skat
foundation

Synthesis of final evaluations of phase III Swiss Water and Sanitation Consortium Final Report

Bertha Camacho
Skat Foundation
February 2024

Contents

Executive Summary

Phase III of the SWSC was implemented between April 2020 and September 2023 with 16 projects in 12 countries. With WASH in institutions as an entry point to increase water and sanitation coverage in communities, the focus was on rolling out the two signature approaches: Blue Schools and the WASH FIT methodology. In response to the SWSC Evidence Building Strategy[1], a series of external evaluations (eleven standard project evaluations and two in-depth evaluations covering three projects each) were carried out in 2023 evaluating the application of the two approaches and in some cases also evaluating a community component using the OECD-DAC criteria. The purpose of this report is to synthesise the evidence and learnings of these evaluations and to inform future work, as well as the planning and implementation of Phase IV of the SWSC. The development of the synthesis report included a comprehensive process using different analysis methods; the triangulation of evidence collected through the evaluations; and the synthesis of findings, including conclusions and recommendations.

This report is based on the information provided by the evaluation reports and endline data for outcome and output levels for each project. Any gaps in the information presented may reflect the existing gaps of the reports. The synthesis highlights "generalisable" results to ensure a meta-analysis and avoids as much as possible to present results achieved by isolated efforts.

Main conclusions and recommendations for programming

Blue Schools and the WASH FIT approaches, as well as the community component are **relevant** because they respond to the priorities and needs of the communities and of those in charge of schools and HCFs. The approaches are also aligned with international, national, and local policies, standards, and priorities.

- Context and policy analysis on WASH and non-WASH components in the countries are important to assess the relevance of the approaches. They should be conducted regularly to ensure that external trends are included in the operational planning of the projects and that gaps are addressed in the future.
- Project teams should document measures taken to adapt to internal changes (strategic, operational, technical, and technological) during the lifespan of the project. Clear guidance should be provided on how to identify, observe, and document the internal changes.

There is **coherence** in the implementation of the approaches by members of the SWSC. The efforts made by the SWSC to coordinate and consolidate methods, approaches and tools contribute to this result. In the implementation of the Blue Schools and the WASH FIT approaches and in the community component, there are important but limited examples that show coherence with efforts of other development actors working in the same geographical context or with the same approaches. Additionally, in most projects, national, district and local government actors are interested in applying the approaches in their programming. However, some important limitations in terms of financial resources, technical expertise, and logistics are still evident.

- Address the importance of mainstreaming the approaches within the SWSC organisations, for example in other projects, countries, or regions where the organisations are active.
- Continue making efforts to consolidate local partnerships, not only with government institutions but also with other development organisations and actors.
- Mapping and documenting information on all relevant stakeholders and existing local and national initiatives is important to develop engagement and advocacy strategies with these actors ensuring the consolidation of coordination and collaboration efforts.

Results are positive and targets for the Blue Schools and WASH FIT approaches have been achieved in WASH services and in most non-WASH services demonstrating that projects **are effective**. Identified success factors are, a) functional and quality WASH infrastructures; b) the involvement of stakeholders at all stages of the project cycle; c) enhanced capacities and skills for Operation and Maintenance (O&M) of WASH infrastructures and d) effective advocacy. Sanitation and hand-washing practices have been promoted and adopted in most of the Blue Schools and HCFs. The campaigns launched, especially in response to the COVID 19 pandemic, have

---

[1] *The Phase III Evidence Building strategy furthermore included 2 specific Research Mandates and 5 Storytelling initiatives.*

contributed to these results. There are still challenges identified in Menstrual Hygiene Management. SWM is the weakest non-WASH component in Blue Schools and HCFs.[2] Interventions at community level are also considered effective by the evaluations since targets have been achieved in most projects. Community mobilisation, participatory approaches and capacity strengthening prove to be important success factors that led to these results.

- Continue promoting menstrual hygiene practices not only at schools but also within the communities.
- Strengthen the dialogue and collaboration with local authorities to promote the collection and treatment of waste. The application of techniques for sustainable SWM requires continued follow up and technical and management capacities and skills. If possible, a specific study on how to improve the management of waste at local levels should be conducted.
- Systematically monitor and document unintended (positive or negative) effects in schools, HCFs and communities.

The assessment of **efficiency** considers the relation between inputs and outputs, as well as the proper allocation of financial, time and human resources. Under these considerations, projects achieved (or overachieved) results in a timely manner and without the misallocation of funds, despite undergoing important challenges in implementation, such as the COVID 19 pandemic and insecurity in some localities. Projects are dependent on the commitment and efficiency of local and national stakeholders and weak partner institutions can reduce the efficiency of the projects.

Important efforts have been made by project teams to collect and document the financial information; however, evaluations were not able to use this information to assess the **efficiency** of the projects. Nevertheless, costing information allowed evaluations to identify important trends related to budgeting and funding that could contribute to an efficiency analysis. While this information is particularly useful to ensure local and national contributions, it does not demonstrate how efficient the approaches were.

- Projects should consider the weaknesses of local and national stakeholders when preparing the operational plan and budget for implementation to avoid delays or additional costs in operations. Systems strengthening processes should also envision strengthening the efficiency of local institutions, whenever possible.
- Project teams should ensure from the beginning of the project, the application of methodologies and processes for the reliable collection of all the financial information necessary to assess and evaluate the efficiency of the projects.
- To make a worthwhile comparison of the efficiency of the projects, it might be useful to conduct an in-depth financial evaluation to assess how resources are being used to achieve results.

It is early to have evidence on the **impact** of the approaches and **the sustainability of results**. Important anecdotal trends to impact were identified such as: increased attendance rate of girls in schools; improved relations between schools and HCF with communities and local governments; improved environment of schools and HCFs; and improved management of HCFs and schools. The implementation of the approaches has clearly benefited women and girls. Replication and transfer of good practice in the communities is also becoming evident. The endorsement of good practice at the level of local and national authorities is observed and are the basis for scaling up the approaches. Even though changes cannot be attributed exclusively to the projects, advocacy work resulted in the mobilization of local or national funds or human resources. The most transformational change identified is the integration of elements of the Blue Schools approach in the curriculum of many countries. Also, important principles of the WASH FIT approaches are anchored in national documents. In community projects, the following effects were identified: improvement of quality of life of women and girls; and the reduction of open defecation.

Enabling factors that contribute to the **sustainability** of the approaches were identified such as: access to functional and safe WASH services; consistent O&M of the infrastructure through active involvement of the community and other stakeholders; in-kind and financial contributions by communities; engagement, commitment, and accountability from local, regional, and national governments; and the integration of monitoring and evaluation systems in existing national processes. In the case of the community components, the enabling factors identified are, a) the application of community-based participatory approaches; b) the

---

2 Working with Eawag, SWSC set the bar high in defining indicator for a "basic" SWM service in schools in absence of JMP guidance.

formation and strengthening of local community structures; c) the promotion of behaviour change activities; and d) the setting up of water user fees or O&M funds for economic sustainability.

- The integration of the approaches in the health or educational systems are not enough to ensure the expected impact and sustainability. The next phase should make sure to address these gaps including clear and longstanding budgetary commitments and actions for the proper implementation of the approaches.
- Continue focusing on transforming the project design from "systems sensitive" to "systems strengthening;" that means, addressing the limitations expressed by the governmental actors and continuing advocacy efforts to strengthen their commitment to adopt and apply the approaches.
- Governments at various levels must be made accountable for the results and for the processes related to the implementation of the approaches. Duty bearers should have the resources – human and financial – to take on their responsibility. This includes strengthening the monitoring and technical capacities of the local stakeholders.
- Communication with the communities should aim at finding champions who can help promote the approaches with other community members and ensuring that communities are ready to demand their rights.

Conclusions and Recommendations on the Evaluations Process

There are some weaknesses observed in several standard evaluations, especially on those that covered both approaches and the community component at the same time. In such standard evaluations, the overall analysis was either limited or the criteria were not addressed consistently. Also, the analysis of systems strengthening is limited. Additionally, not all standard evaluations address and reflect on all the questions of the SWSC Evaluation Guidance. Some questions of the SWSC Evaluation Guidance overlapped among different criteria and resulted in an apparent confusion on how to report results of standard evaluations. Despite the weaknesses, the standard evaluations do confirm most of the results obtained by the in-depth evaluations and all evaluations reach important generalisable conclusions. On the other hand, in-depth reports used more rigorous methods for qualitative data collection and analysis, which enabled triangulation. The in-depth evaluations include dedicated research themes and provide a more holistic analysis than many standard reports. Standard evaluations should address and reflect on all the questions of the SWSC Evaluation Guidance to ensure the quality of the information in the future.

- Revise the questions in the SWSC Evaluation Guidance in such a way that there is more clarity about the questions to be addressed by standard evaluations.

The use of project baseline and endline data combined with qualitative methods used by evaluations provides a robust evidence base for the effectiveness criteria. In other criteria, such as impact and sustainability, information collected is based on anecdotal information, but it is not backed-up by quantitative data.

- Include qualitative data for monitoring changes. Using the Theory of Change as basis, a "contribution analysis" could be made to address changes in the context; changes perceived by local stakeholders; and unintended effects.

The project evaluations covering the **community component** show on average less detail and analysis per criteria than the evaluations of the approaches. At the same time, there are differences in the quality of the evaluations between projects. Some evaluations have addressed all or most criteria; and have done either a separate evaluation report of the community component or have clear separate sections evaluating the community component. Other evaluations did not provide all the information necessary to do an evaluation using the OECD – DAC criteria. To ensure the quality and the comparability of the community component evaluations in the future, the SWSC Evaluation Guidance should be applied fully in all community evaluations.

As part of the evidence building process, the synthesis as well as the information collected from the evaluations provide a good basis for understanding the results of Phase III and to prepare for Phase IV. This work combined with the dedicated research projects contribute to the realisation of the Evidence Building Strategy of SWSC Phase III.

1. Introduction

1.1. Background and scope

Phase III of the SWSC was implemented between April 2020 and September 2023 with 16 projects in 12 countries in Africa and Asia: Benin, Burkina Faso, Ethiopia, Madagascar, Mali, Niger, Uganda, Cambodia, India, Myanmar, Nepal, and Sudan. With WASH in institutions as an entry point to increase water and sanitation coverage in communities, the focus was on rolling out the two Swiss Water and Sanitation Consortium (SWSC) signature approaches: Blue Schools and the WASH FIT methodology. The Blue Schools approach, set out in the Blue Schools Kit (2018), has been initiated by SDC in 2008 and further developed by SWSC since 2011. It combines practical learning and action for WASH in schools and environmental education. WASH FIT (2022), a risk-based participatory incremental improvement tool to improve infection prevention and control in health care facilities (HCF) was designed by WHO and UNICEF with significant input from experts from SWSC member organisations.

As part of phase III of SWSC, a series of external evaluations were carried out in 2023 using quantitative data (based on SWSC project Monitoring, Evaluation and Learning - MEAL process) and qualitive data (based on Key Informant Interviews and Focus Groups discussions) complimented with facility observations. A list of evaluations included in this synthesis are provided in Table 1 (see Sub-Chapter 1.3 Methodology and Process).

The SWSC considers evidence as an important milestone to document and prove the value of and the processes applied by the signature approaches. Through well-documented evidence, it is expected that informed decisions are made for further scaling of the approaches and for effective advocacy and learning with communities and decision-makers at local, national, and global levels. The Evidence Building Strategy serves as a guide for the Consortium to create and improve signature approach materials and documentation by the end of phase III and in preparation of phase IV. This synthesis is part of the Evidence Building Strategy (EBS) of the SWSC phase III[3].

1.2. Purpose

The purpose of this work is to synthesise the evidence and learnings of the final evaluations conducted for 13[4] projects implemented in 2023 in the framework of the SWSC phase III. This synthesis aims to inform future work, as well as the planning and implementation of phase IV of the SWSC.

1.3. Methodology and process

The development of the synthesis report included a comprehensive process using different methods:

Desk review of **standard** and **in-depth evaluations** of 13 SWSC projects in 11 countries (see Table 1). Standard project evaluations were carried out using moderate levels of effort and resources, while in-depth evaluations were carried out per signature approach, focusing on three projects with the highest potential for impact, scaling up, sustainability, and systems change. Both, the standard, and the in-depth evaluations, included quantitative data collected by the project teams on project results as part of MEAL system and financial data (results as of December 2022). This data was triangulated with qualitative information collected by evaluators from Key Informant Interviews, Focus Groups, and facility observations.

---

[3] The external evaluations respond to the Evidence Building Strategy of the SWSC and together with the Research Mandates and the Storytelling, this synthesis is a useful instrument for evidence building.

[4] Projects in Sudan – Swiss Red Cross and in Burkina Faso - Helvetas implemented in Phase III were not evaluated; thus, are not included in this report.

Table 1: List of evaluations reviewed and included in this synthesis:

Organisation/ Project	Evaluations		
	HCF	Blue Schools	Communities
Tdh/ India	Standard		Standard
Tdh/ Mali	In-depth		
Helvetas/ Benin	In-depth	Standard	Standard
Tdh/ Nepal	In-depth	Standard	Standard
SWISSAID/ Niger	Standard (*)	Standard	Standard
HEKS/ Niger	Standard (*)	Standard	Standard
HEKS/ Ethiopia (**)	Standard	In-depth	Standard
Fastenaktion/ Madagascar		In-depth	
CACH/ Cambodia		In-depth	
HEKS/ Uganda		Standard	Standard
Tdh/ Burkina Faso		Standard	Standard
CACH/ Ethiopia		Standard	
Tdh/ Myanmar			Standard
(*) The project did not implement the WASH FIT			
(**) Two projects (Oromia and Amhara) with a community and Blue Schools component each. In the Amhara project a HCF component was included too. Therefore, two standard project evaluation reports were submitted.			

Other documents, such as the Terms of Reference (ToR) of the final evaluations, the Water, Sanitation and Hygiene (WASH) Agenda for Change Building Blocks, Monitoring Data as per December 2023[5] (Baseline, Progress and Endline data for outcomes and outputs); SWSC indicators for non-WASH services and the SWSC Evaluation Guidance (Annex 3), which served as guidance for the final project evaluation ToRs. As part of the desk review process, the consultants also commented on draft versions of the in-depth evaluations and provided recommendations to be included in the final version of the reports.

The evaluation questions used for the synthesis are the same as the ones used for the final project evaluations responding to the six SWSC Evaluation Criteria (adapted from the OECD-DAC Criteria for evaluations): effectiveness, efficiency, sustainability, impact, relevance, and coherence.

Mapping and Quality Assurance: Using the questions of the SWSC Criteria for Evaluations, observations, analysis, and recommendations derived from the evaluation reports were mapped per project and per approach, including the communities' component. The mapping served as an important tool for observing tendencies, synthesising results, and identifying gaps in the evaluations. A qualitative assessment and rating of the robustness of the evaluations was carried out based on this mapping, to help visualise the strengths and weaknesses of the evaluations and to compare the quality of standard and in-depth evaluations. The mapping and the qualitative assessment and rating of the evaluations are in Annex 1.

Analysis: The OECD-DAC Criteria adapted in the SWSC Evaluation Guidance were used as the framework of analysis in both standard and in-depth evaluations. In the in-depth evaluation of Blue Schools, an additional tool "Enabling Environment Matrix" was applied by the evaluators. However, in this report to identify and document trends, the SWSC Evaluation Criteria was used as analysis and comparison "lens".

Triangulation: The analysis of the findings was carried out triangulating evaluation results with quantitative and qualitative information provided by the Consortium Management Unit (CMU). Also, the main trends were analysed by comparing the results of the different evaluations. Finally, the analysis was triangulated through the regular meetings with the CMU. These meetings allowed to verify, confirm, or redirect interpretations and

---

[5] The Endline Data included in this report is an updated version from the data included in the evaluation reports.

conclusions drawn from the analysis without undermining the quality and independent character of the evaluations.

Synthesis: The findings from the different evaluations were synthesised in this report presenting conclusions and recommendations at two levels: at the level of the **signature approaches and community component** for future programming of Phase IV and at the level of informing future **evidence building processes**.

