

EVALUATION REPORT

Summative Evaluation of The Accelerated Sanitation and Water for All (ASWA) Programme, SIERRA LEONE (2012-2019)

funded by The Dutch Ministry for Foreign Trade and Development
Cooperation (DGIS)

UNICEF Sierra Leone and UNICEF Regional Office for West and Central Africa –
Evaluation Office



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List of acronyms/ terms

AfDB	African Development Bank
AMCOW	African Ministers Council on Water
ARI	Acute Respiratory Infections
ASWA-SL	Accelerating Sanitation and Water for All Sierra Leone Programme
ASWA-WCA	Accelerating Sanitation and Water for All West and Central Africa Programme
BAT	Bottleneck Assessment Tool
CFS	Child Friendly Schooling
CLTS	Community led total sanitation
CPD	Country Programme Document
CSO	Civil society organization
DfID	Department for International Development (UK)
DGIS	The Directorate-General for International Cooperation (DGIS) of the Ministry of Foreign Affairs of the Netherlands
DHMT	District health Management Team
EQ	Evaluation Question
ERG	Evaluation Reference Group
ESICOME	Expanded Sanitary Inspection & Compliance
EU	European Union
EWRC	Electricity and Water Regulatory Commission
FGD	Focus Group Discussion
GDP	Gross Domestic Product
GoSL	Government of Sierra Leone
GEHR	Gender, Equity and Human Rights
GVWC	Guma Valley Water Company
HHWT	Household Water Treatment
IMC	Inter-Ministerial Council on WASH
IP	Implementing Partner
JMP	Joint Monitoring Programme
KII	Key Informant Interview
KRC	Key Results for Children
KSI	Key Sector Indicator
MBSSE	Ministry of Basic and Senior Secondary Education
MDA	Ministries, departments, and agencies
MDG	Millennium Development Goal
MDGs	Millennium Development Goals
MEST	Ministry of Education, Science and Technology now MBSSE
MEWR	Ministry of Energy and Water Resources
MoGCA	Ministry of Gender and Children Affairs
MICS	Multi-indicator cluster survey
MLGRD	Ministry of Local Government and Rural Development
MoFED	Ministry of Finance and Economic Development now MoPED
MoPED	Ministry of Planning and Economic Development
MoHS	Ministry of Health and Sanitation
MWR	Ministry of Water Resources (earlier part of MEWR)
NCPD	National Commission for Person with Disability
NGO	Non-governmental organization
NRWSSP	National Rural Water Supply and Sanitation Programme
NWSP	National Water and Sanitation Policy

O&M	Operation and Maintenance
OD	Open Defecation
ODF	Open Defecation Free
OECD/DAC	Organisation for Economic Co-operation and Development's Development Assistance Committee
OHCHR	Office of the United Nations High Commissioner for Human Rights
PLwD	People living with disabilities
PRSP	Poverty Reduction Strategy Paper
PSEA	Protection from sexual exploitation and abuse
RWSSP	Rural Water Supply and Sanitation Programme
SALWACO	Sierra Leone Water Company
SBWG	Sector Budget Working Group
SDG	Sustainable Development Goals
SIDA	Swedish International Development Cooperation Agency
SLTS	School Led Total Sanitation
SMC	School Management Committees
SPCT	Sector Policy Coordination Team
SSHE	School Sanitation and Hygiene Education
SWA	Sanitation and Water for All (global partnership)
Toc	Theory of Change
ToR	Terms of Reference
UNICEF	United Nations Children's Fund
USD	United States Dollar (currency)
VLOM	Village level operation and maintenance
VSLA	Village savings and loans associations
WASH	Water, sanitation, and hygiene
WB	World Bank
WCARO	West and Central Africa Regional Office (UNICEF)
WHO	World Health Organization
WinS	Water, sanitation, and hygiene in schools
WSP	Water and Sanitation program (WB)
WSP	Water and Sanitation Programme (WB)

1 EXECUTIVE SUMMARY

1.1 Introduction

This report presents the results of the formative and summative evaluation of the Accelerating Sanitation and Water for All programme in Sierra Leone (ASWA-SL). The evaluation was carried out by PEM consult in 2020. The evaluation reviewed programme implementation and results from January 2013 to December 2019, after program closure. ASWA-SL was funded by the Directorate-General for International Cooperation (DGIS) of the Ministry of Foreign Affairs of the Netherlands and was implemented by United Nations Children's Fund (UNICEF) Sierra Leone, the Government of Sierra Leone (GoSL) and partners. ASWA-SL was implemented in three target districts, Bonthe, Koinadugu and Falaba, covering 15 chiefdoms. The program was funded with contributions from UNICEF Sierra Leone, GoSL and the recipient communities of the programme with a total budget of USD 10.8 million. The programme was temporarily suspended in 2015 during the Ebola outbreak, and funds during the outbreak were re-programmed for Ebola response, with a separate Ebola response grant from DGIS.

1.2 The ASWA-SL Programme

DGIS and UNICEF initiated the Accelerated Sanitation and Water for All in West and Central Africa (ASWA-WCA) in December 2012. ASWA-WCA was a multi-country WASH programme implemented in nine West African countries, including Sierra Leone, which were off-track vis-à-vis achieving their Millennium Development Goal (MDG) 7c targets.

In Sierra Leone, ASWA-SL emanated from GoSL's participation in the Sanitation and Water for All (SWA) global partnership, as a means to increasing political prioritization, promoting evidence-based decision making, and increasing allocation of resources in the water and sanitation sectors. The programme supported the development and implementation of national plans of action, which resulted from the SWA initiative. The SWA process helped to drive these advances forward and contributed to the specific government commitment to prioritise the delivery of sanitation and water for the country's development agenda. This is specifically articulated in the Agenda for Prosperity (PRSP III - 2012) and the National Water and Sanitation Policy (NWSP 2010).

The goal of the ASWA-SL programme is to achieve improved child health, survival rates and well-being and contribute to a reduction of diarrhoea incidence among children under the age of five by accelerating the achievement of MDG 7c through four major areas of focus: i) Accelerating sanitation and water coverage to meet MDG targets, ii) Strengthening national sector development, iii) Institutional strengthening and capacity building to enhance WASH sector service delivery, and iv) Ensuring the sustainability of systems and behaviours.

