics, cartoons, drawings, picture compilations, diagrams and narrative texts that are context suitable and formatted for App / web-page layout.

Although the platform will be in Khmer, the platform architecture as well as the ToR and original source files will be available for use by SWSC members at the end of Phase 3.
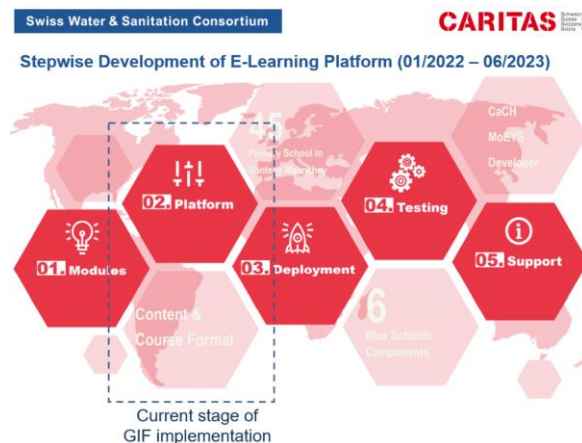
NEPAL: Characterization and Quantification of Healthcare Waste in limited resource settings

Realizing the need for data on waste generation including recyclables.

Knowing the type and quantity of wastes generated in HCF is a prerequisite for developing realistic waste management strategies. Through the GIF grant, Tdh Nepal embarked on creating an on-site, cost-effective methodology for the characterization and quantification of HCF waste in resource-limited settings.

The vision behind the innovation is that r**ealistic waste generation data will guide** development of an appropriate waste management system. The initiative will also **provide an example for further studies** on medical waste through insights into realistic planning and development of effective waste management practices based on evidenced based data. To prepare, the team i) secured approval from the Ministry of Health and Population (MoHP) and support from key stakeholders (Municipal Leaders, WHO, GIZ), ii) developed the Waste Study Implementation Manual, iii) assessed local entrepreneurs engaged in waste recycling/selling, iv) installed required facilities (waste segregation area, autoclave and disposal pit), v) trained HCF staff on data collection and autoclave use, and vi) procured dustbins, autoclavable bags, PPE and scales. Waste collection and weighing activities proceeded for 21 days in four HCF with a second round of data collection on recyclables for seven days. By the end of Phase 3, the team aims to share the following knowledge products to SWSC members and the global community of practice**:**

- Waste study implementation manual (with tools, and SOPs including for autoclave)
- Waste pit and waste collection center designs
- Reporting Tools: data table, unit waste calculator, mobile data collection (Kobo) and analysis

Learning in the face of challenges :

- Avoid transporting medical waste (to reduce health risks) via on-site data collection.
- The SWSC contracted technical consultant, Ute Pieper, insisted on a higher-quality, more costly autoclave than originally planned, which has created an opportunity to install and test such equipment as a case study for the Ministry of Health.
- A change in leadership at the Ministry of Health and population delayed informing the cognizant Technical Working Group; agreement to collaborate was eventually secured.
- Absence of dustbins in the local market required importing from a neighboring town.
- Plan around the busy schedules of HCF staff (due to COVID vaccination).

MALI : Piloting the RANAS holistic approach and social art for behavior change for source separation of medical waste in health facilities in Mali. The value propositions of this innovation for stakeholders include

- Hand hygiene and waste segregation behaviour change tools for the Malian national WASH in HCF Task Force
- Unprecedented model combining RANAS evidence-based tools and social art for behaviour change that is applicable to other WASH behaviours
- First-time, first-hand experience of piloting off-the-shelf RANAS tools
- Evidence for WASH advocacy

Since inception of the project Tdh Mali i) signed an agreement with the Malian Health Ministry to steer the project, ii) presented the initiative to the WASH Task Force and at the national WASH in HCF strategic planning workshop, iii) formalized technical support from RANAS LTD experts in collaboration with the SDC-sponsored Hands for Health research programme component for improved hand hygiene behaviour among HCF staff in Mali, and iv) partnered with the Centre Culturel Koré (CCK): local experts in social art for behaviour change. Tool development, testing and presentation at the national level will continue through April 2023.

X. Regional Workshop Highlights

ASIA: The Asia regional team discussed and agreed some of the pertinent issues that are important to take up currently as well as in the coming months and years. The discussed points mainly covered three areas and the agreed activities to address are listed as below:

1 - Regional/Inter-regional collaboration

- <u>Regional workshop</u> for Asia regional teams on annual basis (to be continued)
- <u>Exchange visits</u>: between and among the projects. This may be combined with regional workshop in case of workshop host country whereas, for other countries it will be organized on need basis.
- <u>Community of practice (CoP)</u>: for Blue Schools and Health Care Facilities to be continued on bi-monthly basis. Adding an Advocacy CoP was agreed with the interval to be decided later.
- <u>Peer support</u>: Use of internal regional capacity to support projects needing urgent attention.
- Organize an <u>inter-regional workshop</u> for South-South sharing somewhere at the mid of phase-IV

2 - Learning Themes: The team agreed to continue with the current learning themes and to add a few more especially on cross cutting areas applicable for all types of interventions. Those are;

- <u>Private sector partnership</u> – (to continue) Statement: *"Promote and support establishing sanitation markets (SaniMart) at the local level through training of local entrepreneurs and linking them with financial institutions".* (based on Phase II external evaluation recommendation of WASH business)
- <u>Water quality testing and treating</u> - (to continue) Statement: *"Promote and support the establishment of sustainable water quality testing mechanism at the project and/or local government level (including schools and HCF) in SWSC countries".* For water quality, the different elements of water quality testing and water quality treatment will be looked at.
- <u>Menstrual Hygiene and Health</u> (to continue as part 2) Statement: *This needs to be more focused in schools and efforts be made from school to community during the forthcoming phase. A learning journey on MHH be launched in next phase among all participating projects.*
- <u>Climate change adaptation</u> (new) Statement: *This is to be taken up to address few important but doable indicators of climate change adaptation which will gradually lead projects towards climate resilient WASH interventions.*

3 - Knowledge Management: The team agreed to produce stories and fact sheets on lessons learnt at some interval of time. The agreed tasks are listed below but not limited only to the ones listed:

- Project wise <u>case studies</u> (learning stories) – one case/ per year for each project
- Learning papers writing and publication – on need basis. This is an ongoing practice in the SWSC projects which will also continue in the future.

