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Developing an enabling environment

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PUBLISHER

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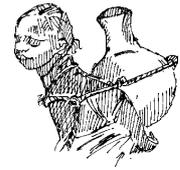
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Hazuza, Godfrey M., and Kees Wijn Nobel. 2019. "Developing an Enabling Environment". figshare.
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Developing an enabling environment

Godfrey M. Hazuza and Kees Wijnmobel, Zambia.

RURAL WATER FOR Health Project assists local communities in three districts in North Western Province of Zambia to improve their own water facilities through the implementation of shallow wells. The Project which originated as the Drought Contingency Project in the mid eighties (1985) is now in its third and final phase (July 1996 - December 1999). It is operating directly under the Provincial Water Engineer in Department of Water Affairs, and receives substantial contributions from the Netherlands Government (DGIS) with technical assistance from SNV (Netherlands Development Organisation). The Department of Water Affairs has attached technical staff, while both Ministry of Health and Department of Community Development have attached staff, in particular to strengthen the training of communities (software), these interventions are a prerequisite for implementation and future sustainability of water facilities.

RWHP area of operations

The Project operates exclusively in the rural areas of Kasempa, Solwezi and Mwinilunga Districts. Urban and peri-urban are not part of the Project's intervention area. The operational area covers some 71,100 km² out of the total provincial area of 125,800 km², with a population of approximately 274,000. (see map below). The head office and mechanical workshop for vehicles maintenance and fabrication of implements are situated in the Provincial Water Engineer's premises in Solwezi.

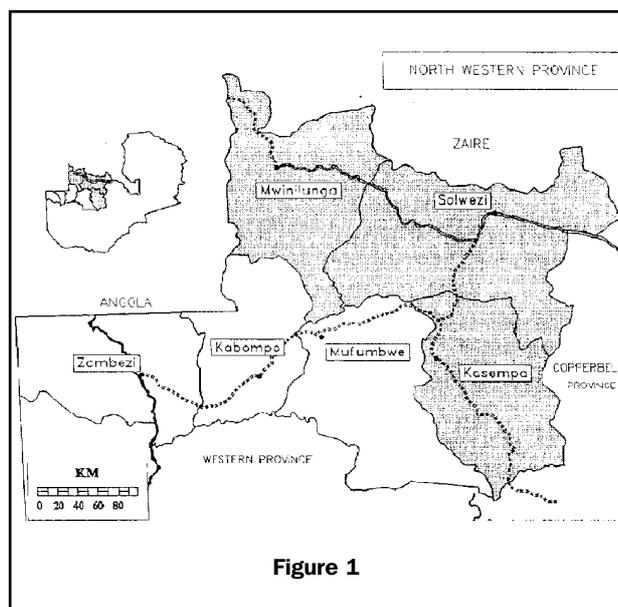


Figure 1

The main types of physical interventions through which the Project assists communities are the construction of hand dug wells with windlass and bucket and a hand augured tube well with a bucket pump. In a number of cases we have been using a percussion rig availed at the Department of Water Affairs in Solwezi to drill additional tube wells. All wells are fitted with a with a lockable cover, while a washing basin and adequate drainage facilities are part of the construction.

Before any physical intervention is planned, extension workers assisted by Project staff discuss with communities about the benefits of improved water facilities, Project's requirements for community contributions, how to organise a Well Management Committee and on issues related to the future maintenance of their water facilities.

Water sector reform in Zambia

The current reform of the water sector in Zambia is based on seven principles, which were developed in 1993, these are:

- Separation of water resources management from water supply and sanitation.
- Separation of regulatory and executive functions.
- Devolution of responsibilities to local authorities and the private sector.
- Full cost recovery through consumer charges in the long run.
- Improved human resource development leading to more effective institutions.
- Increased use of appropriate technology.
- Increased priority to GRZ spending in the sector.

In this framework, the establishment of Commercial Utilities (CU) to efficiently manage and operate township water supply installations on behalf of the Councils is promoted. For North Western Province it was decided in 1995 by all Councils that only one CU would be established. It was also agreed that this CU would include a Department of Rural Support Services (DRSS), to look into the rural water supply issues and provide support for the maintenance of these installations, possibly through an outlet for fast moving spares. To avoid consumers paying water charges in the rural areas external funding would be sought for these operations.