1.3 Purpose and objectives of the evaluation

This evaluation has two purposes related to accountability and organizational learning: First, in terms of accountability, to allow for reporting on the results achieved by the ASWA-SL programme vis-à-vis the donor (DGIS) but also accountability towards the populations targeted by the programme. Second, in terms of organizational learning, to document good practices and lessons learned from the implementation of the programmes to inform decision-making on scaling up the different approaches adopted during implementation and to formulate new strategies. According to the evaluation terms of reference (ToR), the specific uses of the evaluation are to:

- Document best practices and lessons learned to inform future programming.
- To support national authorities by using lessons.
- Adjust district lead monitoring approaches to enhance quality programme delivery and development of district lead sustainability plans.

- Influence and inform future allocation of resources in the area of WASH.
- Support partner Non-Governmental Organisations and Civil society organization to strengthen capacity where it is lacking.

The evaluation also assesses the extent of coverage of the programme interventions in relation to WASH programme related needs in both terms of geographic coverage, numbers of children and women supported against actual numbers of women and children in need. The evaluation assesses the quality of the services provided in relation to relevant national and international standards and looks at the effectiveness of programme partnerships and coordination, particularly between UNICEF and implementing partners at national, district and local levels.

1.4 Scope of the evaluation

The evaluation focusses entirely on system-wide performance in the thematic area of WASH, and the sustained contribution to development results under this theme in the defined time period through ASWA-SL. Geographically, the evaluation focuses on the integrated WASH package delivered by UNICEF and implementation partners in the targeted communities of the following three districts: Bonthe, Koinadugu, and Falaba. The evaluation covers all the Programme's interventions implemented between 2012 and 2019.

Limitation of the evaluation:

The limitations of the evaluations and the mitigation measures applied including the following (for more details, please see Chapter 8.6)

Limitations and constraints of the evaluation	Mitigation measures applied
Timing of ASWA-SL baseline survey, limiting findings made on the Impact criteria	Evaluation team used other secondary sources of information
Sample for baseline survey provide district level statistics while the end-line focus on the ASWA-SL target communities	Assess the result of the baseline and end-line survey considering these limitations
Time interval since inception of the programme and availability of staff and documentation	Identification of Key Informant Interviews (KIs) with persons involved in the early activities of the programme and use of available programme reporting
COVID-19 pandemic and international travel restrictions restricting normal in-country team and client interactions	Interactions and consultations carried out using Zoom and other Internet communication applications
The COVID-19 pandemic impact on field data collection	Rescheduling of field work until the COVID-19 situation in Sierra Leone allowed for inter-district travel and community field work
Unavailability of disaggregated data in ASWA-SL reporting	Collection of information through KIs and Focus Group Discussions (FGDs) and disaggregated data through end-line surveys
General availability of reports on the ASWA Programme and completeness and accuracy of data provided on ASWA-SL target communities and completed facilities	Matching data with Statistics Sierra Leone (SSL) data on localities to carry out sampling and planning for field work.

1.5 Evaluation criteria and evaluation questions

In order to fulfil its purposes and objectives, the evaluation assessed the programme against the 5 OECD criteria of **relevance, effectiveness, efficiency, sustainability, and impact**; with the additional criterion of **gender, equity, and human rights**. The evaluation covered 27 evaluation questions, see Chapter 7 for an overview and **Error! Reference source not found.** for detailed information.

1.6 Methodology

The evaluation was a summative evaluation assessing whether ASWA-SL achieved its intended goals, objectives, outcomes, and impact. The evaluation was also formative by drawing out lessons learned for future programming of WASH implementation. The evaluation was based on mixed-method approach for data collection and analysis with a strong utilization focus. Qualitative and quantitative data was collected from end beneficiaries, key stakeholders, and implementing partners. The data collection included qualitative data from key informant interviews with sector stakeholders and focus group discussions with community level stakeholders, and quantitative data from observations of WASH facilities and an end-line survey.

1.7. Findings and conclusions (by criterion)

The findings are presented in Chapter 9 in relation to each one of the evaluation questions. The conclusions in correspondence of the different evaluation criteria are detailed in Chapter 11.

Relevance

ASWA-SL is an exemplar of integrated rural WASH programming that fitted clearly within Sierra Leone's national policy framework and goals, as well as within UNICEF's global approach to WASH. While ASWA-SL reached specific groups including women, girls and boys, and people living with disabilities, more attention could have been paid to the specific strategies required to reach vulnerable groups. The intervention strategy's link to outcomes and impact was weak and programme assumptions were not clearly identified. In some cases, there was not sufficient clarity on the indicator definitions for measuring achievements and different wordings were used in programme document and progress reports.

Effectiveness

ASWA-SL achieved good results in a challenging environment. Broadly, the targets were reported to be reached or even exceeded; however, limited clarity on the indicator definitions and findings from the field indicate that the achievements could be less than reported. ASWA-SL was successful in raising awareness on hygiene and reducing open defecation in the communities, as well as improving WASH facilities and hygiene in schools. However, the evaluation findings indicate that the quality of the water facilities was uneven, with some facilities not functioning or being seasonal. The extent to which ASWA-SL contributed to creating enabling environment for the WASH sector in Sierra Leone is not easily measurable. ASWA-SL made a tangible contribution to improving monitoring and district level coordination of the rural WASH sector in Sierra Leone.

Efficiency

Overall, ASWA-SL was implemented efficiently with the reported unit costs in line with WASH costs normally found in Sierra Leone; although this cannot be firmly established by the evaluation team due to the limited information available and the inconsistencies in the interpretation of indicators for calculating beneficiaries' access to WASH services as a result of the ASWA-SL interventions. The resources available for the ASWA-SL implementation were generally adequate, although some interventions were not optimally costed, which led to implementation challenges such as delays in completing facilities. The quality of the facilities construction was generally fair to good, but there were some areas of weakness related to siting of hand-dug wells and design of piped systems. Implementers broadly expressed satisfaction with the support provided by the UNICEF staff to facilitate implementation. However, in some cases UNICEF procurement procedures and disbursement requirements caused some implementation delays.

Sustainability

Overall, ASWA-SL had some success in terms of achieving sustainability, as communities are generally willing to pay for WASH services and pay either on a monthly basis or when there is a need for repairs.

There is evidence that hand pumps are maintained in some communities, although difficulties in accessing skilled mechanics and spare-parts exists. The ability to pay at the community and school level for O&M remains insufficient, as well as the ability to pay for replicating toilets. The sustainability at the community level in terms of behavioural change and maintaining ‘Open Defecation Free’ (ODF) status continues to be a challenge in some communities. The approaches around the sustainability framework were commendable and appropriate, but there is only limited support from district authorities to the communities to continue WASH activities and limited resources for the Districts to carry out the WASH monitoring and support activities.