FRANCOPHONE AFRICA: The main challenge identified by the French-speaking Africa teams was <u>collaboration</u> between projects. Although many opportunities have been created for projects to exchange and share experiences (in particular the CoP sessions for the two signature approaches), discussions often do not lead to changes in the implementation of activities: "We talk, it's interesting, but in practice not much changes". The same is true of the intranet, which is unanimously appreciated by the teams but is still very underused, whether for uploading information or for consulting it.

All participants recognised that a lack of collaboration between projects is not an organisational problem as many tools are available and accessible. Even the internet connection difficulties that were often raised during Phase II to explain the lack of inter-project exchanges were not mentioned. The difficulty comes mainly from individuals having a heavy workload and lacking time and/or inclination to collaborate. However, all colleagues know that learning from each other is the backbone of SWSC. Conditions should therefore be created to encourage—and compel—teams to become more involved in sharing experience. Nevertheless, the most important point is not the exchanging knowledge/experience itself, but the resulting change in the implementation of the project. Sharing is useless if it is not followed by an effective improvement, in the short, medium or long term, of the situation in the intervention area and/or beyond!

The majority of participants recognised that a solution could be to systematise meetings, both bilaterally (two projects share their experiences) or globally (all projects meet online on a regular basis). CoP sessions should be more systematic and an internal organisation should allow for the effective participation of all projects (e.g. making one team responsible for moderation and another for reporting…).

1 - **Actions under consideration for Phase III**

- it will essentially be up to the regional adviser to try to make the exchanges more dynamic through the existing tools (CoP, intranet) for example, by putting teams in competition to give everyone the desire to talk about what they do. Themes already addressed in previous sessions, such as waste management or MHH, could be revisited, as several colleagues have expressed interest.
- idea of capitalisation meetings where certain projects would present their results, based in particular on the evaluation reports.

2 - **Preparations for Phase IV**

- Make underline exchanges more compulsory
  - o Plan collaborations between projects (especially for projects taking place in the same country) as soon as the proposal is written.
  - o Formulate indicators to measure the quality of exchanges *and* the resulting changes
  - o Design "collaboration plans" that enable monitoring, assessing the quality of exchanges.
  - o Grant additional funds (GAF, GIF or other) in priority to projects that learn and capitalise on the experiences of others.
- Promoting inter-regional exchanges. The Addis workshop showed that the language issue, often considered as a barrier, can be managed. It will be up to the projects and the CMU to create favourable conditions for the sharing of information across the 3 intervention regions.
- Focus on advocacy. This activity is central to the intervention of the projects but not enough actions are implemented in the field. It is important to support the teams, in particular through training, both general and specific (at the level of a project team). Advocacy should start at the beginning of the phase with, if possible, themes already identified in the project document.
- Train teams on the systems approach. Adopting a systems approach is fundamental for improving sustainability. Training is needed and the CMU should consider the relevance of having an advisor with such skills (on the CMU team or to be recruited).
- Scaling up. It is essential that the signature approaches are scaled up and projects should be evaluated accordingly. Specific indicators will have to be developed and meetings/sharing will have to be organised in direct relation to this theme.

EAST AFRICA

1 – **What can still be done in phase III?** – Focus on peer learning

- Organise a regional workshop (date still need to be fixed) focusing on:
    - Going through the basic principles of Blue Schools (as some new staff within organisations have joined halfway through phase 3)
    - Sharing of good practices between projects including GAF (Ethiopia and maybe Uganda) and non-GAF advocacy progress
    - How to use the Blue Schools Kit materials
- Continue with Blue Schools CoP, inviting Solidar and SRC Ethiopia to join. Session suggestions:
    - Intro to RANAS (Solidar volunteered to present their experience with RANAS). Jacques could provide more the technical background/main steps of RANAS
    - Experience sharing on how to adapt the Blue Schools Kit to different contexts
    - On solid waste and MHH: inviting experts (again), reviewing what was done, discussing what worked and what did not work, and getting new advice on the way forward.
- Monitoring visit: Keeping teams informed on upcoming RA field visits, so that a team can join.
- Consider organising infosession on Blue Schools at local and national level for government and/or development partners, to raise interest on the approach, and promote scaling up of good practices (and also get other ideas on what more we can do). Now, we have some evidence to show! RA can support in organising such infosessions in countries. In Ethiopia, this could be done jointly between CACH and HEKS. In Ethiopia, such infosessions can also be a platform to share the results of the project evaluation by the government.
- For HEKS Ethiopia: Identifying opportunities for further learning/exchange from other countries (in Asia or West Africa) on WASH FIT. There are always opportunities to contribute to, and learn from, the global CoP at www.WASHinHCF.org. SWSC members using WASH FIT would benefit from more engagement on that platform while bringing SWSC / SDC greater visibility.