1.4. *Quality assessment of the evidence collected through the evaluations.*

As part of the synthesis work, the quality of the information collected through the standard and in-depth evaluation reports was quantified using a scale of 10 points: a) the quality of data collection addressing all questions of the evaluation criteria; b) the quality and depth of analysis of the information; and c) the quality and depth of conclusions and recommendations. The results are presented in the following graphs:

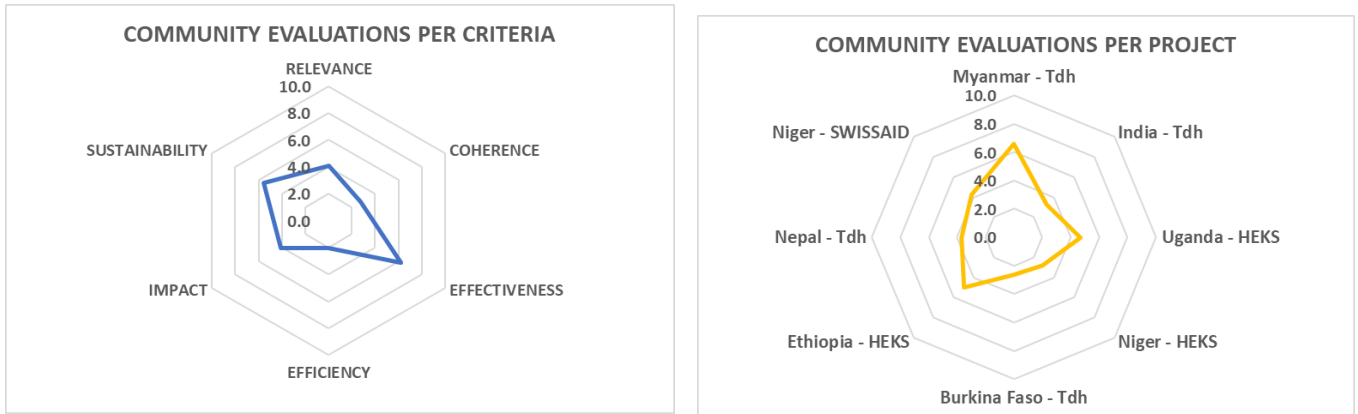*Graphs 1 and 2: Average quality of evaluations per criteria per signature approach*
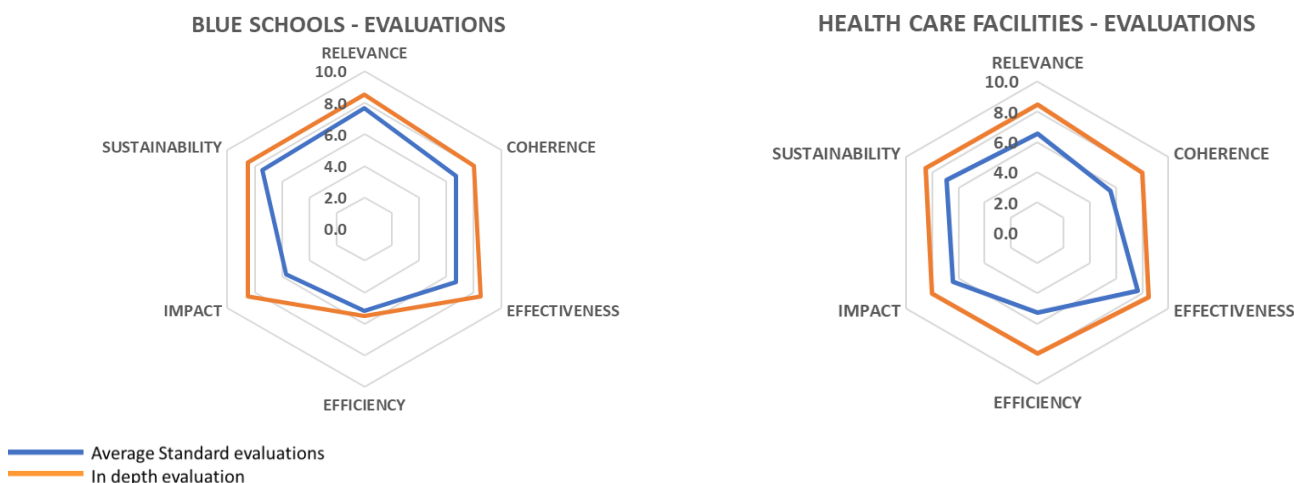
Criteria: 10 Points: 4 Points attributed to quality of the information collected; 3 Points attributed to the quality and depth of the analysis of the information; 3 Points attributed to the depth and quality of conclusions and recommendations.

It can be observed that the **general quality** of the information, analysis and recommendations of the **in-depth reports were higher than of the average standard ones**. The **strongest criteria** addressed by the evaluations is the **effectiveness one**. This can be explained by the fact that the evaluators had quantitative data (baseline and endline project data) available for triangulation with qualitative information building a more robust case of evidence in terms of data, analysis, and recommendations. Since that was not the case for each evaluation criteria, the graphs show important **weaknesses in the other criteria, mainly in coherence and efficiency**. This can be explained as follows: a) the questions **overlapped among different criteria** and resulted in an **apparent confusion on where to report results** (see relevance, coherence, impact and sustainability); b) there was **less evidence-based information collected**, making evaluators to rely mainly on **anecdotal information** (see impact and sustainability); and c) **difficulties to apply the information collected** to reach conclusions about the criteria (see efficiency).

Similarly, the OECD-DAC Criteria adapted in the SWSC Evaluation Guidance were used as the framework of analysis of **the community evaluations**. The quality of the community evaluation reports was also assessed using the same scale as for the signature approaches. In the case of the community component, **the quality of the evaluations** varies among projects as presented in the graphs below:

Graphs 7 and 8: Average quality of evaluations per criteria and per project

Criteria: 10 Points: 4 Points attributed to quality of the information collected; 3 Points attributed to the quality of the analysis of the information; 3 Points attributed to the quality of the recommendations.

It can be observed, that the **community component evaluations present more consolidated results** for the **effectiveness criteria** than for other criteria. The **efficiency criteria** have the lowest score. At the same time, it can be observed that there are differences in the quality of the evaluations between projects. The reports with the **highest scores have addressed all or most criteria; and have done either a separate evaluation report of the community component or have clear separate sections evaluating the community component**. In those with **lower scores**, **project interventions were limited and did not provide all the information necessary** to do an evaluation using the OECD – DAC criteria. In the future, **to ensure the quality** and the **comparability** of the **community component evaluations**, the SWSC Evaluation Guidance **should be applied fully** in all evaluations (see Sub-Chapter 3.2 - Coherence among SWSC community projects).

Taking into consideration these reflections, Chapter 2 presents a synthesis of the main findings of the Signature Approaches gathered by the evaluations per criteria. The findings of the community component are presented in Chapter 3.

1.5. Limitations of the synthesis process

This report is based on the information provided by the evaluation reports and endline data for outcome and output levels for each project. Any gaps in the information presented below may well reflect the existing gaps of the reports. Also, the synthesis highlights "generalisable" results to ensure a meta-analysis and avoids as much as possible to present results achieved by isolated efforts.

2. Findings on the signature approaches

2.1. Relevance

According to the SWSC Evaluation Guidance and based on the OECD-DAC Criteria for evaluations, **Relevance** is defined as "*the extent to which the **intervention's objectives and design respond to beneficiaries***, *global, country, and partner/ institution **needs, policies, and priorities***, *and continue to do so if circumstances change*".

> Blue Schools and the WASH FIT approaches are relevant because they respond to the priorities and needs of the communities and of those in charge of schools and HCFs; and because they are aligned at a "systems sensitive[6]" level with international, national, and local policies, standards, and priorities.

Relevance based on the needs of the communities and of those in charge.

The approaches **respond to the needs and priorities of communities and of those in charge of schools and HCFs**. For example, the evaluation in Ethiopia concludes that "*the school and surrounding communities perceive the project as useful and valuable*" (Ethiopia – CACH Evaluation). Also, according to the in-depth evaluation for Blue Schools, in Madagascar: "*the Blue Schools Approach is seen by stakeholders, including parents, as highly relevant to the school and students' needs*" (In-depth – Blue Schools Evaluation). Likewise, the in-depth evaluation for HCF concludes that "*The [WASH FIT tool and] process is seen as being relevant to both small HCFs and larger hospitals at national level in all three countries*" (In-depth - HCF Evaluation).

Evaluations also mention the **needs assessments conducted by the projects at initial stages**, where community members, as well as school and HCFs staff expressed their interest and need for Water, Sanitation and Hygiene services. For example, the evaluation in Nepal states: "*the project is relevant to the needs identified based on a study carried out by WaterAid*" (In-depth - HCF Evaluation) and the standard evaluation of Niger concludes: "*The bottom-up planning is a participatory process, in which areas with priority and urgent needs/problems in terms of water, hygiene and sanitation were formulated. The project is being implemented in response to all these vital needs and problems expressed by the population and the authorities in charge of managing the public water service*" (Niger – SWISSAID Evaluation). Also, **through the application of the approaches, projects were able to assess and respond to the needs of communities and local stakeholders** confirming the relevance of the approaches. For example, in Nepal, "*Project interventions were relevant, as they addressed the priorities and needs of HCF authorities and their perceptions collected, through their involvement in WASH FIT cycles*" (In-depth - HCF Evaluation). In Mali: "*Association de Santé Communautaire - ASACO and the Directeur Technique des Centres de santé - DTC from the health centres acknowledged the importance and relevance of WASH FIT to identify needs and prioritise actions, even if the process was perceived as slow*" (In-depth - HCF Evaluation).

Alignment of the approaches to international, national, and local policies, norms, and standards

The approaches are **aligned with WASH international, national, and local policies, priorities, and standards** such as: National WASH and Environment Policies, National Development Policies, Hygiene Strategies, National Health Policies and Plans, Education Plans, National Standards for WASH in HCF and the approaches are aligned to SDG 6.

The in-depth evaluation for HCF mentions for example: "*The WASH FIT tool and process have been widely welcomed at all levels within the health systems of Benin, Mali, and Nepal, from the HCF level all the way up to the Ministries of Health. It aligns with the existing hygiene strategy within healthcare, as documented in the*

---

[6] During Phase IV, the SWSC will explore integrating a Systems Strengthening Approach to support system actors to improve the quality and sustainability of WASH services and ensure that all populations are served. Thus, evaluations were requested to assess the degree to which the SWSC projects worked on systems strengthening, using a 5 – marker scale: System Negative, Systems Blind, Systems Sensitive, Systems Strengthening, and Systems Transformative. Systems Sensitive means that the approaches are: 1. Aligned with national plans for WASH services in Schools and HCF; 2. Approved by the local or higher level concerned government authorities; and 3. Participatory, whereby stakeholders are involved in assessing and determining priorities for improving WASH in institutions (Schools, HCF) and communities. Stakeholders list their priorities in an Improvement Plan and share with local government authorities and target communities. However, they are not yet implemented through government systems.

national health policies of all three countries" (In depth – HCF Evaluation). In Uganda, "*the approach is aligned to education and environmental protection priorities of National Development plan Phase three (NDP III); Menstrual Hygiene interventions were aligned to the Ministry of Education and Sports strategic objectives under the Draft National Strategic Plan for Menstrual Health and Hygiene 2021 – 2025, as well as the National Water and Sanitation Strategy (2019), whose strategic objective under thematic area 6 is to increase sustained access to quality and appropriate menstrual hygiene services through practices, facilities, and awareness*" (Uganda – HEKS Evaluation). Additionally, **the alignment of the Blue Schools approach with the Three Star Approach (TSA)** is observed in some countries. In Cambodia, "*the guideline is adapted from the TSA concept, that aims to move schools towards WinS national standards through a stepwise improvement on four key areas: drinking water, latrines and urinals, handwashing facilities, and environment and safety*" (In-depth – Blue Schools Evaluation) and in Madagascar, "*the Blue Schools meet all the conditions required to merit the WASH Friendly School Level III title, the highest equivalent to UNICEF's Three Star Approach*". (In-depth – Blue Schools Evaluation). **The alignment to the TSA provides opportunities for scaling-up** and for **ensuring the ownership of the approach by the local and national authorities**.

Analysis concerning **the gaps in the existing policies and strategies** and **how the approaches contribute to addressing those gaps has been limited** in most standard reports **under the relevance criteria**. Only the in-depth evaluations address these gaps, "*the Blue Schools Approach fills the gap in the existing policies by explaining not only what needs to be done, but how it can be done. The approaches propose how the different policies and plans can be realised.*" (In depth – Blue Schools Evaluation); *"[the WASH FIT] aligns with the existing hygiene strategy within healthcare, as documented in the national health policies of all three countries (Benin, Mali, and Nepal). In Benin and Mali, where there has been no previous tool in place to support improved WASH in healthcare facilities, WASH FIT is regarded as the preferred tool by the Ministry of Health (MoH). In Nepal, where an existing Monitoring System (MSS) is in place, WASH FIT is seen as a complementary tool and the integration of the WASH FIT indicators into the MSS is seen as the way forward. However, there is a need for a critical discussion on how WASH FIT is integrated into the MSS*" (In depth – HCF Evaluation). In general approaches do address gaps in the existing policies and strategies of the countries. Some evidence of this is observed under Sub-Chapter 2.5 - Impact in Transformational change in the health and education system.

Finally, evaluation reports do not respond consistently to the question of how ***projects responded or adapted to internal or external changes*** *over the course of its lifespan and how these adaptations affect its ability to respond to the needs and priorities of key stakeholders*" (See Annex 3 – Relevance – Question 3). The most **evident external change** that affected most projects was the **COVID 19 pandemic**. Projects had to adapt activities in response to the pandemic, in Madagascar for example: "*Because of COVID, some training activities had to be cancelled, and the related budget was used for other purposes*" (In-depth – Blue Schools Evaluation). In some cases, however, these adaptations helped strengthen hand hygiene in the projects. In India, for example "*the project suffered from external factors such as COVID 19 pandemic, which has also catalyzed the importance of infection prevention and control in healthcare facilities. This has enabled the project to reach out with its objective of improving WASH In HCFs*" (India – Tdh Evaluation) and in Mali: "*WASH FIT was followed but adapted during the COVID 19 response given the more specific needs during an epidemic. During the outbreak, to ensure improvement in WASH services, the tool was adapted into a rapid WASH FIT version and adopted by a WASH task force in health centres. It enhanced the implementation of the approach despite the restrictions and challenges*" (In-depth – HCF Evaluation).

Adaptation to other internal or external changes were not addressed by most standard evaluations and only the in-depth evaluation for Blue Schools mentions: "*Integral to the success of the Blue Schools projects is a remarkable flexibility in project design and implementation. Projects were able to amend their plans and strategies to meet school needs. Illustrating this adaptability was the case of HEKS/EPER and DORCAS in Oromia, Ethiopia, wherein a change from the initial idea of outsourcing to favouring construction by the NGO partner was more efficient. The team in Madagascar also facilitated linkages between the educational institutions, local artisans, and technical experts, thereby enhancing community engagement. This level of flexibility ensured that the projects-maintained resonance with the community, thus sustaining their contextual relevance*" (In-depth – Blue Schools Evaluation). Based on these findings, it can be concluded that the **COVID 19 pandemic triggered adaptations in most projects**. However, it is difficult to reach conclusions regarding other influencing external and internal factors affecting the projects and further analysis should be made in the future.

Conclusions

- Most of the evaluation reports focus mainly on the **relevance related** to the **WASH services** and not on other services offered by the approaches such as: Solid Waste Management, Gardening and Environment. Whereas it is considered that these additional services are relevant as well, **there is a need for stronger evidence that demonstrates how the non-WASH services respond to existing needs at various levels**.
- The **existing gaps in policies** (related to WASH and non-WASH services) should be better addressed in future evaluations under **the relevance criteria**. In the **impact criteria** an analysis **should be made on how the approaches respond to those gaps, strengthening the existing systems.**
- The issue of how the projects responded or **adapted to internal or external changes in the context** was not analysed in most standard evaluations (except for the COVID 19 pandemic)**.** It seems that for many evaluators, it was not clear how to assess 'internal or external changes'. The analysis of both internal and external changes **is necessary to assess the relevance of the approaches** and should be carried out during the next phase, if possible, every year, to ensure that these changes are included in the operational planning of the projects.

Recommendations for the next phase:

A **context analysis** should be carried out at the beginning of the next phase including an analysis of the existing policy frameworks and their respective gaps. This analysis should also include non-WASH components and policies. Project teams should **monitor the evolution and changes in the context and of policy frameworks** in the countries.

Project teams should also document **internal changes** and the measures taken to adapt to these changes during the lifespan project. These changes could be strategic (approaches); operational (timelines, resources, and scope); technical or technological, for example. Clear guidance should be provided on the **"internal changes" that should be observed and documented**.