Gender, Equity and Human Rights

ASWA-SL was successful in ensuring equal participation and representation of women and men in WASH decision-making and management. However, ASWA-SL was not equally successful in ensuring participation of vulnerable groups, such as persons living with disabilities, poorer households, and children. Positive responses were made on the achievements on safety for women and children to access the WASH facilities. The integration of education and child protection strategies with WASH programming was informal at the strategic level, but local implementing partners used their own expertise to contribute to child protection strategies, including awareness raising on sexual exploitation. The sanitation facilities implemented in schools were appropriate and according to the national standards with separate toilets for boys and girls and appropriate facilities for disabled access and menstrual hygiene. Positive results were achieved in terms of reducing the work-load for collection of water, women’s control of finances through the ‘Village Saving and Loan Associations (VSLAs), female representation and participation in decision-making, as well as the perception of the roles of girls and boys. ASWA-SL succeeded in reducing community-level equity gaps in terms of women’s and other vulnerable groups’ access to WASH services. However, equity gaps in terms of rural/ urban access at national level are generally widening. UNICEF and ASWA-SL were found to have had a positive impact on the inclusion of gender equity, child protection and the participation of vulnerable groups in the national sector guidelines and policy documents.

Impact

Although it is not possible clearly to attribute improvements or changes in health conditions to ASWA-SL, the stakeholders generally agree that health conditions and living standards were affected positively by ASWA-SL. The stakeholders also find that school absenteeism has reduced due to better access to WASH facilities. ASWA-SL was found to have contributed to improving national WASH governance vis-à-vis WASH M&E and the National Strategy on Sanitation and Hygiene, and sanitation and coordination at district level. However, ASWA-SL was not able to influence funding allocations significantly as the GoSL funding for WASH from internal sources remains low.

ASWA strengths and weaknesses

Strengths: ASWA-SL made a significant direct contribution to improving the access to WASH services in the districts covered, and indirectly broadly in rural Sierra Leone through its contribution to improving national capacities, supporting the achievement of GoSL’s objectives and SDG targets of improving WASH coverage and reducing the equity gap. Despite the challenging environment with poor accessibility and disruption by an Ebola outbreak, ASWA-SL appears to have been able to reach or even exceed its targets, although there is uncertainty about the number of people actually reached. Several of the communities covered reached ODF status. The WASH infrastructure installed was mostly appropriate, of adequate quality, and at reasonable costs. UNICEF provided good technical support to the IPs, but cumbersome procurement procedures and late disbursements created delays.

Beneficiaries were reached through WASH infrastructure, hygiene awareness raising, and access to micro-finance. Through its integrated approach, ASWA-SL reached and addressed the WASH needs of different population segments, including women, girls, boys, and people living disabilities, and reduced

the workload and improved the safety of women and children. ASWA-SL was also successful in ensuring the participation of women in WASH decision-making. ASWA-SL also ensured a sense of ownership of the WASH facilities, with communities generally being willing to pay for O&M.

ASWA-SL made a moderate contribution to policy improvements (e.g. vis-à-vis inclusion and child protection in the National Strategy on Sanitation and Hygiene), and a more substantial contribution to improved WASH sector monitoring and district level coordination.

Weaknesses: The programme strategy did not contain a sufficiently strong results chain linking activities and outputs to outcomes and impact, and the underlying assumptions for achieving the intended results were not properly identified. A major weakness was the definition of indicators and the monitoring of progress, which did not obtain sufficiently detailed or clear data on the beneficiaries reached and achievement of targets, despite ASWA-SL's support for WASH sector monitoring. Some of the infrastructure visited by the evaluation team had design or construction weaknesses, and do not function satisfactorily or not at all. The approach to reach and address the particular needs of vulnerable groups was not sufficiently comprehensive. Women, children, and people living with disabilities were reached, but ASWA-SL was less successful in ensuring the representation of e.g. people living with disabilities in WASH decision-making. Overall, the ASWA-SL contribution to creating enabling environment for the WASH sector in Sierra Leone was appreciated by stakeholders but found to be modest and difficult to document.

1.8 Lessons learned

1. It is important to understand behavioural changes to ensure that the participatory and inclusive approaches lead to programme sustainability. Without incremental changes in behavioural change being monitored and analysed with intent, it can be difficult to plan evidence based sustainability strategies.
2. The insights of communities are essential for understanding the needs and barriers of the most vulnerable and how they can be reached, and therefore important to tap into systematically and integrate in program monitoring.
3. Access to information and data is essential for effective and evidence-based decision-making and coordination – a lack of complete, systematic, and Gender, Equity and Human Rights (GEHR) sensitive monitoring and record keeping of activities and completed facilities can thus be a major impediment for results-oriented program management.
4. It is difficult to ensure functional and sustainable water systems, without sufficient attention to quality of survey and design activities.
5. Achieving sustained benefits in terms of improved health and living standards require combined access to water and sanitation and good hygiene practices/ behavioural changes.

1.9 Recommendations

Drawing on the findings and conclusions generated in the course of the evaluation, the evaluation team developed a series of strategic and operational recommendations. The recommendations were developed in a participatory manner with UNICEF and other in-country partners. Key evaluation users had several opportunities – once the draft report was submitted for review – to discuss with the evaluation team on how to make the recommendations relevant, actionable, precise and suitable to the specific context.