2 – **Phase IV ideas** – focus: sustainability, scale, advocacy, innovation & moving toward environment

- Continuing with current mechanisms: monitoring visits, peer exchanges, yearly regional face to face workshops building on a series of online exchanges, CoP meetings
- Idea to have MHH as SWSC 'blueprint', as it is clearly where most projects have promising good practices (and promising advocacy ideas)
- Systematize advocacy in programs and budgets, including personnel costs and training.

The following points were also highlighted by the RA:

- Every project should consider including advocacy in its planning. This includes strategy (think Six Steps), budgeting, and personnel, either inside or outside the organization. There are strong national advocacy networks and leaders in every country in East Africa that could make strong partners for SWSC members. Exchange activities should also be budgeted for.
- Advice to include follow up with schools which were part of phase III in the proposal of phase IV, to continue the Blue Schools pathway and move towards environment.

- Consider activities at community level, including advocacy. SWSC often has strong, trusted relationships with community leaders (e.g. mayors) and can leverage and strengthen those relationships through advocacy.

XI. Output of workshop on Phase 4 Theory of Change

Building on the Deep Dive, two teams worked in tandem to draft Theories of Change for each of the Signature Approaches. Plenary sessions to present works in progress enabled cross-feedback. The table below describes both the **strategic impact**: SWSC's contribution to the health and education sectors, and the **overall expected outcomes**: the expected changes in schools and health care facilities that SWSC aims to deliver.

TOC Element	BLUE SCHOOLS	WASH IN Health Care Facilities
Impact	**Contributing to SDGs:** Inclusive and equitable quality education that promotes lifelong learning opportunities for all (SDG 4, 5) Ensure availability and sustainable management of water and sanitation for all (SDG 6) and other SDGs linked to the environment (e.g. SDG 12, 13, 15) Reduction of absenteeism, better school performance, more dignity for girls and improved hygiene behaviour and environmental conservation practices at community level leading to healthier lives and ecosystems. **Clear and longstanding political and budgetary commitments and action** made on sustainable, equitable and climate resilient WASH services	**Contributing to SDGs:** Universal quality health care and sustainable management of water and sanitation for all. (SDGs 3, 5, 6) Reduction of health care acquired infections with increased dignity and safety for HCF personnel and people seeking health services **Clear and longstanding political and budgetary commitments and follow through** on sustainable, equitable and climate resilient WASH services
Expected Outcomes	**Access to "Basic" level WASH services in schools** including gender-friendly, inclusive and climate-resilient infrastructure. **Students** adopt good hygiene behaviours and environmental conservation practices **Teachers** provide practical education on hygiene (including MHH).and the environment. **School Management Committees** allocate adequate resources for Blue Schools activities. **Leadership from education and other sector authorities** to mainstream Blue Schools principles or similar government initiatives (e.g. Green Schools) at (sub) national level.	**Access to "Basic" level WASH services in Health Care Facilities** including gender friendly, inclusive and climate resilient infrastructure **Medical and non-medical staff demonstrate good practices for infection prevention and control** in hygiene, medical waste management and environmental cleaning **Community members and (health) CBOs claim their rights to improved WASH services National authorities** embed WASH FIT (or similar risk-based participatory assessment) in formal planning and budgeting systems; and **local government authorities** use WASH FIT Improvement Plans to commit and spend budgets for WASH

Assumptions The table below describes what will happen if SWSC is successful in carrying out its **Phase IV strategic actions**: what project teams and partners will have achieved in terms of influencing local and national level health and education stakeholders. Assumptions linked to external risks are also mentioned.

TOC Element	BLUE SCHOOLS	WASH IN Health Care Facilities
Assumptions	Teachers and school administration are committed to enhance their capacities and include practical learning on hygiene and the environment. Scope to implement practical learning in the national curriculum and potentially sensitive topics such as MHH Education authorities' willingness to enhance national curriculum on Blue Schools principles Blue Schools topics are in line with governmental and school stakeholders' priorities	Local/ National authorities, HCF staff and community members are committed to enhance WASH services for effective Infection Prevention and Control HCF stakeholders' willingness to lead participatory risk-based assessments, and prioritise actions and investments to improve WASH services Community members and HCF staff understand their rights to WASH in HCF and are willing to share their experiences of WASH services
	RISK: Projects are not adversely affected by displacement, natural disasters, socio-political / economic upheaval, insecurity, pandemics, stakeholder turnover	

The table below describes the strategic actions SWSC adopts to address the problems and challenges identified concerning WASH and environmental education in schools and WASH in health care facilities. These activities will be bolstered and accompanied through the Consortium Management Unit's Phase IV technical backstopping, financial resources, networking, partnerships and focus on learning and exchange of experience as part of knowledge management. More details on the aspects actions for WASH Systems Strengthening are in Section VI.

TOC Element	BLUE SCHOOLS	WASH IN Health Care Facilities
Strategic Actions	**Advocacy:** Involving government stakeholders at all stages, sharing of knowledge/good practices and building evidence of success, advocating for prioritisation of i) WASH and environment in education system policies and budgets, ii) WASH in HCF and WASH FIT in the health system policies and budgets and iii) WASH in community policies and budgets. Mainstreaming / investing in **Climate Resilience** and **Gender and Social Equity** based on contextual analyses	
	Preparatory strategic assessments of education system, including the institutional and regulatory framework, review of the national curriculum, mapping actors and their functions relevant to Blue Schools, identifying bottlenecks to address and partnerships (advocacy networks, private sector, etc.) **System strengthening:** Embedding Blue Schools principles in the national curriculum, aligning with national policies, building institutional capacities of existing structures at school, community and governmental sub-national level. **Capacity building of all stakeholders at all levels,** including education authorities, school stakeholders and the community at large, on hygiene and environment, (ToT by system actors where possible).	**Preparatory strategic assessment of health system,** including the institutional and regulatory framework including rights-based policies, mapping actors and their functions relevant to WASH services in HCF, mapping actors, identifying bottlenecks to address and partnerships (advocacy networks, private sector) **System Strengthening:** Mobilising system actors at all levels to take *«Practical Steps»*[1] to improve and sustain WASH, waste and cleaning services. Per the country context, **systems strengthening means supporting** one or more of the following: **- Ministry of Health led national (or regional) WASH in HCF "task force" initiatives**, e.g. assessments, targets and plans, establishing standards ("Service Catalogs"), accountability mechanisms, etc. **- Local government authorities decide and oversee[2] infrastructure improvements &**