Parallel to these changes, the WASHE concept was adopted (1996). This strategy addresses the lack of attention to consumers' needs in rural areas through the involvement of the rural population:

- Assessing priorities
- Determining affordable and sustainable technology
- Contributing to management, operation and maintenance, and
- Improving the health and hygiene practices in rural communities.

The above strategy is to be implemented through district level committees (D-WASHE committees) for which membership is drawn from District Council, District Departmental staff working in communities, NGOs working in the area and at least three women groups representatives. The committees are sub-committees of the District Development Co-ordinating Committees of each district; these are level of district planning process. They are encouraged to establish lower level WASHE committees to ensure that their priorities and plans are reflected at district level.

Strategy for the phasing out of the rural water for health project

Preparations for the third phase of the Rural Water for Health Project started early 1995 and approval was granted by mid 1996 just before the start of the 3rd phase. This extension was based on the anticipated developments of the Water Sector Reform programme to take place in the country.

In order to facilitate the transition to the moment that RWHP would be a project of the past, the Project has developed a phasing out strategy. Influenced by external developments, the Project based its approach on the future need for inputs in rural water supply and so doing create an enabling environment in which operators could plan and implement their interventions. Two developments influenced this move and these are:

- The dependence on support from only one donor to financially support the formation of the Provincial CU, which has been uncertain for some time, posed as a risk to the creation of the DRSS as part of the Project support.
- The strong feeling that Micro Project Unit, having the possibility to offer support to rural water supply to communities that showed interest, based on MPU conditions would be the sure way for rural communities after the Project phased out.

The phasing out strategy has been translated into three action points:

- Greater contribution from communities.
- More emphasis on rehabilitation and improvement of traditional sources.

- Greater involvement of other departments in Water and Sanitation activities.

Discussion

The three action points to support the phasing out strategies are discussed in some detail below:

- *Greater contribution from communities.*
This has led to an increase in contributions to the extent that nowadays the project's requirements are almost similar to MPU conditions, which are the equivalent of 25 per cent of the cost of the hardware.

- *More emphasis on rehabilitation and improvement of traditional sources.*

First of all, it makes little sense to add new water points if existing points are deteriorating through lack of maintenance by the same community. Secondly, even if the 'official' coverage is say 40 per cent (as is currently the case in RWHP operational areas) of the rural population, the remaining 60 per cent also has access to water, although perhaps in a less sophisticated way, through what are known as traditional sources. In this light the Project has followed two lines of action.

- A. Rehabilitation of existing water points is supposed to be carried out before any new water points may be implemented in the same community. This rehabilitation can be carried out by the project, but at a cost to the community.
- B. The project has further developed options for improvements to traditional sources (rural and peri-urban population often make use of these facilities, like scoop holes, shallow unlined wells and alike for their domestic water requirements). Without having to incur great cost, these traditional water points could be improved upon to provide water of better quality. Cost of these improvements should entirely be borne by the individuals using these water points, but support from the project like technical advice and demonstrations and pilots are made available. In this framework, the Project has prepared 'TSI-ladders' as part of training material for possible improvements of traditional wells and scoop holes. Some situations depicted in the TSI-ladder on traditional wells are shown below.

- *Greater involvement of other departments in Water and Sanitation activities.*

For many years the Project has been able to carry out its software activities with the help of staff attached from both MOH and DoCD. Since both departments do carry out extension work through field staff, who are supposed to include health and sanitation related messages in their communications with the rural population, the experiences gained by the Project should be made available to these field workers as well. This will lead to extension workers being in a position to inform

communities about a wide range of aspects in relation to water and sanitation, even after the project has come to an end. Ultimately extension workers could provide a link between the local communities and the D-WASHE Committees through the hierarchy of the departments. The project has initiated workshops in close cooperation with the departments involved in the WASHE committees, to train extension workers on the following subjects: WASHE concept, funding mechanisms, roles and responsibilities of all parties, protection and improvement of traditional sources, operation and maintenance, involvement of drama in community training, health education, hand washing, etc. Gradually the attention has shifted from the training of MOH and DoCD extension workers to a wider range of potential promoters of RWS issues, to include some field staff from the ministries of Agriculture and Education, because of their links within the WASHE Committees. The WASHE concept is further elaborated below.