STRATEGIC RECOMMENDATIONS

SR1. Address the barriers preventing the hardest to reach from accessing and using WASH services

Conclusions	Actions for Consideration	Responsibility	Level of priority
Relevance C1.2 and Gender, equity, and human rights C5.1	SR 1.1. Develop the TOR and conduct data collection for a study on barriers in consultation with WASH Stakeholders.	UNICEF Sierra Leone Country Office. Ministry of Water Resources, Ministry of Health and Sanitation, Ministry of Basic and Senior Secondary Education; Statistics Sierra Leone; and other in-country WASH stakeholders	High
	SR 1.2. Develop the ToR of a meta-synthesis of existing WASH studies covering barriers and ensure that such meta-synthesis include the results of the study on barriers recommended under SR 1)	UNICEF and Government Partners within the WASH Steering Committee	High
	SR 1.3. Adjust the implementation of future UNICEF WASH (and other in-country partners' WASH interventions as feasible) Programmes based on the results of the meta-synthesis to address the barriers to different vulnerable groups' access to WASH in ASWA-SL communities	UNICEF WASH	Medium
	SR 1.4. Disseminate the Barriers study and the meta-analysis findings amongst in-country key WASH stakeholders	UNICEF Government of Sierra Leone and other key WASH stakeholders	Medium

SR 2: Ensure that future UNICEF WASH programmes be underpinned by a strong ToC, results framework, and indicators

Conclusions	Actions for Consideration	Responsibility	Level of priority
Relevance C1.3, Effectiveness C2.1 and Efficiency C3.1	SR 2.1 Enhance the existing UNICEF-Sierra Leone Country Programme Document Theory of Change so as to make it more coherent and ensure to have a clear results framework to underpin future WASH programs.	UNICEF/Government	Medium
	SR 2.2 Ensure that ongoing and future contracts with Implementing Partners (IPs) and Service Level Agreements with Districts include obligations to report using the national monitoring and reporting tools	UNICEF CO WASH WASH Steering Committee Ministry of Planning and Economic Development	Medium

SR3. Focus on achieving SDG 6 through a more concentrated engagement in target districts and communities

Conclusions	Actions for Consideration	Responsibility	Level of priority
Effectiveness C2.1 and Impact C6.1	3.1. To facilitate improved WASH planning in target districts and monitor achievements using the SDG WASH indicator definitions.	UNICEF WASH in consultation with MLGRD and WASH MDAs	Medium
	3.2. Promote the effective use of the limited resources towards a more focused targeting of investments in order to accelerate the achievement of the Mid-Term National Plan's targets and goals related to SDG 6	UNICEF WASH in consultation with MLGRD and WASH MDAs and VSLAs	Medium

SR4. Develop a realistic strategy for covering O&M recurrent costs in ASWA-SL communities.

Conclusions	Actions for Consideration	Responsibility	Level of priority
Sustainability C4.1 and C4.3	4.1. Develop strategy for O&M cost recovery.	UNICEF WASH WASH stakeholders, in particular MBSSE and MLGRD	Medium
	4.2. Present the proposed strategy to stakeholders at the upcoming WASH Sector Review for discussion and validation	Ministry of Water Resources and	Medium

		Ministry of Health and Sanitation UNICEF SLCO	
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SR5. Enhance the understanding of, and focus on, equity

Conclusions	Actions for Consideration	Responsibility	Level of priority
Efficiency, Gender, equity, and human rights C5.1 and C5.4	5.1. Hold consultations with in-country partners and provide support as needed on how to enhance the gender and equity dimensions of the interventions on the ground	UNICEF WASH, gender focal point within UNICEF and implementing partners	
	5.2. Include globally accepted (SDG 5) indicators that go beyond quantitative tracking of women vs. men in community groups (e.g. by looking at ratio of decisions adopted from women's perspectives, or the influence of women on economic allocations).	UNICEF WASH, gender focal point within UNICEF and implementing partners	Medium

SR6. Engage in enhancing the technical capacity of the private sector and IPs vis-à-vis quality WASH service provision.

Conclusions	Actions for Consideration	Responsibility	Level of priority
Effectiveness C2.1, Efficiency C3.2	6.1. Support the MWR to hold consultative meetings with sector MDAs and IPs to identify specific actions/capacity building activities.	UNICEF WASH SLCO and Ministry of Water Resources	Medium

OPERATIONAL RECOMMENDATIONS

OR1. Collect and update dynamic WASH data in ASWA-SL communities

Conclusions	Text of the Recommendation	Responsibility	Level of priority
Effectiveness C2.1 and C2.3, Efficiency C3.1 and C3.2, Sustainability C4.1.	Engage with Akvo or similar expertise to facilitate and expand the use of the Digital WASH Platform for data collection on sanitation through the district WASH Teams and IPs.	UNICEF WASH Ministry of Water Resources Ministry of Health and Sanitation	Medium

OR2. Operationalise tools for monitoring sanitation uptake.

Conclusions	Text of the Recommendation	Responsibility	Level of priority
	OR 2.1 Utilise the monitoring results to improve strategies and planning for sanitation upscale and sustainability.	Ministry of Health and Sanitation	Medium
	OR 2.2 Lead the mobilization of the District team and monitoring compliance with the reporting protocol.	Ministry of Health and Sanitation	Medium

OR3. Collect and use data on unit costs systematically.

Conclusions	Text of the Recommendation	Responsibility	Level of priority
Efficiency C3.1	OR 3.1 improve the existing systems for tracking of implementation results including costs to provide data and full transparency on the actual cost of implementation and reporting on unit costs.	UNICEF WASH	Medium
	OR 3.2 Make Programme costs per beneficiary available	UNICEF CO UNICEF RO	Medium
	OR 3.3. Document any result-level changes made to targets during implementation so as to enhance the transparency of the M&E system when targets are changed.	UNICEF SL CO (WASH Section and P&M)	

OR4. Document and verify the programme contribution to policy changes.

Conclusions	Text of the Recommendation	Responsibility	Level of priority
Effectiveness, C2.2, Gender, equity, and human rights C5.6, Impact C6.2.	OR4.1 Improve the existing systems for tracking the implementation results to include reporting on policy change	UNICEF RO (Eval. and WASH), UNICEF SLCO WASH Section	Medium

2 IMPLEMENTATION CONTEXT

2.1 Introduction

Sierra Leone, a West African country of 7.5 million people, ranks 202nd of 211 in per capita gross domestic product¹ (GDP). High dependence on agriculture and natural resources, coupled with high rates of poverty, unemployment, and environmental degradation, has caused a high level of vulnerability throughout the country.

The WASH sector has contended with enormous risks and challenges in recent years. A decade of civil war befell Sierra Leone in the 1990s and up until 2002, devastating water and sanitation infrastructure, and all progress in the sector. In December 2013 – very shortly after initiation of ASWA-SL – an Ebola virus epidemic affected Sierra Leone, lasting 2½ years. According to the WHO, the outbreak of Ebola virus disease in West Africa was the “largest, most severe and most complex Ebola epidemic” in history. More than 28,000 people were infected, and over 11,000 people died before the international public health emergency ended in June 2016. Most of the cases occurred in three countries: Sierra Leone, Guinea, and Liberia. In Sierra Leone, Ebola claimed more than 3,500 lives including those of 200 healthcare workers. The impact on the economy was catastrophic, the healthcare system nearly collapsed, and schools closed for almost a year. To put the country’s economy back on track, the government’s National Ebola Response Strategy identifies recovery priorities in key sectors, including WASH.