---

[1] Water, sanitation and hygiene in health care facilities: practical steps to achieve universal access, WHO 2019
[2] As contracting authority where feasible (maitrise d'ouvrage)

TOC Element	BLUE SCHOOLS	WASH IN Health Care Facilities
	New or improved WASH infrastructure & maintenance **Designing and implementing context-specific behaviour change strategies,** after analysing the decisive motivational factors (using e.g., RANAS). **Enabling system actors** to facilitate hygiene routines and sustainable land & water management technologies and practices in schools. **Promoting school-led activities and ensuring involvement of all students** in all Blue Schools activities.	**maintenance** using WASH FIT or similar, and embed inclusive governance mechanisms - **Health authority-led capacity building** (e.g., WASH FIT, O&M, IPC) for HCF management and staff (medical & non-medical**);** and developing and implementing **evidence-based behaviour change** interventions (e.g. RANAS or similar, social art) for health workforce - **Health authorities monitor and use data** on WASH service levels *and* user experiences
	- Evidence and innovation (e.g., digitalisation of MEL, private sector "business" case for WASH service models) to enhance WASH services	

The table below describes the **main issues, problems and challenges** that need / will be addressed by SWSC members through the signature Approaches. It serves as the basis for a contextual analysis at a global level on factors concerning Blue Schools and WASH in HCF.

TOC Element	BLUE SCHOOLS	WASH IN Health Care Facilities
Problems / Challenges	**Health issues:** Prevalence of water borne diseases, low nutritional standards/ lack of nutritional diversity, etc. **Infrastructure & services:** Lack of WASH infrastructure, issues with operation, maintenance and management, lack of consideration for gender and people with special needs in designs. **Lack of basic knowledge, awareness and poor practices:** - Misconceptions and cultural taboos and norms, especially about MHH - Lack of awareness and poor practices on hygiene and solid waste management - Lack of basic knowledge and harmful practices (littering, burning…) on solid waste management, agriculture and environmental protection **Issues linked to education system:** - Low school attendance/absenteeism and low performance - Non-interactive teaching/learning methodology - Hygiene and environment are not a priority in the curriculum **Poor enabling environment**: lack of governance, policies, coordination, spending, capacity, political will and commitment) for WASH in Schools and environmental education.	**HCF management committees lack understanding** of the critical role of WASH for infection prevention and control and their role **Inconsistent IPC practices:** including lack of IPC-WASH focal points and trained staff (medical and non-medical) **Insufficient quality, quantity of WASH infrastructures & supplies** / supply chain leads to weak and inconsistent services **Health authorities' and political leaders' lack of ownership** / priority investments / accountability for WASH: This includes lack of willingness to mobilise health system resources in recognition of WASH role in ↑IPC and ↓AMR*, including staff, WASH FIT process, training equipment, materiel and supplies, O&M (including waste management) **Lack national and local level collaboration and coordination** among concerned ministries (Health, Water, etc.) and local governance structures **Health system standards are not fully inclusive of WASH,** including training of medical and non-medical staff **National monitoring mechanisms do not fully integrate WASH,** including accountability of system actors **Missing voices of patients / community voices** to claim their human right to WASH in HCF (no mechanism to apply pressure) **Weak private sector involvement/investment** in the system, no business models for WASH services

XII. Next steps

Some takeaway points and closing remarks were shared by the Coordinator.

A quick back-of-the envelope calculation reveals that the current workshop has absorbed around CHF 65,000 (not yet taking staff time into account). Although this looks significant, which it is, it can turn into money very well spent if all participants put into action what was learned in this week. From a Phase III perspective, the workshop has demonstrated in full the SWSC sharing and learning in action, with enriching discussions sharing experiences (successes, failures), building our internal capacity on various topics, that in turn hopefully will increase effectiveness and efficiency of the members interventions.

The articulation of the Systems approach, especially for the next Phase of the SWSC, has been a great source of learning for many this week as was reflected in the feedback round. For scaling-up of the SWSC work it now sounds there are several avenues to be explored by the projects, with some interesting opportunities where government has shown direct interest or national programmes provide possibilities to feed into more flexibly (e.g. Green schools initiative).

Some of the key challenges are not to loose out of sight that the SDGs are demanding high level of ambition of *safely managed services,* whereas SWSC primarily focuses on *basic services.* As also mentioned by SDC in their feedback, how to move from *innovation* to *scaling up.* This might not be across the board of the SWSC projects very simple, but the message is clear: progress needs to accelerate so how can we demonstrate proof of concept and scalable and cost-effective models? This raises questions what role advocacy takes here in project context? Also, how is the SWSC articulating sustainability of interventions and are exit strategies clear to all stakeholders? Will the TOC help to clarify and work out missing elements, if any? Finally, it was very encouraging to hear the whole week about learning from *between and within* consortium partners, but hardly any mentioning of learning on WASH and environment *from other sector organization* outside the consortium. Important to consider these points while moving forward towards end of Phase III and while preparing for Phase IV.