Future evaluations should be more explicit in analysing how **non-WASH** services respond to **the needs of users** and in addressing **the existence of or the lack of policies related to non-WASH services.**

Observations and recommendations to the evaluation process:

- The SWSC Evaluation Guidance does not explicitly include the "**needs of users**" under relevance. This aspect should be included in the Guide.
- In some reports the analysis of "**relevance**" is mixed with **coherence, effectiveness, and impact** criteria. The Guide should be revised in such a way that there is more clarity about the questions per criteria to avoid overlapping or duplication of information.
- The aspect "***Contribution to the realization of local or national agenda***" fits better to **the impact criteria**. This aspect should be taken out of the relevance criteria.

2.2. Coherence

The SWSC Evaluation Guidance and the OECD-DAC define **coherence** as follows: "*The compatibility of the intervention with other interventions in a country, sector, or institution*". The OECD further distinguishes the difference between internal and external coherence as follows: *"Internal coherence addresses the **synergies and interlinkages between the intervention and other interventions carried out by the same institution**, as well as **the consistency of the intervention with the relevant international norms and standards to which that institution adheres. External coherence** considers the **consistency of the intervention with other actors' interventions in the same context**. This includes **complementarity, harmonisation and co-ordination with others**, and the **extent to which the intervention is adding value while avoiding duplication of effort**".*

> There is coherence in the implementation of the approaches by the different members of the SWSC. However, there is less evidence that projects are coordinating efforts with other development actors working either in the same geographical context or with the same approaches. The interest of local and national authorities in the approaches is evident, but they are also aware of the limitations they face in terms of financial resources, technical expertise, and logistics to fully implement the approaches.

Coherence among SWSC projects

The implementation of the approaches by SWSC members **is coherent with each other**. The efforts made by the SWSC to **coordinate and consolidate methods, approaches and tools** contribute to this result. In addition, most reports have followed the same evaluation guidelines and processes; thus, the information obtained demonstrates that in general, **interventions of the different SWSC members are harmonized** and **coordinated not only at the level of implementation** but also at the **level of monitoring** (FACET data) and **evaluation**. For the next phase, the projects of the SWSC will continue to be coherent among each other, also thanks to the existence of a Theory of Change for Blue Schools and for WASH in health care facilities.

Furthermore, in some cases, the evaluations demonstrate how the **signature approaches are coherent within the organisations themselves**. For example, in Burkina Faso: "*The WASH component of the PREMET II project is in line with Tdh's WASH policy. This was made possible by the implementation of the Blue Schools approach to create a protective environment (community and school) for children*" (Burkina Faso – Tdh Evaluation). Also in Niger: "*the project is aligned to SWISSAID's overall strategy: Outcome 1, Outcome 2 and Outcome 3 and the Blue Schools approach is being systematised in all SWISSAID Niger's water projects*" (Niger – SWISSAID Evaluation). However, not all evaluations assess to which extent the signature approaches are internally coherent or how they have been mainstreamed to other projects within the organisations.

Coherence with the interventions of other actors

In project countries, results of the evaluations show **different levels of coherence with other actors' interventions**[7]. On the one hand, evaluations confirm the **existence of efforts towards coordination and collaboration with other development actors working in the same geographical area**: In Madagascar for example, "*UNICEF, World Food Programme (WFP), and NGOs such as Adventist Development and Relief Agency (ADRA), Action Contre La Faim (ACF) and SAHI are implementing projects in the same district as Fastenaktion and the project has had some collaboration with ADRA and ACF for the supply of seeds and with Civil Society Organisations (CSO) / WWF for the collection of seedlings for reforestation. There was no formal agreement with the WFP concerning the canteen, but the water supply provided by Taratra in the Blue Schools supports the canteen provided by the WFP*" (In-depth – Blue Schools Evaluation). In Cambodia, "*the Blue Schools approach complements GIZ's Regional Fit for School Program in the country which promotes group handwashing and toothbrushing activities among students*" (In-depth – Blue Schools Evaluation) and in Uganda: "*collaboration with partners such as the Austrian Red Cross society, Dr. Dip foundation, Welt Hunger Hilfe (WHH), IRC that supported the project in the implementation of some of the activities both in schools and communities such as provision of technical guidance in setting up school gardens, facilitating knowledge sharing workshops also immensely contributed to achievement of the project targets*" (Uganda – HEKS Evaluation).

On the other hand, some reports highlight the **importance and need of seeking collaboration with other development actors**. For example, the in-depth report for HCFs, highlights "*USAID has been active within Benin, working on behaviour change for the prevention of infection in HCFs for the past five years, but it has not engaged with WASH FIT. In Nepal, USAID is the largest investor in the work of Improving WASH in HCFs, but it has not used the WASH FIT approach. However, in Mali USAID is working actively with the approach and took an active part in the national workshop for contextualizing the WASH FIT indicators. The lack of engagement of USAID with WASH FIT in both Benin and Nepal is a significant concern for any progress of the approach within other institutions. Advocacy to USAID is recommended to understand where there may be*

---

[7] Most of the standard evaluations address the existence of other programmes or projects in the same regions, but few provide evidence or examples of collaboration and coordination. Three evaluations: Tdh – Burkina Faso, SWISSAID – Niger and Ethiopia – HEKS - HCF do not include a chapter on coherence.

opportunities for the organization to adopt or integrate WASH FIT within existing or future programmes" (In-depth – HCF Evaluation).

Additionally, some evaluations highlight **the coherence of the approaches with initiatives of local governments**: In Niger, for example: "*the Blue Schools approach is consistent with communal plans, particularly from the text on the legal evolution of the water and sanitation sector adopted in January 2016 by the government and the decree on the transfer of State powers and resources to communes, regions and local authorities in the fields of Education, Health, Hydraulics and the Environment*" (Niger – HEKS Evaluation) and in Ethiopia, the evaluation confirms that "*the Blue Schools approach is included in the plan of action at the district level and project components are in the annual sanitation action plan and education sector monitoring indicators at district level, and there is replication within the district*". (In-depth – Blue Schools Evaluation) and "*district health offices, health centers and health extension workers were engaged in community triggering (demand creation for sanitation facility), hygiene promotion and implementation of WASH FIT at Tsigereda health center and Addis Amba Health post*" (Ethiopia – HEKS Evaluation). **Coordination and cooperation** with other **development organisations and with local and regional governments contribute** to stronger local **partnerships that can ensure sustainability**. Thus, it is important to continue strengthening efforts to consolidate partnerships with other actors.

Integration of the approaches in national and regional systems

The interest of governments, education, and health authorities to utilise the Blue Schools and WASH FIT approaches has been documented in the evaluation reports. The In-depth report for HCF states: "*Stakeholders in all three projects at national and regional levels recognize WASH FIT as a valuable tool with strong alignment with existing national policies and standards for WASH in healthcare facilities*" (In-depth – HCF Evaluation) and in Mali, "*WASH FIT is gradually becoming the reference tool for improving wash services in health centres. Training is provided by the regional health department*" (In-depth - HCF Evaluation). However, **despite the interest expressed by different government actors**, in some countries, **there are no concrete measures to integrate the approaches in the system**. For example, in Uganda, "*there is no verbal or written commitment by education authorities and no steps had been taken to utilize Blue Schools' practical exercises and technologies within the existing curriculum and/or extracurricular activities*" (Uganda – HEKS Evaluation). In Benin, the report concludes, "*the government is showing strong interest and commitment to the implementation of WASH FIT within the 12 departments. However, it remains to be seen if key stakeholders will fully integrate the framework into strategic and budgetary plans at all levels*" (In-depth HCF Evaluation). Key informants acknowledge **the limitations in terms of financial resources, technical expertise, and logistics of national, district and local governments to take up and fully integrate the signature approaches in their programming**. In Ethiopia for example, "*though there is an interest and exercise to push forward the (Blue Schools) signature approach, there is a need for well-developed functions and institutional strengthening to fully take over. The other constraint is the [lack of] technical expertise to fully function the approach as well as logistic constraints which are a critical limitation within government sectoral offices*" (Ethiopia – CACH Evaluation).

Finally, standard evaluation reports do not respond consistently to the question: "*Is there potential for scaling up in the national system/context?*". In-depth evaluations address this question under Sub-Chapter 2.5 - Impact in Transformational change in the health and education system.

Conclusions

- There is coherence in the implementation of the approaches among members of the SWSC.
- In some cases, the evaluations show how the organisations are mainstreaming the approaches within their activities in other projects or initiatives, but this issue has not been addressed by many evaluations.
- Even though there are examples of coordination and collaboration efforts with other development actors, most reports did not present the reasons why some projects were not able to coordinate or collaborate with other organisations. Few have done an in-depth analysis of what other actors are doing and how the project interventions and the approaches add value to those initiatives.
- In most projects, national, regional, and local government actors seem to be interested in using the approaches in their programming. However, there is a gap between "showing interest" and "being able to take on the approaches". Some important limitations are still evident in terms of financial resources, technical expertise, and logistics.

2.3. Effectiveness

According to the SWSC Evaluation Guidance and based on the OECD-DAC Criteria for evaluations, **effectiveness** is defined as follows: *The extent to which the intervention **achieved, or is expected to achieve, its objectives, and its results,** including any differential results across groups*. This section focuses mainly on the achievement of targets in terms of WASH and non-WASH services per signature approach comparing baseline and endline project data with qualitative information collected by the evaluations. Behaviour and attitude changes observed thanks to the projects are addressed in Sub-Chapter 2.5 – Impact: Significant changes perceived in schools and HCFs.

Results are positive and targets for both approaches have been achieved in most services by most projects demonstrating their effectiveness. Success factors for these results are, a) functional and quality WASH infrastructures; b) the involvement of stakeholders at all stages of the project cycle; c) enhanced capacities and skills; and d) effective advocacy.

Achievement of targets

The quantitative endline outcome and output data from 150 Blue Schools and 50 HCF (Annex 2) corroborated by the qualitative information gathered by the evaluations show the achievement of targets in both approaches across all projects. The graphs below show endline data and the compilation of progress on access to basic service level using the service-laddered-approach defined by JMP for WASH in institutions indicators collected by the projects:

Outcome level results phase III (indicators) as per JMP service level categories

Graph 3: Data collected in 150 Blue Schools*   *Graph 4: Data collected in 50 HCFs.*
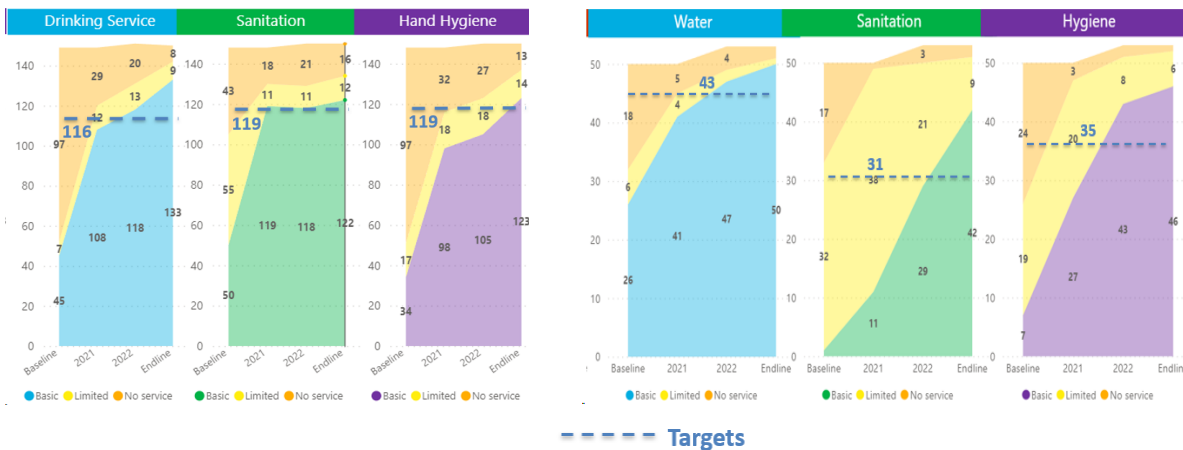
Project Monitoring Data: JMP Services - December 2023 *Insecurity in Sudan (30 schools) & Burkina Faso (4 schools) limited activity implementation and prevented project evaluations.

The achievement of "basic levels" on **basic access to Drinking Water stands out as the strongest achievement in most projects for both approaches**. This achievement reflects the efforts that all projects made to ensure the **functionality of water systems**, either by **investing in the construction or rehabilitation** of water points and water storage systems or by **ensuring the connection** of existing systems to the schools and HCFs. In Uganda for example, according to the endline information, all 7 target schools had attained "basic level of access to drinking water" (see Annex 2). These results are corroborated by the evaluation: "*in each of the schools there was at least one or two water collection points that include: borehole, tap stand or rainwater harvesting system and all the water was treated from the main source (hybrid systems) to ensure that it was safe for drinking*" (Uganda - HEKS Evaluation). Similarly, in Ethiopia, "*the water source is categorized as improved/basic because the HCFs are connected to the rural water supply systems of Angolala na Tera WASH Project (AWP), including rehabilitation of the handwashing sinks in the health post*" (Ethiopia – HEKS Evaluation); and in Mali, "*by 2022, all ten HCF had achieved basic service. Improved access to water in the health centres has also changed the way patients and visitors perceive the health centres*" (In-depth - HCF Evaluation)[8]. Also, projects made important efforts to ensure **safe drinking water**. In Burkina Faso, "*the project improved the quality of drinking water services in all 5 schools and a budget for maintaining the source was established*" (Burkina Faso – Tdh Evaluation). In Nepal, "*Water quality testing is carried out, and the report is publicly displayed in all the visited HCFs. Drinking water quality in all observed HCFs is within the National Drinking Water Standard*" (In-depth – HCF Evaluation); and in India, "*all the HCFs had improved water supply and water available on premises within 500m in the general areas. Drinking water in 8 out of 9 of the HCFs was treated. The project facilitated water quality testing prior to renovation/ construction of drinking water facilities and tested prior to opening for public usage after project interventions. All 9 HCFs were tested based on key parameters*" (India – Tdh Evaluation). Most evaluations assert that ensuring access **to safe and functional drinking water** is important to guarantee the **achievement of targets in the other services**.

Additionally, efforts to ensure **the Operation and Maintenance** (O&M) of the WASH infrastructures have been addressed in most evaluations. For example, in Nepal: "*teachers and office helpers were capacitated on management, operation and maintenance of water supply and sanitation services, developed O&M operation and management guideline and established O&M fund in the targeted schools*" (Nepal – Tdh Evaluation)*;* in Benin*, "of the HCFs visited, all have a functional improved water source and a dedicated operational and maintenance budget for the water supply"* (In-depth – HCF Evaluation) and in Cambodia: "*the future O&M is fully covered and does not pose a major issue for the schools because the project has also funded a portion of the cost. The schools and community, via in-kind and in-cash donations, will cover any shortfalls"* (In-depth Blue Schools – Evaluation). However, **O&M still needs continuation and reinforcement**, for example in Ethiopia: "*some interviewees indicated that engagement of stakeholders like local government in project planning,*

---

[8] Endline data in Annex 2 corroborate these findings.

implementation and Operation and Maintenance including follow-up was not as supposed to be and need to be improved" (Ethiopia – CACH Evaluation) and "*although funding plans have been made for O&M, and an O&M account has been established in seven out of eight HCFs [in Nepal] along with funding allocations in some, staff are not confident that O&M funding would continue in their HCFs if there were heavy cuts to the budget at municipal level*" (In-depth – HCF evaluation); thus, it is **still important to "***continue to expand engagement to include municipal and commune councils to allocate resources specifically for O&M of WASH facilities***" (In-depth - Blue Schools evaluation).

Sanitation: the endline data show that most of the evaluated Blue Schools' projects **have reached the targets** (basic levels[9] of service provision) and in the case of HCFs, only Benin and Ethiopia – HEKS remained at limited levels (See Annex 2). These data also show that the overall level of achievement in **sanitation** is **lower** compared to **water**. The qualitative information collected by the evaluations confirms these results explaining that in schools, "*some latrines are still lacking water*" (Ethiopia – CACH Evaluation) or "*they do not fulfill the menstrual hygiene requirements*" (Benin – Helvetas Evaluation). In the case of the HCF, the reasons why some projects reported limited achievements are: "*the toilet provides privacy to the users and was functional during the visit. However, there is no toilet dedicated for staff, lacks menstrual hygiene facilities. Hence, the health center's sanitation service falls under the limited services level*" (Ethiopia – HEKS Evaluation) and in Ethiopia: "*the hygiene and sanitation conditions were observed to be limited because of the cleanliness of the situation and no soap*" (In-depth – Blue Schools Evaluation).