The WASHE concept

WASHE links Water Sanitation and Health Education. A District WASHE Committee (D-WASHE) draws membership from key departments of: Local Council, Department of Water Affairs, Ministry of Health, Department of Community Development, Ministry of Education and NGOs. The D-WASHE committee is a Sub Committee of the District Development Co-ordinating Committee of the Local Council of that area to take care of the aspects of Water, Sanitation and Health Education in the district.

Overall objective

Establishment of sustainable water supply and sanitation through Health Education.

Intermediate objectives

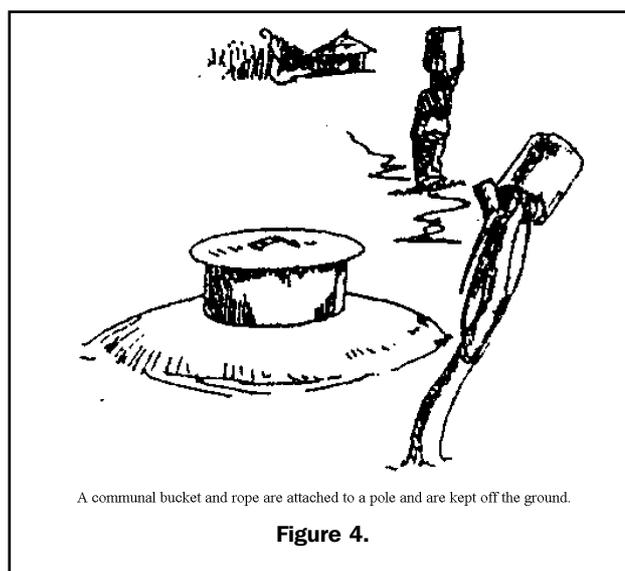
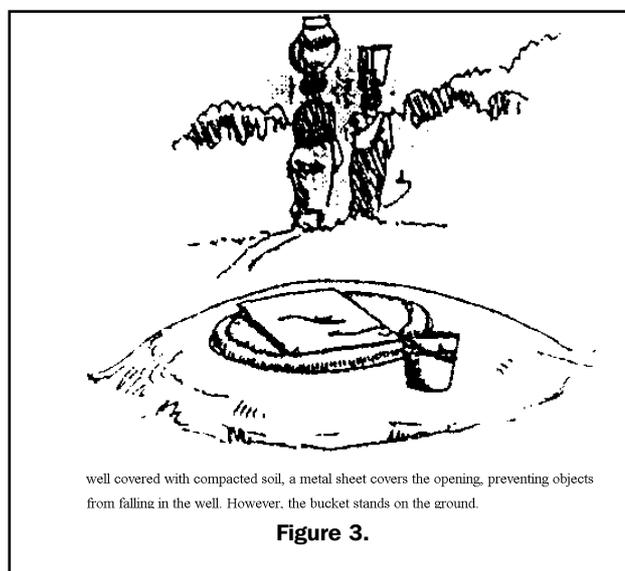
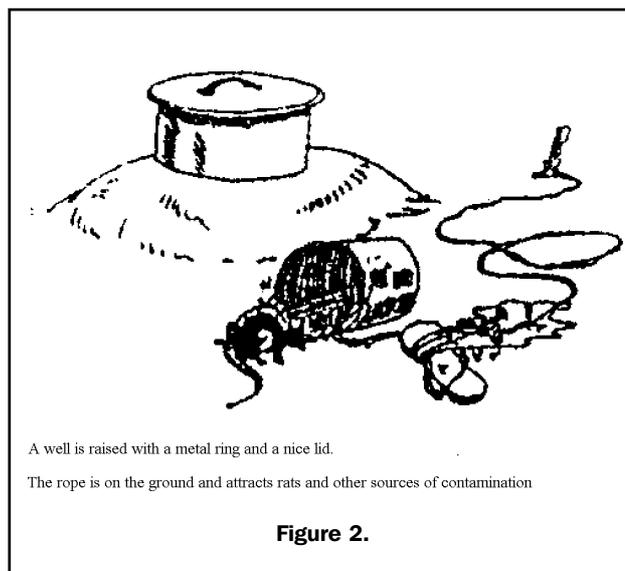
Some of the intermediate objectives include:

- Development of integral capacities of all sectors through resource mobilisation.
- Devolution of management responsibilities to lowest level through the improvement of decision making, community involvement / participation and capacity building.
- Establishment of intersectoral planning
- Establishment of WASHE committees whose members have a common goal, rather than being individual representatives of organisation where they come from.

Functions

The functions of these committees are to:

- provide a forum for dialogue, collaboration and co-ordination on WASHE programmes/activities between line departments, Co-operating Partners, NGOs and Local Authority in the district (planning).



- assess and analyse the WASHE situation in the district (monitor and evaluate)
- receive and recommend requests on WASHE programmes in the district as per assessed situation.
- receive up to date physical and financial reports on programmes undertaken in the district, especially those funded through the D-WASHE funds
- draw up a District WASHE development plan for consideration and adoption by the DDCC
- co-ordinate the provision of technical assistance/co-operating partners finance and national support to the district
- facilitate sub-district participation in planning and that information system is put in place that will ensure that reports reach D-WASHE
- prepare a consolidated a WASHE report on activities for DDCC
- establish and maintain a data bank to allow up to date monitoring of WASHE situation

The planned activities have to be carried out by some other organs in the local communities. This means having sub WASHE in these communities. This concept is new in the Province and lessons are being learnt and improvement are being attained. Study tours have been made by the three committees to the long existing committees.

Current situation

Initially three district committees of the operation areas were formed and later committees in the other four southern districts were formed. Training was done by National WASHE Training team from Lusaka. The three operation district areas are being financed by the Project and have made their five year plans. To assist the committees gain experience capacity building is being carried out.

Lessons learnt

Rural water Supply coverage in the Province and in the country, even if this has been facilitated by co-operating partners, is still as little as 40 per cent. Due to this, a sustainable system has to be put in place with emphasis on local structures, with assistance of co-operating partners. The answer may well be found in the WASHE concept.

Sanitation follows the same way and seems to have been neglected by co-operating partners. On the other hand negligence could be due to its complexity and “not seen as a problem at a glance by local people”. Likely, due to this, co-operating partners take it that the local committees see water as a priority towards sanitation.

The WASHE concept is new in the Province and lessons are being learnt and improvement is being attained. Study tours have been made and still have to be made by the committees to the long existing and more experienced committees elsewhere in the country.

Membership of D-WASHE still is not clear to both the members and their supervising officers, as such conflicts are prevailing e.g:

- No allowances, no work,
- Senior officers want to be members of the committee,
- It is believed that the WASHE concept is not going to work,
- It is not all the time that feedback is given to the department after a meeting,
- There is no support from senior officers because they may not fully understand it.

It is believed that the WASHE committee has no legal backing, as such co-operating partners are reluctant to give money to the committee.

Communities are eagerly collecting materials as their contribution towards a new well, against few project equipment and manpower for actual implementation.

Traditional source improvement has not been accepted as an alternative to the conventional hand dug and augured wells by both communities and extension workers.

List of abbreviations:

CU	Commercial Utility (short for Commercially viable water supply utility)
DoCD	Department of Community Development
DRSS	Department of Rural Support Services (within the CU)
DWA	Department of Water Affairs (within the Ministry of Energy and Water Development)
GRZ	Government of the Republic of Zambia
M&E	Monitoring and Evaluation
MOH	Ministry of Health
MPU	Micro Projects Unit (support to community initiated activities, financed by European Union, World Bank, GRZ, Scandinavian donors and others)
NWP	North Western Province
RWHP	Rural Water for Health Project
RWS	Rural Water supply and Sanitation
TSI	Traditional Source Improvement
WASHE	WATER, Sanitation and Health Education.

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