Annexes – Programme, Participants, Workshop Feedback, Deep Dive Summary

Swiss Water & Sanitation Consortium

i. **Programme**

Swiss Water & Sanitation Consortium

Global Conference 2022 - Agenda - 5 - 9 September, Addis Ababa

Timings		Monday	Tuesday	Wednesday	Thursday	Friday
08h30	S1 - 15'	**Opening Block** - Introductions CMU Global Updates Phase 3 Workshop Objectives, Agenda Assign Volunteers for daily Recap, Logistics, Security, COVID (1h15')	Day 1 Recap/highlights by Asia team volunteers	Day 2 Recap/highlights by West Africa team volunteers	Day 3 Recap/highlights by East Africa team volunteers	Day 4 Recap/highlights by CMU volunteers
08h45	S2 - 60'			Intro: **Theory of Change** plenary		Phase 3 Learning Stories: Asia (4)
	S3 - 30'		Deep Dive Introduction Deep Dive Phase 4 ideation	ToC Group Work 2 groups: Blue Schools & WASH in HCF	ToC Plenary Activity	OPEN session based on need
10h15	Break 15'	Break	Break	Break	Break	Break
10h30	S3 - 45'	**SDC Update** Global Program Water	Phase 4 Planning Continue - Deep Dive, with a plenary to summarise	Blue Schools TOC WASH in HCF TOC Group work Group work	Blue Schools TOC WASH in HCF TOC Group work Group work	TOC: Finish in Group Work; Presentations for feedback in plenary; Next steps...feedback loop
	S4 - 60'	Updates **Global Innovation Fund** (3)				
12h15	Lunch 60'	Lunch	Lunch	Lunch	Lunch	Lunch
13h15	S5 - 60'	**Advocacy** Round Table I (GAF / Non GAF experience)	Phase 3 Learning Stories: East Africa **Regional Teamwork** (Open: Phase 4 theme)	Phase 3 Learning : West Africa pt1	Phase 3 Learning : West Africa pt2 M&E Feedback & Reflection Phase 4	Phase 4 Concept Review & Reflection OPEN session based on need
	S6 - 45'					
15h00	Break 15'	Break	Break	Excursion to Zoma Museum **Learning Event** on 2 Subjects 14h30-16h30 sessions 16h30-17h30 Free	Break	Break
15h15	S7 - 45'	**WASH Systems Thinking** - Introduction for Phase 4 ideas	**Regional Teamwork** (Open: Phase 4 themes)		**Advocacy** Round Table 2 (Action)	Commitments, feedback on the week, family photo and closure
16h00	S8 - 60'	**Evidence Building** updates & action				
17h	Post sessions	Asia team volunteers prepare Day 1 Recap drawing CMU Meeting; Bilateral rdv per need **Reception/cocktail at hotel**	West Africa volunteers prepare Day 2 Recap drawing CMU Meeting; Bilateral rdv per need	East Africa prep Day 3 Recap-at Zoma **Cultural dinner in the city**	CMU volunteers prepare Day 4 Recap CMU Meeting; Bilateral rdv per need	**Dinner Together**

The main objectives for the Meet-Up are:

1. Clarity on our collective progress during the 3rd phase (including success stories and learning)

2. Alignment on our concept for the 4th phase (curating existing practices and new ideas)*

3. Contributed to theories of change for *both* signature approaches

*Participants reinforce their experience of existing --and explore new-- themes relevant to SWSC aspirations: advocacy, evidence building, systems approach

Start of Days 2,3,4,5

Regional teams propose 1-2 volunteers: homework the evening/morning prior: make a drawing/sketch of highlights of previous day that depicts the moments forts/high points and your impressions about that you want to know more about... keywords / Acronyms ok

Daily Regional project team learning stories from the field - Prepare Learning Stories ahead of Addis: What happenned? What was learned? How you take that learning forward? 3-4 highlights daily by region: 10 min each + 5 min for clarifying questions.

ii. **List of participants**

iii. **Workshop Feedback**

In general, the participation was very good throughout the week. The majority of people were present for all sessions and participated actively. Every break was used for animated discussions and exchange.

On the last day of the workshop every participant was asked to fill out his/ her satisfaction in the area of expectations, theory of change, advocacy, exchanges and learning, links and contacts, translation, CMU and excursion (see charts below).
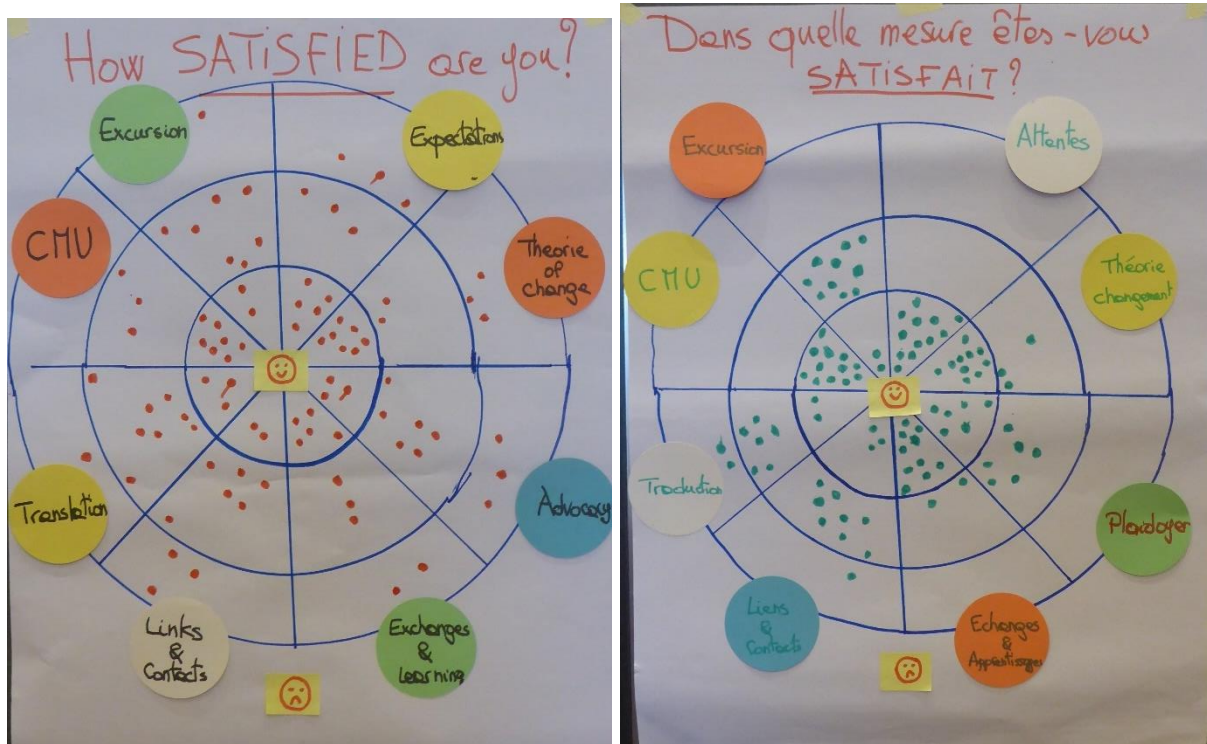