Hand Hygiene: endline data demonstrate that **targets have been achieved for most Blue Schools** (except for Niger – HEKS and Uganda - HEKS) **and HCFs**. The results are supported by qualitative information provided by evaluations that show that most Blue Schools and HCFs have **functional hand-washing facilities with soap** and **are built close to the toilets**. Additionally, evaluations confirm that **hand-washing practices** have been **promoted and adopted** in most of the Blue Schools and HCFs visited. The **campaigns** launched in **response to the COVID 19 pandemic** have contributed to these results, for example in Burkina Faso, "*the percentage of schools with hand-washing facilities and water available maintained at 100% and the start of project coincided with actions by the State and its partners to combat the spread of COVID 19, including the distribution of hand-washing facilities*" (Burkina Faso – Tdh Evaluation); and in Benin, "*due to COVID 19, the number of hand hygiene stations (DLM) planned was doubled to ensure that pupils had sufficient hand-washing equipment*" (Benin – Helvetas Evaluation).

Non-WASH services in schools: Endline data (see below) and qualitative information from evaluations show improvements in **menstrual hygiene, gardening, and environmental practices** in Blue Schools, even if the levels of achievement vary among projects (details per project in Annex 2).

The graphs below show endline data and the compilation of progress on access to basic service level using the service-laddered-approach defined by SWSC for Blue Schools and HCF indicators.

---

[9] It is important to highlight that 'basic' service level for sanitation in schools does not include "latrine ratio" standards of 1:30 girls and 1:50 boys with urinals. Latrine ratio is included only in 'advanced'. Reaching the toilet ratio as per national standard is still a challenge; therefore, in phase 4 the SWSC added an indicator on that, considering that it is an essential aspect of sanitation in schools.

Outcome level results Phase III (indicators) as per SWSC service level categories

Graph 5: Data collected in 150 Blue Schools*   *Graph 6: Data collected in 50 HCFs*
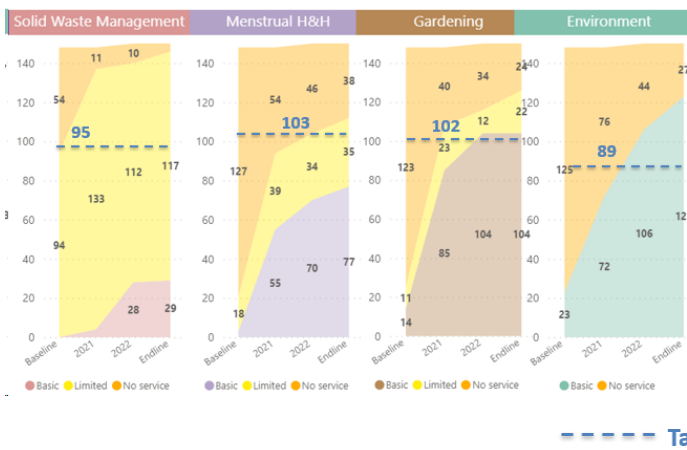
- - - - - **Targets**

Project Monitoring Data: SWSC Services - December 2023 *Insecurity in Sudan (30 schools) & Burkina Faso (4 schools) limited activity implementation and prevented project evaluations.

In Cambodia, "*45 Blue Schools meet basic service levels according to SWSC indicators: schools have access to Menstrual Hygiene Management, school gardening, and the environment*" (In-depth Blue Schools – Evaluation). In Burkina Faso, "*the produce from gardens is also being used in the canteens*" (Burkina Faso – Tdh Evaluation) and in Madagascar, "*everyone understands the severity of climate change and reforestation is one of the solutions being implemented near the school areas*" (In-depth – Blue Schools Evaluation). **Menstrual Hygiene** has lower levels of achievement than **gardening and environmental practices.** The reasons for that, according to interviewees during evaluations, have to do with prejudice against Menstrual Hygiene at schools, for example in Ethiopia: *"The community, particularly the parents of girl students resisted the application of Menstrual Hygiene Management (MHM) in schools. The reasons behind for parents' resistance to work with MHM included fears that girls may be subject of 'abuses.'"* (Ethiopia – CACH Evaluation). Another reason is that Menstrual Hygiene is not yet a priority for schools, for example in Benin: "*MH consumables are only distributed during MH day and the purchase of these equipment is not a priority for schools*" (Benin – Helvetas Evaluation). To address these challenges, the next **phase should continue promoting menstrual hygiene practices not only** at schools but also within the communities.

The weakest non-WASH service is **Solid Waste Management (SWM)[10],** even though in HCFs the achievements tend to be higher than those in Blue Schools. The main problems observed are **limited segregation at source**, for example in Uganda, where "*75.8% of schools did not have a separate dustbin for organic and non-organic waste;*" (Uganda – HEKS Evaluation) and inexistent **collection** and **treatment** of waste after segregation; which **incites the burning of waste**. There are no arrangements for waste **treatment** in the communities and there are still limited **technical capacities for collection and treatment** of solid waste at local institutions. In Burkina, for example, "*0 % of schools dispose waste in a protected on-site pit or by an off-site authority, and have organic and inorganic waste separated at source, collected regularly, and treated/disposed of safely*" (Burkina Faso – Tdh Evaluation); in Cambodia, "*Trash collection services are largely unavailable in rural Cambodia, and burning waste is a common practice in schools and communities. Schools have embraced the 3Rs concept of reduce, reuse, and recycle by introducing measures such as banning single-use plastics among the food sellers and promoting the use of banana or lotus leaves to wrap the foods instead. Despite significant improvement and efforts in solid waste management, the schools remain at limited service because the SWSC basic-service-level criteria does not permit the burning of waste*" (In-depth Blue Schools – Evaluation); and in India, "*in 89% of HCFs waste were treated/ disposed safely. None of the HCF found to dispose placenta safely, as per JMP indicators and 89% (8 out of 9) of the HCFs barring Jharkhali Primary Health Centers (PHC), had fenced and protected areas available for storing waste awaiting incineration and/or removal from the facility*" (India – Tdh Evaluation).

---

[10] *Working with Eawag, SWSC set the bar high in defining indicator for a "basic" SWM service in schools in absence of JMP guidance.*

Environmental cleaning at HCFs: **targets have been achieved** overall due to the existence of **cleaning protocols and HCF staff have learned to keep facilities clean**. In Ethiopia, for example, "*the health center has established and put in place protocols for cleaning. Staff with cleaning responsibilities have been trained in IPC. The health centre is providing basic service regarding environmental cleaning*" (Ethiopia – HEKS Evaluation) and in Benin, "*the provision of water, and in particular chlorinated water, for environmental cleaning has resulted in a steady improvement in service level*" (In–depth – HCF Evaluation).

Unintended Effects

Unintended effects were not identified by most the evaluations. Only some evaluations of schools addressed the following: **Community encroachment** on school latrines were reported in Uganda; **school gardening service was perceived as water-intensive** in Niger – HEKS and **school authorities seem to have difficulties maintaining this activity**. These unintended effects **cannot be generalized** and are isolated anecdotal information shared by key informants or focus groups participants of some of the projects. **Evaluation** reports **have not been able to address or register unintended effects of the approaches**, which does not mean that there are not any. At the level of the projects, it would be good **to monitor qualitatively**, the existence of unintended effects caused by the approaches.

Conclusions

- Results are positive and targets for both approaches have been achieved in most WASH and non-WASH services by most projects. The identified success factors are:
    - ✓ Access to **functional and quality WASH infrastructure**. If the functionality and quality of WASH infrastructure are ensured, including the O&M practice, the acceptance of the community will increase, the success in the implementation of the other services can be secured and the financial commitment of local governments can be triggered.
    - ✓ **Capacity strengthening** of and technical support to local institutions and organisations in **O&M**.
    - ✓ **Communication and Advocacy**, see also Sub-Chapter 2.5 – Impact: Advocacy activities.
    - ✓ **Involvement of stakeholders** at all stages of the project cycle and open dialogue with the community, see also Sub-Chapter 2.6 – Sustainability: Involvement in planning and steering of the approach.
- The weakest non-WASH service is Solid Waste Management (SWM) due to limited segregation at source, and inexistent **collection** and **treatment** of waste after segregation, which incite the burning of waste. Additionally, there are often no arrangements for waste **treatment** in the communities and **technical capacities for collection and treatment** of solid waste at local institutions are still limited.

Recommendations for the next phase

The next phase should continue promoting the approaches and ensuring institutional capacity strengthening **at local and national levels and by supporting governmental mechanisms for monitoring and evaluation**. **Systems strengthening** methods are still necessary to ensure that government actors not only assume their responsibilities, but also that they have the skills and knowledge to build, supervise and guarantee the O&M of the infrastructures. **Partnership with other development actors** is necessary to align with ongoing systems strengthening efforts.

It is important to address the challenges identified by evaluations in **Menstrual Hygiene Management**. The next phase **should continue promoting menstrual hygiene practices not only at schools but also within the communities**.

Regarding the **SWM component**, it will be important to **strengthen the dialogue and collaboration with local authorities to promote the collection and treatment of waste and to avoid the burning of waste.** Also, partnership with **local private sector stakeholders** could be established for the collection of recycled plastic, paper, and other types of waste. In schools, the transformation of organic waste into compost requires technical capacities and in HCFs, there is a need to address the proper treatment of bio-waste. Finally, **processes of enhancing circular economy practices require dialogue and planning with the local stakeholders**. Without a **consolidated and strategic approach to waste management**, the achievements will remain at limited levels and will not be sustainable. If possible, a **specific study on how to improve the management** of waste at local levels should be conducted.

Observations and recommendations to the evaluation process

- It is a good practice to provide **quantitative information (baseline and endline data) to the evaluators**, so that they can triangulate results with qualitative information obtained from their field work. This is an important strength of the evidence building process.
- Throughout the standard evaluation reports, there is no consistent analysis **of hindering and enabling factors for the achievement of targets**.
- Evaluation reports have not been able to address or register **unintended effects of the approaches**, which does not mean that there are not any. At the level of the projects, it would be good t**o monitor qualitatively and document systematically the existence of unintended effects caused by the approaches**.
- In the next phase, to strengthen the evidence-based data, it will be important to include in the monitoring system of the projects **qualitative indicators on how users perceive and use the services**.

2.4. Efficiency

According to the SWSC Evaluation Guidance and based on the OECD-DAC Criteria for evaluations, **Efficiency** is defined as: "*The extent to which the **intervention delivers**, or is likely to deliver, **results in an economic and timely** way*".

The evaluations did not produce robust evidence to assess the real efficiency of the approaches. However, it can be asserted that projects achieved results in a timely manner and without the misallocation of funds despite undergoing important challenges in implementation.

In the effort to assess efficiency, **evaluations analysed if results were achieved as planned in terms of time and budget**. In general, evaluations conclude that **projects delivered the results in a timely manner and without the misallocation of funds**. Endline data even demonstrate **overachievement in some projects** (see [Annex 2](#)). Even though projects underwent **various challenges during implementation, such as: COVID 19 pandemic and insecurity in some localities**; there are **no reported significant delays or misallocation** of funds in the projects that could have affected the results. Other challenges such as: **delays in approvals from government entities or in the delivery of contractors** are mentioned by the evaluations. The weaknesses of **local governments and organisations** can lead **to delays or to over expenditure**. As the aim of the approaches is to involve them at different stages of project implementation, **to guarantee efficient use of resources, projects should plan resources and timelines, taking these weaknesses into consideration**.

As part of the ToRs of the evaluations, **a cost analysis was requested to assess efficiency**. All (except for one) evaluations reports include costing information regarding: the **investments made by the projects per activity**[11]; and **the average costs per school or facility and per person**. Additionally, data on **the proportion of costs covered by local, national and project funds**[12] vary among the projects. For the Schools, only 2 evaluations include all the costs; 5 include partial information and 3 do not have information; and for the HCF, 3 include all the costs, 3 include partial costs and 2 do not provide information. Even though **important efforts have been made by project teams to collect and document the costing information per project**, **evaluations were not able to use this information to assess the "efficiency"** of the projects and to determine the **cost-benefit of the approaches**. The HCF in-depth evaluation concluded: "*There is no data available to indicate how the overall cost per beneficiary compares with similar projects in each country, which would be a more accurate measure of the economic impact of the signature approach. As the investment needs for each*

---

[11] a) Investments covered by the project: participatory orientation, training on planning and monitoring/supervision activities for stakeholders to lead WASHFIT and/or Blue Schools. Training on operation and maintenance of infrastructure and equipment and/or technical training for school staff, parents and students related to Blue Schools services or training for HCF management committee members and medical and non-medical staff related to WASH in HCF services. Behaviour-change activities and infrastructure / equipment improvements. b) Investments normally covered by the school or health care facility: Annual WASH supplies/consumables budget for routine hand hygiene, menstrual hygiene management, cleaning and waste management in schools or HCF. Include costs of cleaning services only if cleaners are not on the ministry or local government service payroll. Annual maintenance budget for preventative maintenance and repairs of WASH infrastructure / equipment.

[12] Analyse what proportion of the cost was covered by local (community/municipal) funds, by national government funds, by SWSC project funds, and by "other" non-SWSC project funds. Do not include salaries of SWSC project staff and school/HCF personnel receiving a formal salary on an institutional payroll as part of any of the above categories. Categories may be combined if annual budgets for WASH consumable supplies and maintenance are combined in practice. In case annual budgets are not known or deemed insufficient, the school/HCF stakeholders may propose amounts based on their experience and understanding of the context.

of the three projects were significantly different, it is also difficult to provide any constructive comparison of economic value" (In-depth - HCF Evaluation). The Blue Schools in-depth evaluation also asserts that: "*financial data is hard to compare among projects, as not all projects had the same starting point in terms of WASH service level*" (In-depth - Blue Schools evaluation presentation). As most projects faced similar challenges with the costing information, to come to conclusions, e**valuations relied for the most part on estimates, on perceptions or on general assumptions**, for example in Madagascar, "*stakeholders report a favourable cost-benefit ratio*" (In-depth – Blue Schools Evaluation) or in India, "*the relationship between inputs (including level of effort of human resources) and outputs are cost-effective: All the resources were utilized rationally with active involvement of key stakeholders*" (India – Tdh Evaluation). Finally, the in-depth evaluation for HCF concludes: "*To fully understand the efficiency of the financial investments made for each of the projects, a detailed financial evaluation and analysis would be recommended*" (In-depth – HCF Evaluation).

However, **information on costs allowed evaluations to identify important trends** related to **budgeting and funding that could contribute to an efficiency analysis**. On the one hand, as part of the evidence building process, **a research study on costing tools for WASH in institutions was launched** in partnership with the University of North Carolina. "*This study is being used to support municipalities prepare annual budgets recommended to achieve and maintain basic access. The study and its publication are intended to provide a roadmap for how cost data can be collected and applied to inform policy".* ([Research Study on Costing tools for WASH in institutions](#)). On the other hand, the in-depth Blue Schools Evaluation highlights **that projects were able to ensure local contributions**: "*The significant community contribution (in Ethiopia) was the enabling factor for this high-efficiency level in the implementation*" and asserts "*related also to efficiency, the WASH facilities were reported to be of excellent quality and robust, beyond that of standard government facilities. The projects leveraged substantial resources through government and community contributions for improvements in school playgrounds, gardening for income generation, and provision of pads to girls, as some examples*" (In-depth Blue Schools Evaluation). Yet this **information is very useful to understand the priorities of costing and budgeting efforts in the future** and the **need to ensure local contributions**, it does not demonstrate **how "efficient" were the approaches**. **Regular collection and documentation of costing information is a good step towards ensuring the proper analysis of the data**. However, at this stage this information does not directly respond to the question of "efficiency".

Conclusions

The data on costing was not necessarily used for assessing efficiency or making a cost-benefit analysis of the approaches. Thus, currently there is no robust evidence to assess the real efficiency of the approaches. However, it can be asserted that all projects achieved (or overachieved) results in a timely manner despite undergoing important challenges in implementation. The efforts made by the in-depth studies to use the available data to assess efficiency trends was commendable as the analysis provides information for ensuring balanced investments and the leveraging of local funds. A research study was also carried out on costing tools for WASH in institutions. These are good starting points to have reliable data for assessing efficiency in the future.