Sierra Leone faces multiple risks from climate change that threaten key economic sectors, increasing the potential for wider environmental degradation. Climate impact projections in Sierra Leone include increases in temperature, more extreme weather including more intense precipitation, in turn increasing the risk of land/ mudslides where there is deforestation and erosion as well as rising sea levels. Flooding affects urban and rural parts of Sierra Leone on a recurrent basis. Climate change further aggravates the risk of water-borne diseases (i.e. typhoid dysentery cholera and diarrhoea) where there is already a lack of safe drinking water and sanitation services.

A high degree of gender disparity exists in Sierra Leone. For instance, the proportion of women aged 20-24 years old who were married or in union before age 18 is 29.9%.² The adolescent birth rate remains high at 101.3 per 1,000 persons as of 2016, although down from 139.4 per 1,000 persons in 2013-2015. In Sierra Leone, data is only available for 33.6% of the indicators needed for monitoring the SDGs from a gender perspective.³ However, the 2019 Sierra Leone Demographic and Health Survey (DHS) reported that 28% of the households were female-headed and 43% of females were literate.

Human rights in Sierra Leone are gradually improving following the civil war which ended in 2002, and the democratic transition is steadily evolving. In 2019, the Office of the United Nations High Commissioner for Human Rights (OHCHR) reported outstanding requests from the Special Rapporteurs on health; on rights to water and sanitation; and on freedom of expression.

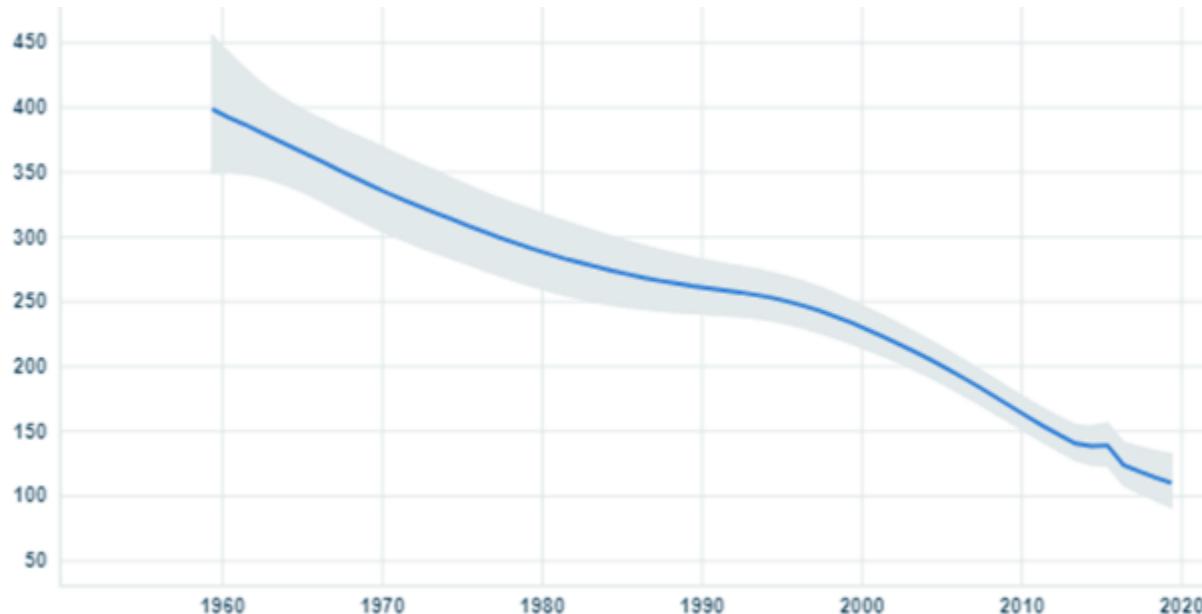
¹ <https://worldpopulationreview.com/countries/countries-by-gdp>

² MICS, 2017. Also described on UN Women’s data portal: <https://data.unwomen.org/country/sierra-leone>

³ <https://data.unwomen.org/country/sierra-leone>

The trend in under-five mortality is illustrated in Figure 2-1. The 2019 rate was 110 per 1,000 births, down from 260 in 1990. There has therefore been a significant steady drop in under-five mortality in the country as a whole. This may be a result of a number of government and development partners' interventions, including free healthcare services for mothers and children, insecticide treated mosquito nets, and improved access to WASH services over the years.

Figure 2-1: Trends in under-five mortality rate (deaths per 1000 live births) in Sierra Leone⁴



2.2 WASH Sector in Sierra Leone

The 2012 World Health Organization (WHO)/ UNICEF Joint Monitoring Programme (JMP) on rural WASH access, demonstrated very low levels of coverage of safe drinking water in Sierra Leone: 36% had access to a basic level of service⁵, while 53% of the rural population were accessing water from unimproved or surface water sources. In 2012, data compiled by the JMP indicated that the rate of progress towards achieving the MDG water and sanitation targets in Sierra Leone would not be reached by 2015. The 2010 Sierra Leone National Water and Sanitation Policy (NWSP)⁶ set national targets for sanitation and water supply access at 66% and 74% respectively, applicable equally to both rural and urban areas.

The most recent JMP has demonstrated that Sierra Leone is indicated as one of the 20 countries that has increased the proportion of the population using at least a basic drinking water service (by 21%) between 2000-2017.⁷ Despite this, challenges exist: one in four households spend over 30 minutes a day collecting

⁴ Source : <https://childmortality.org/data/Sierra%20Leone>

⁵ improved source, not more than 30 minutes roundtrip including queueing.

⁶ The GoSL is presently reviewing and updating the NWSP 2010.

⁷ WHO/UNICEF, 2019.

water, and in three out of four, the burden falls on women and girls.⁸ Only 19% of the population had a basic handwashing facility at home, and 26% of the rural population practices open defecation.⁹

Gender-based inequalities exist in access to rural water supply in Sierra Leone. UNICEF and WHO's Special Report on WASH Inequalities (2000-2017) reported that more than one in four households spend over 30 minutes per day collecting water and three out of five households rely on women, while one in seven rely on girls to do this work. The average collection time for women and girls is approximately 25 minutes per household per day, which equates to over 175 million hours annually on a national level.