Figure 5: satisfaction chart in English (left) and French (right) with highest satisfaction in the center of the charts

Additionally, everybody got the chance to share shortly his/her feedback referring to their expectations which were formulated and presented in the very first session. The majority of expectations were met in the course of the week. The most frequently mentioned points of feedback were that it was very much appreciated to finally have an interregional workshop and that they have rarely attended such a varied workshop with lots of group work, roundtables and inputs from different people. Participants appreciated the care and involvement from the host organization HEKS Ethiopia and the presence and interventions of Pierre Kistler from SDC. Though there were some small hiccups with the translation, the simultaneous translation was instrumental to facilitate exchange beyond the regions.

Swiss Water & Sanitation Consortium

iv. Deep Dive: Summary of conceptual designs contributing to the Phase IV Theory of Change

Blue Schools Deep Dive (3 Groups)

What more can we do with local governments/ national level education authorities to enable them to take the lead on integrating SWSC approaches and processes within the education system?

Group 1: Sergio (presenter), Debi, Shilmat, Duressa, Aderu (EN) - Blue Schools

Develop advocacy plan with concrete steps (target = education and WASH authorities, timing = before the start of the academic year)

This includes: **stakeholder mapping**: clear identification, level of engagement, capacity building, build task force; **Analysis** of education curriculum, policies, gap ; **Evidence building:** demonstration, success stories, facts, gaps -> interactive ways to share with local authorities; **Interconnection of blue schools with government policies** and plans on WASH, MHH, gardening, learning practically etc.; Responsibility map and multi-year planning for feasibility, capacity building, and scale up
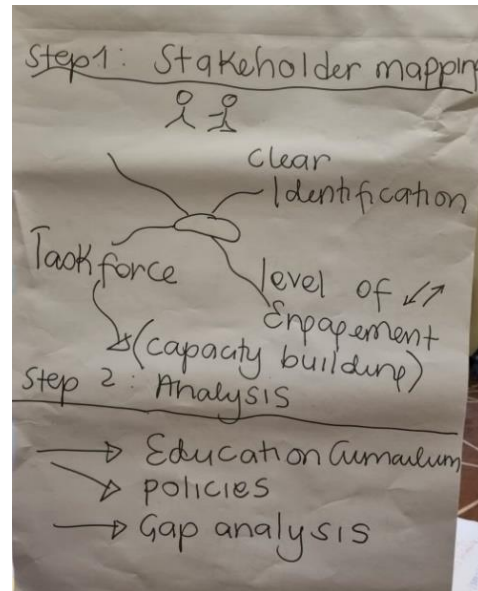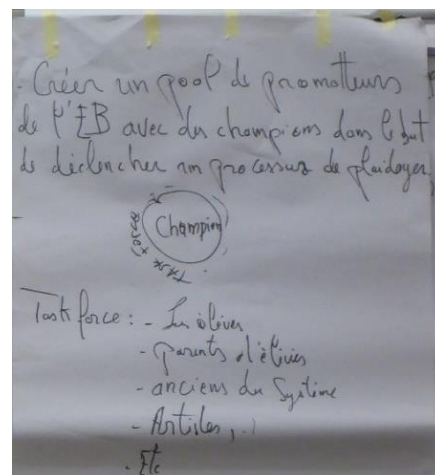

Questions/Remarks

How to engage the government? Not 100% clear ; What is more compared to what we already do? Concrete advocacy plan; Identify all relevant government sectors, not only education authorities

Group 2: Dah (presenter), Espérence, Jerry, Ibrahim, Bachir (FR): Blue Schools

Focus on Evidence building for effective advocacy

Advocacy focus on identifying and working through "champions" of education system (teachers, ministers, etc) and taskforce (teachers, students, partners, …)

The strategy is simultaneously implemented at both local and national levels

Questions/Remarks

Task forces are often only working temporarily - Sustainability? Once it is anchored in the curriculum it is going to be sustainable; What is the strategy going to do? System strengthening requires a roadmap for advocacy; Formal partnership with the education ministry is necessary.