Recommendations for the next phase

- It will be important **to ensure the application of methodologies and processes for the reliable collection of all the financial information in all projects from the beginning** and **to use this information to assess and evaluate the efficiency of the projects**.
- To make a **worthwhile comparison of the efficiency of the projects**, it might be useful to conduct an **in-depth financial evaluation to assess how resources are being used to achieve results**. Additionally, it is important that **the assessment of efficiency considers** the relation between inputs and outputs, as well as the **proper allocation of financial, time and human resources**.
- **Projects are dependent on the commitment and efficiency of local and national stakeholders and weak partner institutions can reduce the efficiency of the projects**. Projects **should take these weaknesses into account when preparing the time-plan and budget for implementation**. Also, the systems strengthening process should include **strengthening the efficiency of local institutions**, whenever possible.

Observations and recommendations to the evaluation process

- **Question 1**: "*Signature approach costing exercise for potential integration of the signature approach in the health / education system. Working with the project team, determine the overall cost for each of the six categories and record the data in the Costing Worksheet* and **Question 2:** *For all categories analyse what proportion of the cost was covered by local (community/municipal) funds, by national government funds, by SWSC project funds, and by "other" non-SWSC project funds (specify)* of the SWSC Evaluation Guidance should not be included in the efficiency criteria and should only be used for costing exercises.
- If there is an interest in gathering evidence on the efficiency of the approaches, **an in-depth economic analysis / evaluation should be carried out in the next phase**.
- **Perceptions of benefits are important** and **should be collected not only by the evaluations but also should be monitored by the project teams**. Only a robust set of qualitative data can be considered in evidence building exercises and could be used for triangulation of results to measure efficiency.

2.5. Impact

According to the SWSC Evaluation Guidance and based on the OECD-DAC Criteria for evaluations, **Impact** is defined as: "*The extent to which the **intervention has generated or is expected to generate significant positive** or negative, intended, or unintended, **higher-level effects**.*"

It is early to have evidence on the impact of the approaches in the long-term, but the evaluations identified important trends that can lead to long-term changes. Even though evaluations were not impact studies, they were able to collect and analyse important changes and immediate effects attributed to the implementation of the projects and to the approaches. The information collected, however, was mainly based on the anecdotal experiences of interviewees and participants in focus groups. Thus, in general the results presented should be triangulated with quantitative information or with in-depth impact studies.

Significant changes perceived in schools and HCF.

The **most significant changes** perceived by **staff in schools and HCF and by community members** reported by the evaluations are the following:

- Increased **attendance rate of girls** in **schools** (Uganda, Niger SW, Niger HEKS, Ethiopia CACH, Ethiopia HEKS, Madagascar, Nepal, and Benin).
- **Improved relations** between **schools and HCF with local governments** (Madagascar, Cambodia, Nepal, Ethiopia HEKS).
- **Improved relations** between **schools and communities** (Uganda, Benin, Niger HEKS, Ethiopia CACH).
- **Improved dialogue** between **HCFs and communities** (Benin, Mali, and Nepal).
- **Improved environment of schools and HCFs** (Niger SW, Ethiopia CACH, Madagascar, Cambodia, Ethiopia HEKS, Nepal, Benin, and Mali).
- **Motivation of HCFs and school staff** (Madagascar, Cambodia, Ethiopia HEKS, Nepal, Benin, and Mali).
- **Improved management of HCFs** (Nepal, Benin, and Mali).

As these results reflect the perceptions of people interviewed, there is still a need to triangulate this information with other data sources to confirm them.

Changes perceived by the most disadvantaged populations.

Projects are being implemented in **hard-to-reach and vulnerable communities and populations**. Also, based on endline data 124 of 150 **schools have access for people with limited mobility or vision** (details per project in Annex 2). Based on observations and interviews, evaluation reports confirm that **the infrastructure**, such as toilets, **responds to the needs of people living with mobility disabilities**, such as children and the elderly; however, there is **no deeper analysis of how both approaches as a whole benefit these populations**. Thus, it is difficult to conclude if the available infrastructure is being used by people and children with disabilities.

Nevertheless, **there are changes perceived by women and girls thanks to the approaches**. On the one hand, evaluations show that **there is an increased participation and leadership of women** in the Blue

Schools and HCF WASH committees and in women's associations. In Mali, for example, "*The ASACOs have regained their proper role and responsibility. Local people, via their representatives in youth and women's associations, are being called upon and informed*" (In-depth - HCF Evaluation) or in Uganda, the evaluation concludes: "*thanks to the project, women participation in decision making as well as leadership in WASH services has increased*" (Uganda – HEKS Evaluation). **Issues related specifically to women such as menstrual hygiene in schools and pre- and post-natal services, breast feeding and menopause in HCF** are being addressed by the projects, in India: "*The majority of the beneficiaries in the intervention HCFs were female (approx. 60%) as all these HCFs provided primary health care services related ante natal care and post-natal care*" (India – Tdh Evaluation). Women and girls feel strengthened by the projects, in Benin, "*menopausal women are starting to speak up and schools can now openly discuss menstrual hygiene, relieving girls from concerns about managing their periods while at school*" (Benin – Helvetas Evaluation); and in Nepal, "*separate and safe sanitation facilities for girls, including menstrual hygiene management provisions built their confidence to talk about menstruation with their peers, teachers and parents*" (Nepal – Tdh Evaluation).

Changes perceived by local government staff.

The general perception of interviewed **local government staff is positive towards both appr**oaches as they perceive the **improvement of staff skills and capacities** in the implementation of the approaches, for example in India: "*advocacy efforts have led to greater awareness among local authorities and technical service managers of the issues surrounding WASH in health centres" (*India – Tdh Evaluation). In other cases, there is a **perceived sense of commitment**: *"the school authorities and local government have a sense of ownership towards the project interventions and are committed to the continuation of project interventions initiated by the project*" (Nepal – Tdh Evaluation); in Madagascar, "*Circonscription Scolaire- CISCO managers are committed to fulfilling their roles and responsibilities towards the schools, particularly regarding monitoring and supervision missions, which will aid in sustainability*" (In-depth – Blue Schools Evaluation). These changes are observed mainly in **those projects where the involvement of local actors in the process has been pursued or encouraged**. See also Sub-Chapter 2.6 – Sustainability: Involvement in planning and steering of the approach. As before, these are perceptions of people who participated in the interviews and focus groups and this information should be triangulated with other sources of information.

Transformational change in the health and education system

There are **important changes in the health and education systems thanks to the approaches**. Even though these changes cannot be attributed exclusively to the projects, **advocacy initiatives and cooperation with national authorities and other key stakeholders have contributed to them**. The most transformational change identified by the evaluations is **the integration of elements of the Blue Schools approach in the curriculum** in Burkina Faso, Niger, Benin, and Nepal. Additionally, **important principles of the Blue Schools and the WASH FIT approaches are anchored in national documents** such as: School Development Master Plan of the Provincial Office of Education (PoE) in Cambodia; in Nepal, *"WASH FIT costing developed from the project in Nepal has been used as a reference for developing a national costed roadmap for WASH in HCFs. This is a significant achievement to contribute to the national roadmap through the investments made by Tdh, despite other significant actors in play in healthcare" (In-depth – HCF Evaluation);* and in India, "*the government, through its Kayakalp program intends to improve Infection Prevention and Control in HCFs, but the program has its own limitations such as lack of WASH specific standards, assessment considered as an annual event, lack of accountability of HCF management. In 2022, Tdh with support from SWSC's Global Advocacy Fund (GAF) conducted a gap analysis exercise in collaboration with Indian Institute of Public Health. As a result of the gap analysis, an integrated guidebook on WASH indicators has been developed and Tdh team is advocating with the district health authority for its adoptions at the HCF level*" (India – Tdh Evaluation). Even though these are promising results, the **"Systems Strengthening"** analysis carried out by the in-depth evaluations show that there **is still a gap between changes in the law and the proper implementation of the approaches in practice**. Thus, **the integration of the approaches in the health or educational systems are not enough** to ensure the **expected impact and sustainability**. There is still a need to **further strengthen the system** and to **work in closer collaboration with national actors to ensure the accountability** necessary for governments to feel responsible for the proper application and implementation of the approaches. **Strong partnerships with national, district and local governments and with other relevant development actors** is a condition for systems strengthening and impact.

Replication and transfer of good practice to the community

A key assumption of the Blue Schools approach is that **children are "agents of change"** in their families and communities. There are examples from Ethiopia, Madagascar, Benin, Niger, Burkina Faso, and Nepal of **how children influenced the transfer of information and ideas from school to their families adopting some good practices promoted by Blue Schools**, such as **gardening, vermicomposting, menstrual hygiene, or handwashing**. In Ethiopia and Madagascar, for example *"Parents felt their children were excellent change agents, as the WASH clubs provided entertainment in community events with games, slams, and poetry. Community observations showed that many households had a handwashing station, a shower, and small vegetable gardens. Men built showers specifically for their wives and daughters for menstrual hygiene, which is rare because it is considered taboo"* (In-depth – Blue Schools Evaluation). In some cases, however, changes were not fully evident for the evaluators. For example, in Cambodia, "*Home visits by the researchers showed that waste management and home gardening are not widely practised in the community, suggesting the limited influence on families. The assumption that children are agents of change was not apparent*" (In-depth – Blue Schools Evaluation). Thus, **projects with a community component played a key role in supporting children** to become agents of change by promoting actions that encouraged children to share ideas with their families and communities through WASH clubs and school demonstrations and community events like games, slams, and poetry" (In-depth – Blue Schools Evaluation). In conclusion, without external support, children would not be able to be agents of change. **More research is required**.

Finally, **replication by other actors is evident in some countries**; for example in Mali, "*the WASH FIT approach is also supported by WHO, UNICEF, USAID, World Vision, IRC WASH and WaterAid*" (In-depth – HCF Evaluation) and in Nepal Tdh, "*together with WHO and UNICEF, is advocating to integrate WASH FIT in national policy and to practise and scale it up across a wider area*" (In-depth -HCF Evaluation) and in Uganda: "*The project team collaborated with OPM and UNHCR to organize interagency exchange meetings which attracted participants from CSOs (WASH, education, health, protection) to share lessons learned as well as knowledge on key issues in the community. This was a great step in ensuring the transfer of knowledge on the project signature approach as well as a platform for advocacy for key project aspects such as Menstrual Hygiene Management*" (Uganda – HEKS Evaluation).

Scaling up

A **strong partnership with local governments** or with **other local actors** is an important condition for **scaling up the approaches**. In various cases, **the replication of the Blue Schools and the WASH FIT** in other **neighbouring villages was observed**. Even though this replication cannot be attributed only to the SWSC projects, their contribution to these results is evident. In Ethiopia for example, "*the Angolelana Tera district officials replicated the Menstrual Hygiene rooms in 18 other schools, using their own funds*" (In-depth - Blue Schools Evaluation). In Nepal, "*the WASH FIT approach is being applied by Tdh partner in other districts*" (In-depth - Evaluation); in India, the evaluation has identified the "*potential for replication of the signature approach through the adaptation of National Guideline (Kayakalp) with international standards (WASH FIT) in other blocks of Sundarban region, which have similar types of geographical, topological, and socio-economic challenges*" (India – Tdh Evaluation); in Mali, "*thanks also to the strong support of the government, the WASH FIT Tool has been applied in 101 HCF nation-wide*" and "*Tdh is applying the WASH FIT approach in other sub-regions*" (In-depth - HCF Evaluation); and in Cambodia, the "*Provincial Office of Education (PoE) is promoting Blue Schools approach in other districts*" (In-depth – Blue Schools Evaluation). These examples demonstrate **that replication is taking place thanks to the SWSC projects** and **with the support and participation of national, district and local governments.**

As in the previous cases, these results cannot be attributed only to the projects and there is still work to be done to ensure that more collaboration and cooperation with other actors takes place in the geographic areas, where the projects are working to ensure that there is wider replication of the approaches by other actors.

Advocacy activities

Advocacy has been a core strategy contributing to many of the changes described above ([Significant changes perceived by the communities](#); [Changes perceived by the most disadvantaged populations](#); [Changes perceived by local government staff](#); [Transformational change in the health and education system](#)).

Advocacy work resulted in the mobilization of local or national funds or human resources to ensure the commitment towards O&M of infrastructures. In Nepal, for example, "*the advocacy work enabled some funding support from local institutions*" (In-depth - HCF Evaluation). In Madagascar, "*local stakeholders, including community members and staff of local governments spent resources for monitoring of the systems and for O&M*" (In-depth – Blue Schools Evaluation). Even though local or **national governments recognize** the importance of the approaches, **they have not yet committed to their implementation**. There is still a need to further **promote good practice of the approaches to ensure that local and national governments adopt and finance them and support their scaling up**. In Benin, for example, "*The government is showing strong interest and commitment to the implementation of WASH FIT within the 12 departments. However, it remains to be seen if key stakeholders will fully integrate the framework into strategic and budgetary plans at all levels*" (In-depth - HCF Evaluation) and the In-depth HCF – Evaluation concludes: "*While local governments in all three countries are broadly supportive of WASH FIT and are showing engagement with the projects led by Tdh and Helvetas, there is a lack of ownership of the signature approach. A continuation of dedicated resources for advocacy is required in Phase IV*" (In-depth - HCF Evaluation). Thus, **advocacy work must continue and should be strengthened** to ensure the buy-in of stakeholders at various levels. More on the topic: [Sub-Chapter 2.6 – Sustainability: Involvement in planning and steering of the approach.](#)

Innovation activities

The in-depth Blue Schools evaluation was able to identify **some innovations of the Blue Schools that contribute** to the realization of the outcomes: "*The Blue Schools have several innovative aspects, ranging from school-to-school exchanges and water quality testing to holistic improvements and creative teaching methods in Cambodia; technological in technical in Ethiopia and Madagascar*" (In-depth – Blue Schools Evaluation). In the **other evaluations there are isolated examples of innovations**. Thus, it is difficult to conclude that there has been an impact in this area. In the next phase, **it will be important as a consortium to continue sharing and documenting experiences about innovations and whenever possible apply innovative success stories** in other projects.

Conclusions

- Changes at the level of the communities and at the level of the local governments are perceived by those who participated in the interviews of the evaluations. There is no further evidence to confirm or triangulate these results.
- The approaches have benefited and empowered women and girls. Projects are being implemented in hard-to-reach and vulnerable communities and populations. Endline data for schools and some reports mention that the infrastructure, such as toilets, do respond to the needs of people living with mobility disabilities, such as children and the elderly; however, there is no deeper analysis of how both approaches as a whole benefit these populations.
- Replication and transfer of good practice in the communities is starting to become evident. Children seem to be playing a role in the application of the Blue Schools practices by their families and communities. Projects with a community component and with initiatives addressed to support children sharing their experiences with their families have been more successful in this regard. However, at this stage there is no hard evidence on the impact of such initiatives and there is a need for supporting children in becoming agents of change in their communities.
- Finally, the endorsement of good practice of the approaches at the level of local and national authorities is observed. Advocacy work resulted in the mobilization of local or national funds or human resources to ensure the commitment towards O&M of infrastructures. Even though local or national governments recognize the importance of the approaches, many have not yet committed to their implementation. Systems strengthening work must continue to guarantee the buy-in of stakeholders at various levels.

Recommendations for the next phase

To ensure that there is evidence on how the projects are benefiting vulnerable populations, such as elderly or children with mobility disabilities, **their voices should be included in future evaluations**.

To assess the impact of children's role in transferring good practice in their families, an in-depth study could be carried out in the future. Furthermore, **all Blue Schools projects should have a strategy to support children becoming "agents of change" in their communities** and work with their families and communities to ensure that children are successful in the application of the approaches at home.

The next phase should make sure to address the **perceived limitations to integrating the approaches by local and national governments presented** in Sub-Chapter 2.2 – Coherence: Integration of the approaches in the national systems. For example, to address the "**limited access to financial resources**", projects should continue **working with a system strengthening** lens to encourage the analysis of costs; supporting budgeting; promoting studies to determine appropriate revenue generation by local governments; and advocacy for increased allocations by national and provincial authorities. Additionally, efforts should be made **to provide technical assistance for the management, monitoring and maintenance of the systems and approaches**, as well as to **ensuring access to technical and technological resources** and in **the capacity building of staff at national levels**. **Systems strengthening and capacity strengthening should be a priority** in the next phase. This process should also involve other development actors to strengthen collaboration and coordination in the implementation of the approaches at local levels. Finally, **communication with the communities should aim at finding champions** who can help promote the approaches with other community members and **ensuring that communities are ready to demand their rights**. Systems strengthening approaches take time and resources, but in the medium term, they are key to scale up and to make sure there is long-term impact.