Urban and rural disparities also exist in Sierra Leone. In 2012, around 40% of the population rural areas were reported to have access to safe water, compared to around 80% in urban areas. On sanitation, the 2012 JMP found that progress was seriously off-track. At the time, sanitation coverage in Sierra Leone needed to increase from 6% to 53% in rural areas to meet the MDG target in 2015.

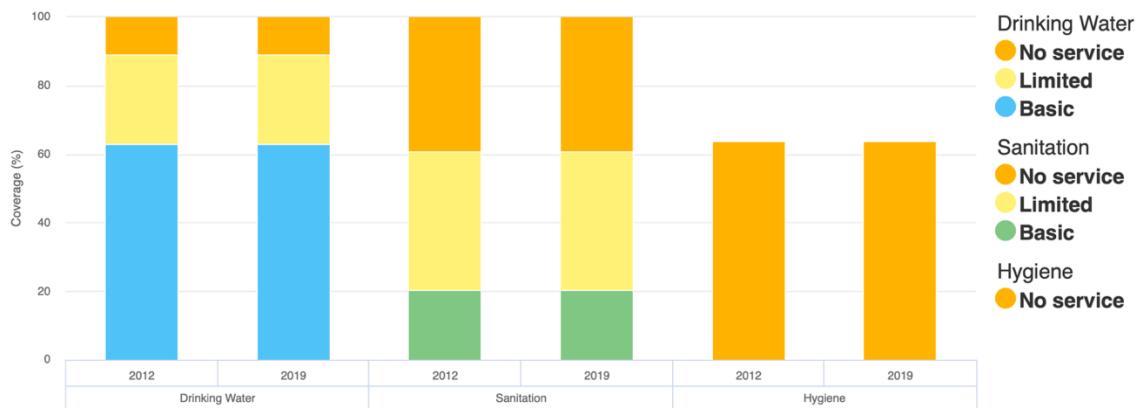
In Sierra Leone, low access to WASH services significantly contributes to diarrhoea, acute respiratory infections (ARIs), under-nutrition and worm infestations. It contributes to infections in healthcare settings that can lead to increased under-five morbidity and mortality and increased risk of maternal and newborn mortality. It can lead to both boys and girls missing school due to sickness or the time taken to collect water for the family and reduced cognitive attention due to worm infestations and dehydration. It can also pose additional challenges for girls due to concern over the use of toilets and how they manage their menstrual hygiene.

According to Sierra Leone StatWASH 2010 data (survey data of 4,212 primary schools in 13 districts), only 22.9% of primary schools had access to functional safe drinking water and one quarter had access to functional sanitation facilities in the school premises. Monitoring often observed open defecation by children around or even in the school compound.

⁸ Ibid.

⁹ Ibid.

Figure 2-2: Service Levels: School Data on WASH Coverage in Sierra Leone¹⁰



2.2.1 Institutional and Policy Context

Sierra Leone's Agenda for Prosperity (2013-2017)¹¹ built on the Agenda for Change (2008-2012), the implementation of which had made good progress in reducing poverty and working towards the MDGs. In the Agenda for Prosperity there were five focus areas, one of which was water and sanitation. The President of Sierra Leone also committed to the Sanitation and Water for All (SWA) with six sector deliverables, including development of WASH investment plans, institutional capacity building and budget allocation to WASH. These commitments were aligned with the country's Poverty Reduction Strategy Paper (PRSP III 2013-2018) which articulated higher levels of technology in rural areas through promoting power pumped systems and pipe borne water, as opposed to hand-pumped point water sources.

Sierra Leone's National Water and Sanitation Policy (NWSP) (2010) responded to the urgent need for integrated and cross-sectoral approaches to water management and development as well as the provision of safe and adequate water and adequate sanitation facilities. To achieve sanitation scale-up in rural areas, the Community-Led Total Sanitation (CLTS) was adopted by the Government of Sierra Leone and coordinated by the Ministry of Health and Sanitation (MoHS) and UNICEF.

ASWA-SL was designed to align with the NWSP (2010) in relation to water supply and sanitation, the National Decentralization of Services Policy (2004), and the PRSP III in relation to the operation and maintenance of water supply and sanitation facilities which encouraged greater involvement of NGOs and the private sector (promotion of National Content directive), and the utilisation of community-based approaches as per SWA commitments made by the GoSL. The four key ministries signed an Memorandum of Understanding to deliver commitments to SWA made by the GoSL.

Looking forward, the Medium-term National Development Plan (MTNDP) 2019–2023 is the overall planning document for Sierra Leone to move forward and monitor progress towards achieving the SDGs.

¹⁰ Source: WHO and UNICEF, JMP data: Figures are for estimated levels of service (<https://washdata.org/data/household#/sle>)

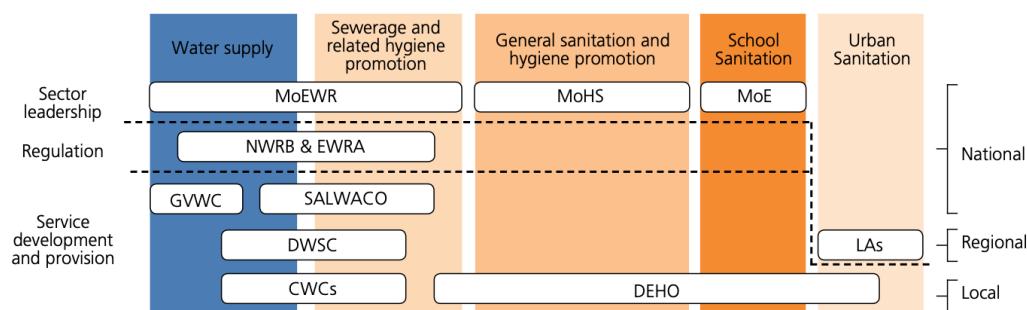
¹¹ Currently it appears a follow up vision has not yet been published.

Institutional changes during ASWA Implementation

The programme under evaluation was incepted when the new Ministry of Water Resources (MWR) was established with the mandate to oversee the management and coordination of water resources, and thus implemented during a period of considerable institutional development in the water sector.

The mandates for sanitation and hygiene remain in the purview of the Ministry of Health and Sanitation and the now Ministry of Basic and Senior Secondary Education (MBSSE) is responsible for school WASH, while the decentralisation of service provision to the districts was developing during the programme implementation period.