Group 3: Miada (presenter), Prakash, Alex, Zekarias, Yohannes (EN) – Blue Schools

Engage government through demonstrating success of the Blue School approach

Ideas to enhance government involvement:

Participation in project design; Identify and assign them key implementing functions; Accompanying government to create task force; Joint field visits (media, community, government); Review the curriculum with government officials;

Ideas to Promote Success

Field visit/ learning visits; School hygiene campaigns and events; Document success stories; Disseminate key messages; Video documentation
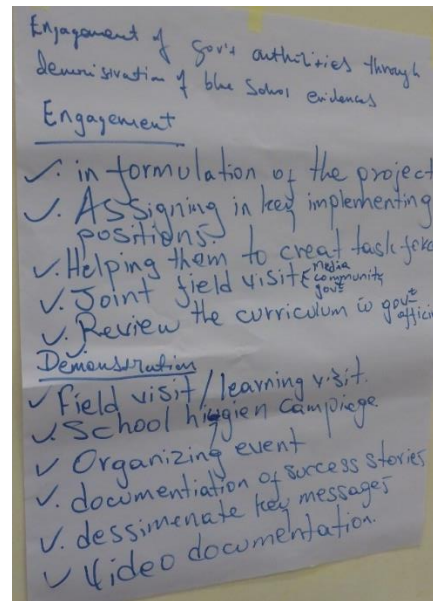
Questions/Remarks

Review the curriculum with the government: maybe good to already review before to find gaps? While important, it is best not to jump ahead and to take all the steps together with government to increase ownership from their side

What about other stakeholders than government? Of course, community should also be considered

Comment: Good to engage multiple sectors (education, WASH, …)

Are there any countries where Blue Schools topics are not included in the curriculum? Yes, work is needed in many countries, e.g., in Sudan MHH and school gardens are not part of the curriculum

WASH in Health Care Facilities Deep Dive (2 Groups)

What more can we do with local governance/ national level health authorities that would enable them to take the lead on integrating SWSC approaches and processes within the health system?

Group 4: Alice (presenter), Bruno, Idrissa, Aboubacar, Moutari (FR) – WASH in HCF

A Stepwise Journey with actors:

1. Create a formal partnership with gov. actors: defined roles and responsibilities, shared principles e.g. mutuel accountability

2. Support WASH FIT Improvement plan activities (collaboration between government actors and WASH FIT teams, seeking local government, health authorities' technical and

Swiss Water & Sanitation Consortium

financial support, use WASH FIT as a framework for discussion/ consultation for governance or health system strengthening)

3. Evidence for advocacy (gather data, figures, accompany institutional learning exercises, partner with local research institutes, focus on visibility, advocacy strategy)

4. Learning from WASH FIT, showcasing success and discussing how to replicate at national level
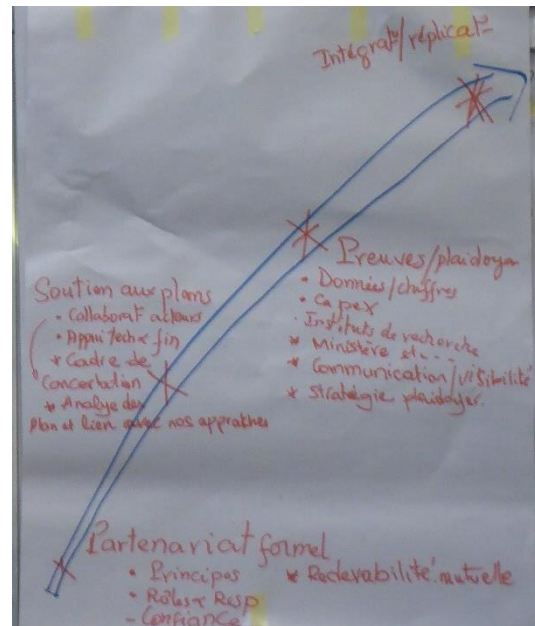
Questions/Remarks

Is it right that you want to first address the local level and then move up to national level? Won't this take a lot of time? Time is not the most important thing, better slowly and surely and sustainable. Our work must be based in experience, so starting locally is best. Get involved in or create national level discussions at the earliest

Group 5: Kallol (presenter), Andrea, Shoeb, Rogers, Tigist, Takele (EN) WASH in HCF

Group influence national and local level health authorities to adopt WASH FIT (WASH in HCF) approach within the health system through an integrated and participatory approach

Activities (* denotes a new element):

1. Community participation, community empowerment, community demand with the goal: community demands from the government to have a HCF with WASH FIT approach in other villages they know*
2. Sharing best practices among HCF, local, national government (workshop, exposure visits)
3. Alignment with government priorities and policies (i.e. see how the approach aligns with the goal of a certain government e.g. if the aim is to increase ante/post-natal care visits, point out that WASH at HCF is essentials for women to trust quality of care, so they seek care at the HCF*
4. Health workforce engagement (including midwives, cleaners, etc)
5. Collecting information/ evidence on impact and cost
6. Engaging local and national level parliamentarians (advocacy); use a group of community leaders to influence the government/ form community parliament
7. Engage with multiple sectors e.g. water, gender, woman development ministries, CSO
8. Capacity building to relevant sectors (stakeholder mapping necessary – consider private partners as well e.g. pharmaceutical vendors who move from one facility to another, pharmacies)
9. Peer to peer approach (community – community, officials – officials, health care worker to health care worker…); e.g., via social media groups e.g. facebook group to share achievements*
10. Empowerment through involving community members / leadership structures to lead processes