Observations and recommendations to the evaluation process

- **Impact results are based on perceptions derived from interviews and focus groups** and most evaluations **did not report on negative impacts at this stage**. It will be important **to monitor changes with qualitative data during project implementation.**
- The **analysis of systems strengthening is limited in most standard evaluations**. Considering the importance of this exercise, it might be worth considering **doing an analysis of systems strengthening through an in-depth study.**
- To consolidate the **evidence on the impact of advocacy efforts**, specific research or **in-depth study** could be carried out in the future**.**
- Most of the reports **did not identify or report on innovations**. **Experience exchange** on how SWSC members are **using innovations** should continue and **should be well documented** and made available to future evaluations.

2.6. Sustainability

According to the SWSC Evaluation Guidance and based on the OECD-DAC Criteria for evaluations, **Sustainability** is defined as: "*The extent to which the net benefits of the intervention continue or are likely to continue.*"

The sustainability of the results cannot be confirmed at this stage; however, the evaluations identified trends and enabling factors that can contribute to their sustainability. Participation of local authorities and other stakeholders in the planning, implementation and monitoring of the approaches is an important condition for sustainability. However, this participation should go hand in hand with systems strengthening processes, where projects take a facilitating role in empowering actors to own and take leadership of the interventions.

Involvement in planning and steering of the approach.

Most projects **involved different stakeholders in the planning and steering of the approaches**. In Blue Schools for example, **students, parents, teachers, WASH and Water User Committees and government officials were involved in the planning**, **monitoring, quality assurance and O&M of water points**. Similarly,

in **HCFs, care takers, staff and managers, health extension workers, as well as community leaders, water committees, local administrations, technical services, and canton chiefs were involved in different stages** of the implementation of the approaches, specifically in assessing, planning, steering, and monitoring the application of the WASH FIT and the O&M of water points. In some cases, they also **participated in the promotion of Hygiene and Sanitation practices in the communities**.

The **evaluation reports confirm** that this involvement **has a great potential for ensuring the sustainability** of the results as they can **guarantee their ownership by the local stakeholders**. In Nepal, for example, "*School Management Committee, Parent Teachers Association, child clubs, teachers, students, parents, local government authorities and community members were involved in the planning and steering of the project, which helped build their ownership, collaboration and contribution to the success and sustainability of the intervention. The school authorities and local government have a sense of ownership towards the project interventions and are committed to the continuation of project interventions initiated by the project*" (Nepal – Tdh Evaluation). In India, "*the main benefit of signature approach is that HCF authorities were on board from the very beginning of the project interventions, slowly but steadily they have been inducted into the process of improving WASH in Healthcare facilities and their involvement has generated ownership of the interventions. HCF authorities took ownership of training programmes for cleaning service providers by making all the cleaning staff available, provided logistical support such as training hall, projector, ICNs and medical officers facilitated sessions as resource persons in the training programmes.*" (India – Tdh Evaluation).

Additionally, **the participation of government officials in the planning and steering of the approaches** has led them to **acknowledge the benefits** and, in a few cases, to the **scaling up of the approaches**. In Benin, for example, even if Helvetas was not fully involved at the end of this process, "*the Institut National pour la Formation et la Recherche en Education (INFRE) and the Direction de l'Inspection et de l'Innovation Pédagogique (DIIP) have taken the lead on the approach to be adopted. They validated the document anchoring the Blue Schools approach in the curriculum. Following this document, a roadmap was drawn up for its implementation. The drafting of this document and the roadmap bear witness to the strong involvement of the school authorities in the planning and implementation of the Blue Schools concept. This is a real guarantee of institutional sustainability*" (Benin – Helvetas Evaluation). Also, in Niger, "*the full involvement of all managers of 22 of schools in all stages of project implementation (from planning to monitoring and evaluation of activities) was conducive to learning and replication among grassroots community structures with a view to improving local ownership of the products and services (works, equipment, and approaches). They can be considered precursors of sustainability*" (Niger – HEKS Evaluation).

These are some examples of how the **involvement of different stakeholders in the planning and steering of the approaches could lead to their sustainability**. However, these stories cannot be generalized, and, in some cases, **they remain at the level of anecdotal examples or assumptions**. It will be important to ensure the **monitoring of these initiatives during the implementation of the projects**, to have evidence on the extent to which the **participation in the planning and steering of the approaches leads to the adoption** of the approaches by communities and authorities.

Enabling factors and barriers to sustainability

It is too early for the evaluations to confirm the sustainability of results. However, most of the evaluations identified **enabling factors** that could contribute to the sustainability of the results and **barriers to sustainability that should be addressed** in the next phase. Among the **enabling factors**, the following can be applied to most of the projects:

- Access to **functional and safe WASH services** and **consistent O&M.**
- Active **involvement of the community** and other **stakeholders**.
- **Financial and In-kind contributions** from the communities.
- **Commitment and motivation** of the health centre **management and schoolteachers**.
- **Accountability and financial support** from National, District or Local **governments.**
- **Engagement of leaders** and local government authorities in advocacy initiatives.
- **Integrated monitoring and evaluation** in existing national systems

Although the services announced have been put in place, **maintaining them over the long-term remains** a major challenge in most of the projects. Some of the **barriers to sustainability** addressed by the reports are:

- **Lack of local technical skills for O&M by community members** and **officials**.
- **Recurrent turnover of trained technical staff,** public servants, and lack of handover mechanisms.
- **Allocation of available funds only to WASH** and not to non-WASH components.

The sustainability of the results depends on **how the projects, together with local and national stakeholders, capitalise on the above-mentioned enablers and address the barriers**. It is thus important, that local, regional, and national stakeholders **take ownership and responsibility** of the approaches and that communities, not only contribute to the implementation of the approaches but also mobilise themselves to ensure a genuine civic commitment to their sustainable operation.

Resilience and adaptability

The evaluations did not address in depth the question of *how resilient and adaptable the signature approaches are to dynamic and complex environments and changes in context*. Only the in-depth Blue Schools evaluation mentions that: "*schools need resources to adapt to these conditions, and it is important to focus on finding climate-resilient solutions together*" (In-depth - Blue Schools Evaluation). A couple of reports address the **adaptation of the projects to the challenges of the COVID 19 pandemic** (see Sub-Chapter 2.1 - Relevance: Adaptation); however, **no further analysis was made with regards to resilience and adaptability to climate change, population displacement or social unrest**. This analysis should be carried out **together with context analysis and projects should be able to monitor or conduct an in-depth study** on how the **approaches can contribute to resilience and adaptability of communities** and **users** facing challenges provoked by climate and by other external factors. See also Sub-Chapter 2.1 - Relevance.

Conclusions

The participation of local authorities and other stakeholders in the planning, implementation and monitoring of the approaches is a first step to ensure sustainability of the approaches. However, this participation should go hand in hand with systems strengthening processes. Governments at various levels must lead the processes related to the implementation of the approaches and should be accountable for the results. Duty bearers should have the resources – human and financial – to take on their responsibility. As the in-depth Blue Schools evaluation concludes: "*Information, accountability and resources are what governments need to ensure the sustainability of the approaches*" (In-depth – Blue Schools Evaluation).

Recommendations for the next phase

Advocacy plays an important role in systems strengthening. The next phase should focus on **consolidating advocacy efforts at the level of communities, authorities, and other stakeholders**. The multiplication of these efforts **should be encouraged by building the advocacy capacities of local and community actors**. Furthermore, continued **communication with and awareness-raising of local and national authorities** are still needed to find lasting solutions to the existing challenges.

The next phase should focus also on **system strengthening processes** including **commitment and motivation of the health centre management and schoolteachers**; **financial commitments** from National, District or Local governments; **engagement of leaders and local government authorities** in advocacy initiatives; **accountability** from local, regional, and national government structures and the integration of monitoring and evaluation systems in existing national systems. For that, **funds should be mobilised at various** levels and **in dialogue with various stakeholders**.

Observations to the evaluation process

- There is an overlap between the Question 1 (*To what degree were local government authorities and health or education officials involved in the planning and steering of the signature approach?*) of the **Sustainability** criteria with Question 4 (*Has the implementation of the signature approach caused transformational change in health/ education systems or norms? How?*) under **the Impact** criteria. It will be important to revise the SWSC Evaluation Guide to avoid duplication in the reporting.
- The evaluations did not address **resilience and adaptability indicators**. This topic could be better addressed through context monitoring exercises or dedicated research projects.

3. Results on the community component

This section presents the synthesis of 8 standard evaluations that included the community component of projects implemented by members of the SWSC in the following countries: Myanmar, Uganda, Nepal, India, Burkina Faso, Ethiopia, and Niger (2 projects). The following sections present the results per criteria of the community component.

3.1. Relevance

The community component is relevant because projects respond to the priorities and needs of the communities and the interventions align with SDG 6 and with national and local policies, standards, and priorities. Projects were implemented during the COVID 19 pandemic and adapted their activities to respond to the needs of the populations affected by it.

Contributions to the realization of national or regional development goals

The community component of the projects of the SWSC are considered relevant because **they align with SDG 6 and, in all countries, they align with national strategies**, such as "the National Strategy for Rural Water Supply, Sanitation and Hygiene (WASH)" in Myanmar (Myanmar – Tdh Evaluation); "Objective three of the National Development plan Phase three (NDP III)" in Uganda (Uganda – HEKS Evaluation); "the National Water Policy (PNE, 2016-2030); and the Environment, Water and Sanitation Sector Policy (2017-2027)" in Burkina Faso (Burkina Faso – Tdh Evaluation). In Ethiopia, "*the community component is fully aligned with the One WASH national policy which promotes community behavior change through safe disposal of feces through the construction and use of improved Household latrines, hand washing with soap (or substitute) and water at critical times*" (Ethiopia – HEKS Evaluation).

Relevance based on the needs of users and communities.

Even though the evaluation criteria do not include "the needs of the target groups" in the assessment of the Relevance criteria, all evaluations have reported that according to users and communities interviewed, the **projects are relevant because they meet their needs**. In Myanmar, "*the programme is noted to be relevant to the needs of beneficiaries and vulnerable communities*" (Myanmar – Tdh Evaluation). In India, "*the community water point was successful in meeting the need of the community. The needs for functional and quality water were evident and were met by the project*" (India – Tdh Evaluation). In Niger, "*the project meets the needs and problems identified insofar as it has made it possible to address community problems linked to the use of health services, hygiene and sanitation, essential family practices, not forgetting access to drinking water and latrines in communities*" (Niger – HEKS Evaluation); and in Nepal, "*the project design and implementation strategies were relevant to the local context for communities and according to local priority*" (Nepal – Tdh Evaluation).

Adaptation

One of the most important **challenges faced by the projects was the outbreak of the COVID 19 pandemic**. Three reports explain **how projects had to adapt their actions to better meet the needs of the affected populations**. In the case of Myanmar for example, "*Due to restrictions on movement and gatherings caused by COVID-19 and a recent political crisis, Tdh could no longer work directly with the healthcare facilities it operates. Therefore, Tdh has requested a budget reallocation and a 6-month extension for WASH in Community Intervention to expand access to improved household pit latrines and safe drinking water sources for vulnerable communities in informal settlements of Hlaing Thayar township*" (Myanmar – Tdh Evaluation). In Uganda, "*the COVID outbreak started at the inception of project in Bidi Bidi settlement. Thus, project awareness campaigns and distribution of hand washing facilities combined with a constant supply of water by constructing water sources such as stand taps, hybrid water supply systems and solar powered water supply systems saved a significant number of the population from contracting the disease*" (Uganda– HEKS Evaluation). In Niger, "*the main change that the project faced was the advent of COVID 19 in the first year of the project. To this end, all the stakeholders were involved in raising awareness*" (Niger – HEKS Evaluation). The other evaluations do not address the question of **adaptations to internal or external changes**.

Conclusions

- The community component is considered relevant by interviewed community members and focus groups participants. These results are based on anecdotal information and should be triangulated with other sources of information.
- The community component also aligns with international, national, and local development goals and objectives of the countries.
- Some projects have adapted to external changes in the context created by the COVID 19 pandemic. No other internal or external changes have been identified or documented.

Recommendations for the next phase

A context and policy analysis should be carried out to ensure that **internal and external trends are included** in the **operational planning of the projects**. The monitoring of context and policy frameworks in the countries will serve as important evidence on "relevance" for future external evaluations.

Observations and recommendations to the evaluation process:

- The SWSC Evaluation Guidance for communities **does not include the "needs of users"** under Relevance. This aspect should be included in the Guide.
- None of the projects responded to the question: **what could be done to improve relevance?** This question should be excluded from the guide since it does not seem to contribute to the analysis of the relevance of the projects.

3.2. Coherence

The evaluations do not provide the necessary evidence to confirm the coherence of the community components of the SWSC projects.

Coherence among SWSC community projects

There **is little evidence from the project evaluations as to how the community component** is coherent among SWSC projects. Even though the SWSC Evaluation Guidance for Communities was developed for external evaluations, not all project evaluations have used them. Thus, less coordination among SWSC members with regards to the community component is evident.

Coherence with the interventions of other actors in the same context

Out of 8 evaluation reports, only 2 evaluations address this question; 4 did not respond to the coherence criteria and 2 did not provide examples of how the project is coordinating activities with other stakeholders. Thus, **the results in this chapter cannot be generalized**. From those projects, where there is evidence of **complementarity and coordination with other initiatives**, the following examples can be drawn: In Myanmar, "*The project was consistent and coherent with other actors' efforts and interventions, e.g. the tools used to raise awareness about WASH, hand washing, health, latrine construction and borehole drilling. Tdh minimized duplication of services with other NGOs and service gaps in targeted areas.*" (Myanmar – Tdh Evaluation). In Uganda, "*training in community hygiene and sanitation promotion - house to house visits - transition from promoters to Village Health Teams (VHTs) in collaboration with UNHCR, IRC and the WASH/Health department. The project team worked with the district Assistant Water officer and Project Assistant - PHAST in building the capacity of the Water User Committee members to maintain the water points within their communities*" (Uganda – HEKS Evaluation).

Conclusions

Most of the evaluations did not address the coherence criteria; thus, no generalisations can be made regarding the coherence of the community component. It is difficult to assess whether the projects have adopted initiatives at local level to ensure coordination and collaboration with other stakeholders.

3.3. Effectiveness

Interventions at community level are considered effective by the evaluations since targets[13] have been achieved in most projects. Community mobilisation, participatory approaches and capacity strengthening prove to be important success factors that led to the results.

Achievements

Functionality and quality of water points: 5 out of the 8 projects evaluated have a water component. Most evaluations used baseline and endline quantitative data obtained from project teams as well as data collected by the evaluators through random surveys including interviews and focus groups. Based on this data, **all 5 projects have achieved the targets in terms of functionality and quality at point of use as per SWSC definition.** In India for example, "*Quantitative and qualitative data show that women members of the community revealed that their water accessibility has improved a lot after this intervention. 88.6% of the surveyed households reported that their water accessibility has improved in the last two years*" (India – Tdh Evaluation). In Niger, "*The majority of households in the area obtain their drinking water from a certain type of water source (86.67% in Soucoucoutane and 93.33% in Dankassari). Additionally, five drinking water filtration units have been built*" (Niger – SWISSAID Evaluation). Only in Uganda, the evaluations reported that some of the water systems were not functional or failed to provide safe water: "*94.4% of the drinking water service at the refugee camp have access to public tap; the majority of the water points were working but not all*" (Uganda – HEKS Evaluation).

Sanitation: 7 out of 8 projects have a community sanitation component. In all projects, evaluations highlight that **the achievement of the targets was successful in most communities**. In some projects, communities were **declared "free of open defecation"**: In India, for example, "*this intervention is effective in reducing the practice of open defecation in the community. The government has now declared these villages as open defecation free*" (India – Tdh Evaluation) and in Burkina Faso: "*in Ganzourgou, of the 5 villages involved, 4 have received End of Open Defecation Certification (FDAL). The construction of latrines and the hygiene and sanitation awareness-raising campaigns have enabled families to adopt good practices in terms of latrinisation*

---

[13] For the community component, the SWSC Evaluation Guide defines achievement of targets for water supply as follows: i) functionality and quality of water points per SWSC indicator definition and ii) Water Quality at point of use per SWSC indicator definition.

and abandoning open defecation, adopting hygiene and drinking water, improving the hygiene of their living environment and their health, the privacy and safety of members of households/concessions/villages. There have also been significant changes in children's health, such as a sharp drop in the incidence of diarrhoea" (Burkina Faso – Tdh Evaluation). In Niger: "*Most households in Dankassari are moving towards FDAL (93.3%)*" (Niger – SWISSAID Evaluation).