Figure 2-3: Institutional roles and relationships in the water supply and sanitation sector (2011)¹²



MoEWR: Ministry of Energy and Water Resources, lead for water resources and the custodian of the Water Law. Exercises oversight over sector agencies through Water Department.

MoHS: Ministry of Health and Sanitation, lead for overall coordination of sanitation and hygiene activities, through the Environmental Health Department (EHD) taking the lead in the promotion of sanitation and hygiene programs.

MoE: Ministry of Education, lead for sanitation and hygiene education in schools

LAs: Local Councils, focal entities at the district level for implementation of water and sanitation delivery. Work through District Water and Sanitation Committees (DWSC).

NWRB: National Water Resources Board, regulation and

oversight for water resources management.

EWRA: Energy and Water Regulatory Authority (EWRA), economic regulation of water and related sanitation delivery.

GVWC: Guma Valley Water Company, provision of water to Freetown and its environs.

SALWACO: Sierra Leone Water Company, water and sanitation in all urban areas outside of Freetown and some rural areas.

DEHO: District Environmental Health Officers, responsible for health, sanitation, and hygiene promotion at the district level.

CWS: Community Water Committees: management of water and sanitation delivery at the community level.

Additional actors include the private sector and a significant number of international and local nongovernmental organizations.

The intended reforms of the legal framework as outlined in the NWSP (2010) had largely been achieved by the end of 2019. This included the introduction of regulation of service provision through the establishment of the Electricity and Water Regulatory Commission (EWRC, 2015); the introduction of regulation of water resources through the National Water Resources Management Agency (NWRMA, 2019); and amendments to the mandates of the major water utilities Guma Valley Water Company (GVWC) and Sierra Leone Water Company (SALWACO).

A comprehensive implementation programme, the National Rural Water Supply and Sanitation Programme (NRWSSP, 2016) was developed for the rural WASH sub-sector to achieve the SDGs. The NRWSSP prescribes comprehensive capacity development for district and national level sector coordination for rural WASH.

¹² Source: AMCOW Country Status Overview, 2011: <https://openknowledge.worldbank.org/>; MoEWR is now divided into Ministry of Energy and Ministry of Water Resources.

2.2.2 Analysis of Rural WASH Sector Priorities in Sierra Leone

Specific Bottlenecks in the WASH Sector¹³

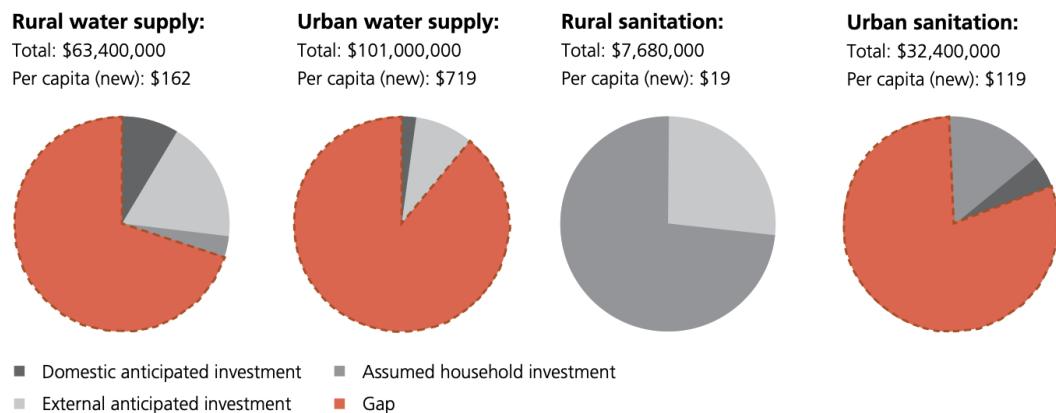
A WASH Bottleneck Analysis workshop using the Bottleneck Assessment Tool (BAT) was carried out in March 2013 in close coordination with MWR, MoHS, Ministry of Education and Ministry of Local Government, with participation of other sector stakeholders in Sierra Leone. The key purpose of the workshop was to use the tool to stimulate reflection on the major bottlenecks to WASH sector progress in Sierra Leone. The key identified bottlenecks included the following:

- **Supply chain and services** (national, district and community levels): Sustainability of water points, e.g. hand pumps, motorized pumps, and hand dug wells, is a critical concern as spare parts for pumps are not available at the district, chiefdom, and community levels.
- **Budgeting and accounting structure** (national and sub-national levels): Funds from local government finance to the line ministries at the district level are irregular or often delayed in transfer.
- **Legal framework and institutional reforms:** A sector-wide review of legal instruments is necessary to support institutional reforms. Human resource capacity development is required as well as institutional strengthening at district level to implement national policy.
- **WASH Sector Financing:** The African Ministers Council on Water (AMCOW) Country Status Overviews were developed in 2009-10. The AMCOW RWS CSO2 scorecard indicates several concerns along the service delivery pathway. The poorest scores were registered for planning, budgeting, delivering outputs, and ensuring adequate maintenance of services.

The BAT report highlights an annual investment of USD164 million is needed for new urban and rural water supply facilities, and rehabilitation of existing facilities. Compared with anticipated public financing, the projected minimum deficit totals over USD130 million per year for the water supply subsectors. For sanitation, the annual capital investment requirement is USD40 million.

¹³ As outlined in the following publications: WB, WSP, AMCOW Country Status Overview: Water Supply and Sanitation in Sierra Leone, Turning Finance into Services for 2015 and Beyond', 2011; MWR and MoHS, 'Sierra Leone Water and Sanitation Sector Performance Report, 2012, 2013; National Workshop on the WASH Bottleneck Analysis – 2013;

Figure 2-4: Annual overall and per capita investment requirements and financing by source¹⁴



The report further recommends a set of actions for rural water supply: to increase subsector funding, through public (including donor) and user contributions whilst rapidly improving the current absorptive capacities; to rapidly implement the practice of community ownership and management; to actively build the capacity of the private sector to enable it to provide goods and services and to develop appropriate strategies and guidelines to support the implementation of interventions. In Sierra Leone, as in many countries, there is an implicit assumption that operation and maintenance (O&M) costs will be recovered from users. In reality, this is not achieved, as evidenced in the low functionality rate for community managed rural water facilities. For rural sanitation and hygiene, the report recommends increasing the budget for sanitation, in particular for strengthening institutions and undertaking community sensitization programs; to complement CLTS with microfinancing to assure uptake and to undertake continuous monitoring of uptake.