11. Parallel work at community level (bottom up) and at national level through an advocacy team (top down); consider the government system to set realistic timelines, resource requirements
12. Design policy briefs and disseminate*
13. Design and implement a measurement matrix of success*
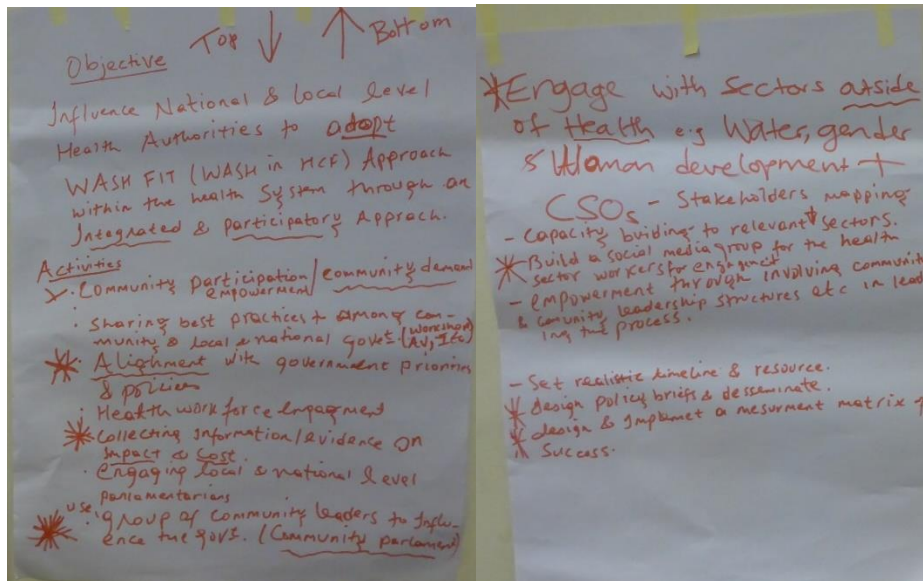
"Blue Sky": Open for any other ideas or solutions to implement in Phase IV

Group 6: Zemichael (presenter); Laxman, John O., Ali, Gemedo (EN)

Goal = scale up Blue School approach to other primary schools in rural areas

Process = engage all the stakeholders (e.g. CBO, community, teachers, clubs, students, parents, local and political leaders, ….) through open and inclusive* process to scale up Blue School through the government system to ensure sustainability (*government plan the process considering priorities of beneficiaries)

Important activities: Evidence building (relevance, results, impact, experience sharing, field visits, cost effectiveness) to demonstrate to local and national policy makers, capacity building, use of policy briefs, stakeholder mapping
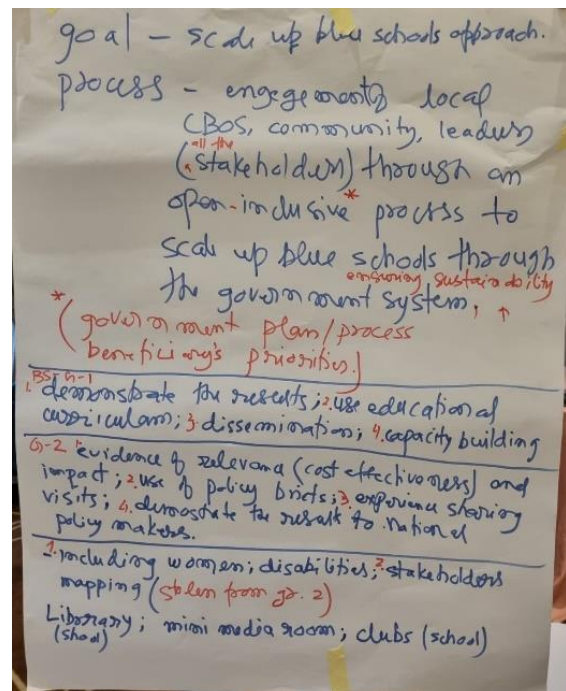
Questions/Remarks:

Broad analysis requires a lot of resources (financial and human) – maybe it would be better to narrow down the topic and use already existing data? Use data and experience of the engaged groups, review of existing documents e.g. curriculum and policies

How can we be more effective to show evidence? What if the government is not interested? Negotiate, lobby and advocacy to make them change their mind. Concern raised: sanitation facilities are very expensive even more than school building.

Group 7: Arsène (presenter), Adam, Worokuy, Abdoussalami (FR)

Goal: scaling up of Blue School approach as it is not possible to go from school to school by ourselves; through virtual platform which can be used offline and online

Concept: More efficient program to reach more people = dynamic virtual platform

Conditions:

1. participation: involvement of all stakeholders
2. political dialogue: diplomatic influence/ advocacy of SDC on countries
3. continuous and dynamic improvement of process content
4. harmonization and integration leadership CMU
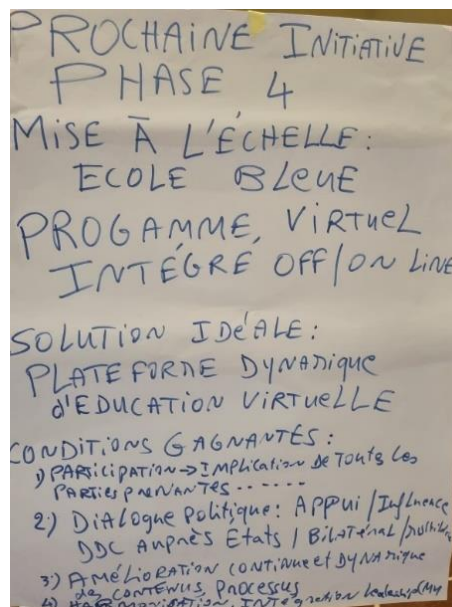
Questions/Remarks:

Can you clarify the conditions? One precondition to actually start the process is an agreement of the government

Remark from Pierre: NGO has major role to play and can count on diplomatic advocacy support from SDC where possible

Why virtual and what is it for? Tool to go faster and to enhance the work and reach more people at once

Who is the platform for? Different community groups e.g., students, teachers, parents,