The other projects also facilitated access to improved and durable family latrines, achieving the targets. In two cases, the projects over exceeded their initial targets: In Niger: "*the project has facilitated access to improved/durable family latrines for 240 vulnerable households (against a target of 200) in the project intervention zone*" (Niger – HEKS Evaluation) and in Ethiopia, "*the project aimed to reach 1105 HH with improved sanitation services and hand washing practices. By June 2023, 3538 HHs had constructed latrines including a handwashing facility using local materials*" (Ethiopia – HEKS Evaluation). However, there are some examples where the latrines are not being used: in India, "*EcoSan latrines are not fully accepted by the communities, where both women and the elderly faced challenges using the toilets*" (India – Tdh Evaluation) and in Ethiopia, "*some of the latrines visited by the evaluators had collapsed*" (Ethiopia – HEKS Evaluation).

Hand Hygiene: 6 out of 8 evaluated projects had a hand-washing community component. **Nepal is the only project dedicated solely to hand-washing promotion in the communities and it achieved the targets**: "*Nepal achieved 100% household coverage with handwashing stations and became the first municipality in the country to be officially declared a total handwashing municipality*" (Nepal – Tdh Evaluation). In all other projects (except for Uganda), the reports present different methods to demonstrate that expected targets were achieved. In Niger, "*Handwashing with soap is practised by 14,343 people using latrines in communities*" (Niger – HEKS Evaluation); in Ethiopia, "*all interviewees knew the critical times of hand washing, and stated that they wash their hands at these times*" (Ethiopia – HEKS Evaluation); in Uganda, the targets were not achieved: "*theft of handwashing facility, loosening of COVID 19 protocols and lack of money to buy soap were mentioned as reasons for not achieving the expected results*" (Uganda – HEKS Evaluation).

Unintended Effects

No unintended effects were identified by the evaluations.

Conclusions

Evaluations show that results are positive, and targets have been achieved in most communities. The evaluations identified a set of factors that positively influenced the results. The following factors cannot be generalized and are context specific, but they should be considered as good practice for the implementation of future initiatives in the communities:

- ✓ Community mobilization
- ✓ Participatory approaches
- ✓ Establishment of Water user committees
- ✓ Women leadership
- ✓ Capacity strengthening
- ✓ Participation of local authorities
- ✓ Compliance with water tariffs
- ✓ Funds to cover costs of O&M
- ✓ Handwashing strategy and guidelines

Recommendations for the next phase

The next phase should concentrate activities on **community mobilisation, training, and capacity building**, and on ensuring **the O&M of the WASH infrastructures** through the mobilisation of financial resources and through capacity strengthening at management and technical levels.

Observations and recommendations to the evaluation process

- Evaluations were able to report achievements thanks to the use of **quantitative and qualitative information**. Thanks to the baseline and endline information of most projects, evaluations were able to provide evidence of results.
- Throughout the reports, there is no consistent analysis **of hindering and enabling factors for the achievement of targets**.
- In the next phase, it will be important to include in the monitoring system **qualitative indicators to monitor how users perceive and use the services**, so that evaluations have stronger evidence-based information and do not depend only on interviews and focus groups.
- Evaluation reports have not been able to address or register **unintended effects**, which does not mean that there are not any. Thus, it would be good to monitor qualitatively, the existence of **unintended effects caused by the projects in the communities**.

3.4. Efficiency

From 5 evaluations that assessed efficiency, results show that all projects made efforts to be cost efficient. No evaluation has identified any misallocation of funds. Finally, projects were carried out and finished on time.

Cost-benefit analysis

Evaluations **did not carry out an in-depth cost-benefit analysis of the interventions in the communities**. Thus, the results rely mainly on the **observations and assumptions of the evaluators**. Three (Niger – HEKS, India, and Burkina Faso) out of 8 evaluations did not address the efficiency criteria. The rest of the evaluations assessed efficiency using available information through observation and through interviews with project teams and community members.

Results show that **all projects made efforts to be cost efficient**. For example, projects shared resources through strategic partnerships to save costs, in Uganda, **"***the project has reduced expenditure on unstainable allowances for hygiene promoters since the allowances for VHTs were paid by UNHCR through its implementing partners*" (Uganda – HEKS Evaluation). In other cases, **projects relied on the participation and support of students or community members to reduce costs**. In Ethiopia, for example, "*there was no intervention carried out by staff members. All community interventions were implemented by students; thus, there was no staff costs for the community component*" (Ethiopia – HEKS Evaluation). Finally, **other projects used alternative options of implementation**, for example in Niger, "*instead of building new boreholes, it was decided to use existing boreholes to build new Mini-potable Water Supply Systems (MAEPs). This option saved funds for building more standpipes*" (Niger – SWISSAID Evaluation). In Nepal, the evaluation made a calculation of the cost per beneficiary and confirmed that the: "*implementation of the handwashing behavior change campaign was reasonably effective and inexpensive. The calculated cost per beneficiary was 0.69 NPR (0,00045 CHF) per person*" (Nepal – Tdh Evaluation).

No evaluation has identified any misallocation of funds. Finally, **community projects were carried out and finished on time.**

Conclusions

It is difficult to assess the efficiency of the community interventions with the existing information. However, it can be observed **that projects made efforts to be cost-efficient, to avoid over expenditure and to deliver on time.**

Recommendations for the next phase

To make a worthwhile comparison of the efficiency of the projects, it will be necessary to **conduct an in-depth financial evaluation per project.**

Observations and recommendations to the evaluation process

- Efforts were made by most projects **to assess efficiency of the implementations**. The information obtained is the result of observations and assumptions and **there is a need for a more robust collection of financial information during project implementation**. The use of indicators such as: "**cost savings**"; **"costs transferring" or "costs per beneficiaries" are a good starting point for analysing the efficiency of the projects**. However, there is a need for a **more systematic method to measure efficiency throughout all SWSC community projects applying the same indicators**. The indicators should not be used in isolation but within a framework of analysis that **proves cost-benefits.**

3.5. Impact

It is early to have evidence on the impact of the community projects in the long-term, but the evaluations identified important effects related to the improved access to WASH services that can lead to long-term impact. Women and girls have benefited most from the community interventions. The use of quantitative and qualitative data provides good grounding for evidence building; however, to ensure the validation of the results, the implementation of impact-studies is recommended.

Significant changes perceived by the communities.

Out of eight evaluations, two (Ethiopia – HEKS and Nepal - Tdh) did not address the impact criteria. In most of the cases, results relied on quantitative data collected **from baseline and endline surveys and were validated through interviews and focus groups**. It is too early to assess the long-term impact of the community interventions; however, **the evaluations identified the following changes** that resulted thanks to the contributions of the projects:

Improvement of quality of life, thanks to improved access to WASH services in the communities**:** in Niger for example, the changes perceived are "*improving the quality of life of users by improving the three basic essential services of access to drinking water, sanitation and hygiene*" (Niger – HEKS Evaluation). In Myanmar, "*the intervention has made a significant impact in improving the accessibility of improved drinking water. 88.6% households reported that their water accessibility has improved in the last 2 years i.e., after implementation of the project. Out of these households, a reduction in travel time to collect water was mentioned in 64.7% of cases*" (Myanmar – Tdh Evaluation) and in Burkina Faso, "*the effectiveness analysis showed a sharp reduction in the prevalence of diarrhoea among children under the age of 5*" (Burkina Faso – Tdh Evaluation).

Reduction of open defecation practices thanks to improved sanitation: As presented in the effectiveness section, in India and in Burkina Faso the project villages received the "**free of open defecation certification**" see Sub-Chapter 3.3- Effectiveness: Achievement of the targets. Also in Uganda, the evaluation concludes that "*community awareness campaigns on the importance of having a latrine in the household have significantly reduced the cases of open defecation that were associated with rampant cases of diseases such cholera, intestinal worms, Ebola and diarrhea among others*" (Uganda – HEKS Evaluation).

Benefits perceived by disadvantaged populations.

Community projects **are being implemented in vulnerable, hard-to-reach communities**. The community interventions **have benefited mainly women and children by addressing their needs and by empowering them**. In Niger, "*The chore of fetching water is mainly carried out by women and children in rural areas. Access to drinking water has reduced this chore, giving women more time to devote to other activities and enabling children to attend school more often*" (Niger – SWISSAID Evaluation) and in Myanmar, "*overall, the programme has positively impacted the targeted beneficiaries including pregnant women and children under five years and the vulnerable communities in terms of quantity and quality of WASH facilities*" (Myanmar – Tdh Evaluation). Also in Uganda, "*the project has increased women participation in decision making as well as their leadership in WASH services*" (Uganda – HEKS Evaluation). Furthermore, in Uganda, the project has benefited refugee communities: "*The project has also contributed to increased access to safe water in both the refugee and host communities*" (Uganda – HEKS Evaluation) and in Burkina Faso the project benefited the elderly and the

disabled populations: "*data shows that in 67.2% of households, latrines are adapted for the elderly or disabled. This shows that inclusion is considered in households*" (Burkina Faso – Tdh Evaluation).

The reports **did not report any other disadvantaged groups** that have perceived the benefits of the projects.

Unintended effects

None of the evaluations identified unintended effects.

Conclusions and recommendations for the next phase

- Changes at the level of the communities are perceived. The evaluations use quantitative and qualitative data to demonstrate the changes.
- The projects have benefited and empowered women and girls. In some few cases, project addressed other vulnerable groups such as refugees, the elderly and the disabled.
- The impact of the community components focuses mainly on the users and less on decision-makers and government authorities. Thus, there is a gap in the information, as it does not assess the changes perceived by the local authorities.

Recommendations for the next phase

In the next phase, projects should aim at **systematically monitor changes at community levels, so that unintended (positive or negative) effects can be documented.**

If the **SWSC wants to assess the long – term impact and the sustainability** (see Sub-Chapter 3.6 - Sustainability) of the community component, **impact studies should be carried out in the future.**

Observations and recommendations to the evaluation process

- The application of **baseline and endline information to measure and quantify changes has been very useful** for observing and analysing trends regarding changes in communities.
- The **evaluation criteria for the community component does not include changes perceived by users**, governments and other stakeholders and **the impact of the advocacy work has not been included in these criteria.** It would be important to consider including these two questions in the evaluation criteria to make sure that there is a holistic analysis of the impact of community interventions.

3.6. Sustainability

The sustainability of the results of community component cannot be confirmed at this stage; however, the evaluations identified good practices that can contribute to their sustainability. Participation of local authorities and other stakeholders in the planning, implementation and monitoring of the approaches is an important condition for sustainability; nevertheless, it needs to go hand in hand with systems strengthening processes.

Involvement in planning and steering of the projects.

As all projects have addressed the sustainability criteria, it can be concluded **that most of them involved different stakeholders in the planning and steering of the projects**. On the one hand, projects ensured the **participation of local authorities**. For example, in Myanmar: "*Tdh has been* engaging in strategic *collaborations and dialogues with local authorities and community-based WASH committees to deliver coordinated WASH services to the community*". (Myanmar – Tdh Evaluation). In India, "*the local government authorities were involved closely in the intervention made under the project*" (India– Tdh Evaluation). On the other hand, **projects encouraged the participation of community organizations**: in Myanmar: "*Tdh has continued to work closely with the WASH committee members in operations and maintenance of the WASH facilities to advocate longer term planning and guidance of the water and sanitation system. This will ensure that the water and sanitation systems and other associated modalities are conducive to supporting any potential future strategy*" (Myanmar – Tdh Evaluation). In Niger, "*the project is multi-stakeholder, so close collaboration*

has been established between the various stakeholders, and a consultation framework has been set up to serve as a forum for discussion and project guidance, particularly for the various stages of the project" (Niger – SWISSAID Evaluation). Finally, in Uganda, "*engagement with the community and district structures at the inception of the project played a fundamental role in the acceptability and ownership of the project in the target communities. This has enabled the successful maintenance of project infrastructure such as sanitation and water facilities beyond the project period since the water user communities collect enough funds to repair and maintain the facilities in case, they are faulty*". (Uganda – HEKS Evaluation). There is an **implicit assumption that the involvement of local stakeholders is a condition to sustainability**. However, evaluations do not assess **the weakness and fragility of, and the challenges faced by the local institutions and organisations that can be a risk to the sustainability of the projects**. Thus, even though the results look promising, the next phase should focus on **continuing strengthening local institutions and organisations** to ensure that the results achieved are maintained in the long-term.

Enabling factors to ensure sustainability.

It is too early for the evaluations to assess the sustainability of achievements and benefits. However, most of the evaluations **identified enabling factors or good practice** that could contribute to the sustainability of the project interventions. The following can be applied to most of the projects:

- **Application of community-based participatory approaches** (Niger SW); strengthening local capacities to ensure community-led development initiatives (Myanmar) and capacity strengthening of community members in O&M of water points (Niger – HEKS, Uganda, Burkina Faso, and Niger – SW).
- **Formation and strengthening of local community structures** such as the water user committees (Uganda and Ethiopia).
- **Promotion of behaviour change activities** (Myanmar and Niger HEKS); awareness raising, information sharing and advice (Burkina Faso).
- **Setting up of water user fees** for economic sustainability (Uganda, Nepal) and O&M Funds (India).

Conclusions

- The **ownership of local authorities and community members** of the planning, implementation and monitoring of the community initiatives is an important condition for sustainability.
- **Community mobilization and capacity strengthening** are important conditions to ensure the ownership of the initiatives by the community members; for setting up O&M funds and for lasting behaviour change.

Recommendations for the next phase

Local institutions and community organisations need to be strengthened to ensure that they take ownership of community interventions. Such processes take time; thus, the next phase should focus on continue **applying systems strengthening processes** also for the community components.

Awareness raising and promotion play an important role in the sustainability of the interventions. The next phase should focus on **consolidating promoting the need for O&M** funds and the benefit of behaviour changes in the communities together with authorities and other stakeholders. **Awareness-raising of local and national authorities** is still needed to find lasting solutions to the existing challenges.

Finally, the next phase **should focus also on strengthening the monitoring and technical capacities** of the local stakeholders to ensure the sustainability of the systems.

Observations to the evaluation process

- Even though the question: "involvement of stakeholders in the planning and steering of the projects" is an important condition to sustainability; it might not serve the purpose, if it is not addressed from a system strengthening perspective. That means that there are **other institutional and organizational factors that might affect the sustainability of the projects even if stakeholders participate in the planning and steering of the projects**. Thus, the **indicator for these criteria should be revised**, so that future evaluations address the sustainability criteria with a systemic view.

4. Programmatic Conclusions and Recommendations

Blue Schools and the WASH FIT approaches are considered **relevant** because they **respond to the priorities and needs of the communities and of those in charge of schools and HCFs**. The approaches are also **aligned with international, national, and local policies, standards, and priorities**. Similarly, the **community component** is considered relevant since **projects respond to the priorities and needs of the communities and the interventions also align with SDG 6 and with national and local policies, standards, and priorities. Context and policy analysis** are important **to assess the relevance of the approaches**; thus, **they should be carried out at the beginning of the next phase and if possible, updated every year**, to ensure that **external trends are included in the operational planning of the projects**. This analysis should also include **non-WASH components** and **policies**. Additionally, **the gaps in the policies** should continue to be addressed in the future. The **monitoring of context and policy frameworks** in the countries will serve as important evidence on "relevance" for future external evaluations. Project teams should also **document measures taken to adapt to internal changes (strategic, operational, technical, and technological)** during the lifespan of the project. **Clear guidance** should be provided on how to identify, observe and document **internal changes**.

There is **coherence** in the implementation of the approaches **by members of the SWSC**. The efforts made by the SWSC **to coordinate and consolidate methods, approaches and tools** contribute to this result. In the case of the **community component,** there seems to be **less coherence among projects of the SWSC**. To ensure coherence of the community component **a unified guidance for the evaluation of the community component** (provided in the SWSC Evaluation Guidance) should be **followed by all members of the SWSC**. There should be clarity in terms of **processes, methods and expected results in the evaluation of community interventions**.

In some cases, the evaluations demonstrate how **the signature approaches, and the community component** are **internally coherent** within the organisations. However, **internal coherence has not been addressed** by many evaluations. To ensure **internal coherence**, members of the SWSC should address the importance of **mainstreaming the approaches within the organisations, for example in other projects, countries, or regions where the organisations are active.**

In the implementation of the Blue Schools and the WASH FIT approaches, **coherence with efforts of other development actors working in the same geographical context or with the same approaches varies** among projects. There are important examples that **show collaboration and coordination with other initiatives**. To ensure that there is a stronger coherence with activities at the local and district levels, the **projects should continue making efforts to consolidate local partnerships, not only with government institutions but also with other development organisations and actors**. **Promotion** of the approaches, **capacity strengthening and technical support** play an important role to ensure **their commitment to adopt and apply the approaches**. The next phase should continue these efforts.

Regarding the community component, there are also some examples that show **complementarity and coordination with other initiatives**; however, **they are limited**, so no generalisations can be made as it is difficult to assess whether the projects have adopted initiatives at local level to ensure coordination and collaboration with other stakeholders. In either case, **mapping all relevant stakeholders** and **existing local and national initiatives** is important to develop **engagement and advocacy strategies** with these actors ensuring the consolidation of coordination and collaboration efforts. **Documenting these efforts in monitoring reports** will be useful evidence for future external evaluations.

In most projects, national, district and local government actors seem to be interested in **applying the approaches in their programming**. However, **there is a gap between "showing interest" and "being able to take on the approaches".** Some important limitations in terms of **financial resources, technical expertise, and logistics are still evident**. The next phase should continue focusing on **transforming the project design** from **"systems sensitive" to "systems strengthening**;" that means **addressing the limitations expressed by the governmental actors** and continuing **advocacy efforts to strengthen their commitment to adopt and apply** the approaches.

Results are positive and targets for the Blue Schools and WASH FIT approaches have been achieved in WASH services and in most non-WASH services (except for Solid Waste Management) by most projects demonstrating that projects are **effective**. Most evaluations assert that ensuring access **to safe and functional drinking water** is important to **guarantee the achievement of targets** in the other services. Additionally, efforts to ensure **the Operation and Maintenance (O&M) of the WASH infrastructures** is considered a success factor. Evaluations also confirm that **sanitation and hand-washing practices** have been **promoted and adopted** in most of the Blue Schools and HCFs visited, observing important levels of behavior changes. The campaigns launched, **especially in response to the COVID 19 pandemic**, have contributed to these results. Other identified success factors are, a) functional and quality WASH infrastructures; b) the involvement of stakeholders at all stages of the project cycle; c) enhanced capacities and skills, and d) effective advocacy. There are still some **challenges** to **Menstrual Hygiene Management** identified by the evaluations. The next phase **should continue promoting menstrual hygiene practices** not only at schools but also within the communities. The weakest non-WASH component in Blue Schools and HCFs is **Solid Waste Management**. It is necessary to strengthen the dialogue and collaboration with local authorities **to promote the collection and treatment of waste.** The application of techniques for sustainable solid waste management requires **continued follow up and technical and management capacities and skills.** Likewise, **processes of enhancing circular economy practices require dialogue and planning with the local stakeholders.** Without a **consolidated and strategic approach to waste management**, the achievements will remain at limited levels and will not be sustainable. If possible, a **specific study on how to improve the management of waste at local levels should be conducted**.

Interventions at community level are also considered **successful and effective** by the evaluations since **targets have been achieved in most projects**. **Community mobilisation, participatory approaches** and **capacity strengthening** prove to be important success factors that led to these results.

Unintended effects were not identified by most evaluations. Only some evaluations of schools addressed the following: **Community encroachment** on school latrines were reported in Uganda; **school gardening service was perceived as water-intensive** in Niger – HEKS and school authorities **seem to have difficulties maintaining this activity**. These unintended effects cannot be generalized and are isolated anecdotal information. Similarly, no **unintended effects were identified** by the **community evaluations**. Thus, in the next phase, projects **should aim at systematically monitor and document** unintended (positive or negative) effects in schools and HCFs.

Finally, to ensure the effectiveness of future projects, the next phase should continue p**romoting the approaches, and strengthening community mobilisation initiatives**. As part of the **Systems Strengthening** approaches, institutional **capacity strengthening strategies** at national and local levels and **supporting governmental mechanisms for monitoring and evaluation** need to continue. Furthermore, methods are still necessary to guarantee that government actors not only **assume their responsibilities**, but also that they **have the skills and knowledge to build, supervise and guarantee the O&M of the infrastructures**. **Partnership with other development actors is necessary to align with ongoing systems strengthening efforts**.

In the effort to assess the **efficiency** of the projects, **evaluations analysed if results were achieved as planned in terms of time and budget**. It can be asserted that **projects achieved (or overachieved) results** in a **timely manner and without the misallocation of funds,** despite **undergoing important challenges** in implementation such as the COVID 19 pandemic and insecurity in some localities. It is, however, difficult to reach conclusions on the **efficiency of the community interventions** with the existing information. **Evaluations did not carry out an in-depth cost-benefit analysis of the interventions** in the communities. Thus, the results rely mainly on the **observations and assumptions** of the evaluators. However, it **can be asserted that projects made efforts to avoid the misallocation of funds and to deliver results on time**. Projects are dependent on the **commitment and efficiency** of local and national stakeholders and weak partner institutions can reduce the efficiency of the projects. Projects **should take these weaknesses into account when preparing the time-plan and budget for implementation to avoid delays or additional costs in operations**. **Systems strengthening processes should also envision strengthening the efficiency of local institutions, whenever possible.**

Even though important efforts have been made to use costing information, evaluations were not able to use this information to assess the efficiency of the projects and to determine **the cost-benefit of the approaches**. Nevertheless, **costing information allowed evaluations to identify important trends** related to **budgeting and funding** that could contribute to an **efficiency analysis**. Yet this information is very useful to ensure local and national contributions, it does not demonstrate how efficient were the approaches.

In the next phase, it will be important that project teams **ensure the application of methodologies and processes for the reliable collection of all the financial information from the beginning**, so that this information is used **to assess and evaluate the efficiency of the projects**. To make a worthwhile comparison of the efficiency of the projects, it might be useful to conduct **an in-depth financial evaluation to assess how resources are being used to achieve results**. Additionally, it is important that the assessment of efficiency considers **the relation between inputs and outputs**, as well as **the proper allocation of financial, time and human resources**.

It is early to have evidence on **the impact of the results in the long-term**, but the evaluations have identified **important anecdotal trends that can lead to longer-term changes**, such as: **increased attendance rate of girls in schools; improved relations between schools and HCF with communities and local governments; improved environment of schools and HCFs; and motivation and improved management of HCFs and schools.** Furthermore, the approaches have in general **benefited and empowered women and girls**. The benefits of the approaches for other vulnerable populations have not been assessed widely by the evaluations. **Changes at the level of local governments** are perceived by those who participated in the interviews of the evaluations. There is no further evidence to confirm or triangulate these results. Thus, to evaluate the impact of the approaches, the results presented should **be triangulated with quantitative information or with in-depth impact studies**. Also, to ensure that there is evidence on **how the projects are benefiting vulnerable populations** such as women, elderly or children with mobility disabilities, their voices should be included in future evaluations.

Likewise, **in the case of the community projects**, evaluations identified important **effects related to the improved access to WASH services** that can lead to long-term impact, for example: **improvement of quality of life of women and girls thanks to improved access to WASH services in the communities**; and the **reduction of open defecation thanks to improved sanitation**. The use of **quantitative and qualitative data** in the community evaluations provides **good grounding for these results**; however, there is still a need for **validating the results.** The implementation of **future impact-studies** could serve this purpose.

Replication of activities and **the transfer of good practice in the communities are starting to become evident**. **Children seem to be playing a role in the application of the Blue Schools initiatives by their families and communities**. Projects with a community component and with initiatives addressed to support children sharing their experiences with their families have been successful in this regard. However, at this stage there is **no hard evidence on the impact of such initiatives** and there is still a need **to support children in becoming agents of change in their communities**.

The scaling up of the approaches by local and national authorities **is observed;** but **governments at all levels still face financial and technical challenges for fully adopting and scaling up the approaches**. Efforts should continue to be made **to provide technical assistance for the management, monitoring and maintenance of the systems and approaches**, as well as to **ensuring access to technical and technological resources and in the capacity building of staff at national levels.**

There are important **changes observed in the health and education systems thanks to the approaches**. Even though **these changes cannot be attributed exclusively to the projects**, **advocacy initiatives and cooperation with national authorities and other key stakeholders have contributed to them**. The most transformational change identified by the evaluations is **the integration of elements of the Blue Schools approach in the curriculum**. Also, **important principles of the Blue Schools and the WASH FIT approaches are anchored in national documents**. Even though these are promising results **there is still a gap between changes in the law and the proper implementation of the approaches in practice**. Thus, the integration of the approaches in the health or educational systems are not enough to ensure the expected impact and sustainability. The next phase should make sure to address these gaps.

The **sustainability** of the results **cannot be confirmed at this stage**; however, the **evaluations identified trends and enabling factors that can contribute to the sustainability** of the results such as: access to **functional and safe WASH services**; **consistent O&M of the infrastructure** through active involvement of the community and other stakeholders; **in-kind and financial contributions by communities**; **engagement, commitment, and accountability from local, regional, and national governments**; and the **integration of monitoring and evaluation systems in existing national processes**. The participation of local authorities and other stakeholders in the **planning, implementation and monitoring** of the approaches is an important **condition for sustainability**. However, this participation should go hand in hand with **systems strengthening processes, where projects take a facilitating role in empowering actors to own and take leadership of the interventions.** Governments at various levels **must be made accountable for the results and for the processes related to the implementation of the approaches**. Duty bearers should have **the resources – human and financial – to take on their responsibility**.

In the case of the community component, the enabling factors for sustainability identified by the evaluations are, a) the application of **community-based participatory approaches**; b) the **formation and strengthening of local community structures**; c) the **promotion of behaviour change activities**; d) the **setting up of water user fees** or **O&M funds** for economic sustainability. **Local institutions and community organisations** need to be **strengthened to ensure that they take ownership of community interventions**. The next phase should focus also on **strengthening the monitoring and technical capacities of the local stakeholders** to ensure the sustainability of the systems.

Strong partnerships with national, district and local governments and with other relevant development actors is a condition for system strengthening and impact. Projects should continue working with a **system strengthening lens** to encourage the **analysis of costs; supporting budgeting; promoting studies to determine appropriate revenue generation by local governments; and advocacy for increased allocations by national and provincial authorities**. Finally, **communication with the communities should aim at finding champions who can help promote the approaches** with other community members and **ensuring that communities are ready to demand their rights**. Systems strengthening approaches take time and resources, but in the medium term, they are key **to scale up and to make sure there is long-term impact**.

5. General Observations to the Evaluations Process

The quality of the **in-depth evaluations** and **the standard evaluations vary**. One weakness observed in several standard evaluations that address **two approaches and / or include the community component is the** level of analysis. The analysis is limited or not all evaluation criteria were addressed consistently in such reports. Additionally, throughout the standard evaluation reports, there is no consistent analysis of some important questions such as: **hindering and enabling factors for the achievement of targets; innovations; systems strengthening; and resilience and adaptability to internal and external factors.** In the future, it will be important that standard evaluations do address and reflect on all the questions of the SWSC Evaluation Guidance to ensure the quality of the information. Despite of these limitations, the standard evaluations **confirm most of the results obtained** by the in-depth evaluations and **all evaluations reach important generalisable conclusions**. On the other hand, **in-depth reports used more rigorous methods** for qualitative data collection and analysis, which enabled triangulation. The in-depth evaluations include dedicated research themes and provide **with a more holistic analysis** than many standard reports.

The analysis of **systems strengthening** is limited in most standard evaluations. Considering the importance of this exercise, it might be worth considering doing an analysis of **systems strengthening through an in-depth study** in the future. The in-depth report for Blue Schools complemented the analysis **using the Enabling Environment Matrix** (EEM). This tool has proved to be useful to identify important weaknesses and strengths of the projects and to address better the questions related to "**systems strengthening**." However, such analysis would be **difficult to apply in standard evaluations** as there is a need for understanding the tool to be able to apply it and the application of this tool can be time- and cost-intensive. While the in-depth evaluation of the HCF did not use this tool, it was able to reach conclusions and recommendations on systems strengthening as well. **To better compare evaluation reports**, in the best of the cases, **all evaluations should follow the same evaluation methodology**. This is the case for the OECD-DAC criteria, which has been used by all reports. In the future, if the SWSC decides to use again the EEM tool or other method for the external evaluations, it is

recommended that at least **both in-depth reports** follow the same method. Finally, a decision can be made, if the **EEM is a tool to be used regularly in final evaluations or not**, considering the costs and the time required.

The combination of quantitative with qualitative data was important to have a good evidence base for each result. The use **of baseline and endline data combined with interviews and focus groups provides a strong evidence base**. This is **the case of the effectiveness criteria**. In other criteria, such as **impact and sustainability**, information collected is based mainly on anecdotal information collected through interviews and focus groups, but it is not backed-up by quantitative data. To strengthen the evidence in these criteria, the next phase should **include qualitative data in the monitoring system**. Using the Theory of Change as basis, a "**contribution analysis**" could be made **to address changes in the context**; **changes perceived by local stakeholders thanks to the approaches or projects**; and **unintended effects**.

It is observed that some **questions** in the SWSC Evaluation Guidance **overlap among different criteria** and that resulted in an **apparent confusion on where to report results**. To avoid this situation in future evaluations, it will be important **to revise the questions in the SWSC Evaluation Guidance** in such a way that **there is more clarity about the questions per criteria**, below there is a list of specific recommendations in this regard:

- Include the "*needs of users*" under the relevance criteria.
- The "*contribution to the realization of local or national agenda*" fits better in the **impact criteria** and should be taken out of the relevance criteria.
- The question "*what could be done to improve relevance*" was not answered by any report and should be omitted.
- Define and better explain the definition of **internal and external coherence** to make sure that evaluators apply this definition in their analysis of coherence.
- The "*integration in the national system*" and "*scaling-up*" fit better in the **impact criteria** and should be taken out of the coherence criteria.
- Questions related to the *Costing Worksheet* **should be taken out of the efficiency criteria** and should only be included in costing exercises.
- "Cost savings", "costs transferring" and "costs per beneficiaries" are a good starting point for analysing the efficiency of the projects. However, there is a need for a more systematic method to measure efficiency throughout all SWSC projects. The indicators should not be used in isolation but within a framework of analysis that proves cost-benefits.
- The question of the sustainability criteria "*To what degree were local government authorities and health or education officials involved in the planning and steering of the signature approach?*" should be included in **impact criteria** and should be merged with question "*Has the implementation of the signature approach caused transformational change in health/ education systems or norms? How?*".
- The question in the sustainability criteria: "*involvement of stakeholders in the planning and steering of the projects*" is an important condition to sustainability; it might not serve the purpose, if it is not addressed from a system strengthening perspective. That means that there are other institutional and organizational factors that might affect the sustainability of the projects even if stakeholders participate in the planning and steering of the projects. Thus, this question should be revised, so that future evaluations address the sustainability criteria with a systemic view.
- The evaluation criteria for the community component should include *changes perceived by users, governments and other stakeholders* and *the impact of the advocacy work*. It would be important to consider including these questions in the **impact criteria** to make sure that there is a holistic analysis of the impact of community interventions.

The reports of the **community component** show on average less detail and analysis per criteria as the evaluations of the approaches. The **community component evaluations present more consolidated results** for the **effectiveness criteria** than for other criteria. The **efficiency criteria** is the weakest one. At the same time, there are differences in the quality of the evaluations between projects. The **reports with stronger results have addressed all or most criteria; have done either a separate evaluation report of the community component; or have clear separate sections evaluating the community component**. The evaluations with **weakest results** show that **project interventions were limited** or **did not provide all the information necessary to do an evaluation using the OECD – DAC criteria**. To ensure the **quality and the comparability**

of the community component evaluations in the future, the **SWSC Evaluation Guidance should be applied fully in all evaluations**.

As part of the evidence building process, **the synthesis as well as the information collected from the evaluations** provide a good basis for **understanding the results of Phase III and to prepare for Phase IV.** This **work combined with the dedicated research mandates** such as: "Costing tools for WASH in institutions" and "WASH insecurity Experience scales" **contribute to the consolidation of the evidence building strategy**. As discussed throughout this report, it will be important to consider future research mandates or in-depth studies on the following issues: "**Impact of Advocacy**", "**the role of children as change makers**", "**contribution of the approaches to community resilience in the face of climate change**" and on "**Systems Strengthening**". It is with the triangulation of all these data, that a robust evidence-based data will be available for decision making.

6. Annexes

Annex 1: Mapping and the qualitative assessment and rating of the evaluations (excel)

Annex 2: Baseline and Endline data (SWSC MEAL process and the FACET tool).

Annex 3: SWSC Evaluation Guidance