Key actors and similar programmes in 2012-2019

UNICEF's WASH Programme was recognized as a major rural WASH intervention in Sierra Leone. In 2008 the programme targeted six rural districts: Bombali, Kenema, Moyamba, Port Loko, Pujehun and Tonkolili Districts with support from the UK Department for International Development (DfID) and Netherlands National Committee for UNICEF. It had five pillar strategies for environmental sanitation, communication for development, community water supply, WASH in clinics, and WASH in schools. It aimed to achieve 100% open defecation free (ODF) and 100% coverage of primary schools and clinics in the six target districts to ensure sustainability of behavioural change in sanitation and hygiene among the target populations and institutional improvement in WASH sector.

The African Development Bank (AfDB) in 2013 appraised a "Rural Water Supply and Sanitation Programme (RWSSP)" providing an estimated 625,000 people (47% women) with access to safe water, including restoring access for 361,000, with a budget of USD43.3 million.

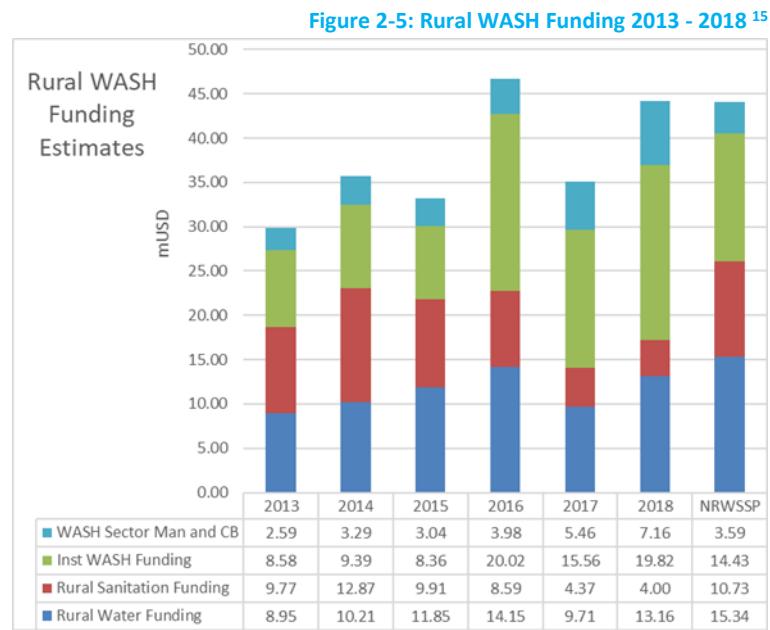
¹⁴ Source: AMCOW Country Status Overview, 2011: <https://openknowledge.worldbank.org/bitstream/>

As illustrated on Figure 2-5, the annual funding for Rural WASH was in the range of 30 to 45m USD annually in 2013-18.

DfID supported institutional development and capacity building of the new MWR from 2010 onwards, including funding for the WASH Facility for the implementation of numerous studies and capacity development assignments. The support also included institutional strengthening and capacity development in Ministry of Health and Sanitation (MoHS) for sanitation.

The World Bank's (WB) Water and Sanitation Programme (WSP) only engaged in Sierra Leone in 2012 as part of their growing engagement in fragile states, supporting the first water point mapping¹⁵. One water project includes approximately 200 boreholes drilled by a Korean company and some shallow wells and sanitation with subsidy.

Other rural water and sanitation actors include JICA, the European Union (EU) and the Swedish International Development Cooperation Agency (SIDA). NGOs also played a crucial role in service delivery and capacity building. The WASH Consortium (an NGO consortium led by Oxfam) carried out a three-year project from January 2010 to March 2013 in vulnerable areas of Freetown with a budget of £4 million with support from DfID.



¹⁵ Source: Annual Sector Performance Report 2017. Government of Sierra Leone, Ministry of Water Resources, Ministry of Health and Sanitation, September 2018.

¹⁶ The GoSL updated the Water Point Mapping in 2015-16 as part of the WASH SDG Baseline survey carried out by Statistics Sierra Leone in collaboration with the WASH Ministries and supported by UNICEF, the AfDB and other partners.

3 Evaluation Object: ASWA-SL

3.1 Summary Presentation.

The key aspects of ASWA-SL are presented in Table 3-1 below.

Table 3-1: Brief presentation of the object of the evaluation

Title of the project/program	Accelerated Sanitation and Water for All Programme Sierra Leone (ASWA-SL)
Country	Sierra Leone
Sources of project funding	The Directorate-General for International Cooperation (DGIS) of the Ministry of Foreign Affairs of the Netherlands
Total Budget	USD10,806,214 million (2019 end of project expenditure), financed as follows: - DGIS USD 7,959,346 million (75%) - UNICEF contribution USD 1,735,398 million (16%) - Government of Sierra Leone USD 448,250 million (4%) - Local communities USD 663,220 million (6 percent)
Project duration	January 2013 – December 2019
Main Objective	To accelerate water & sanitation coverage in Sierra Leone through four major areas of focus: 1. Accelerating sanitation and water coverage to meet MDG targets; 2. Strengthening national sector development; 3. Institutional strengthening and capacity building to enhance WASH sector service delivery; and 4. Ensuring the sustainability of systems and behaviours.
Components	<ul style="list-style-type: none"> • Water point construction and rehabilitation • Household water storage and treatment • Sanitation marketing, hygiene promotion • Rehabilitation and construction of WASH facilities in schools and health care facilities • School sanitation and hygiene promotion • Training for operation and maintenance
Expected beneficiaries	The main targeted results from the programme: 1. 355,883 people in the two target districts practice total sanitation. 2. 355,883 people in the two target districts practice hand washing with soap and HWTS. 3. 48,000 people in the two target districts have sustainable and equitable access to and use of community-owned WASH facilities. 4. 34,000 school children and teachers in 170 schools in the two target districts have sustainable and equitable access to and use of school-owned WASH facilities. <small>**The figures above were not disaggregated into beneficiaries by women, men, girls, and boys in original UNICEF project documents.</small>
Partners (institutional, implementing agencies)	UNICEF WASH Programme, Sierra Leone, and Government of Sierra Leone (GoSL) working with NGOs, WASH partners and the private sector in the

two target districts of Koinadugu and Bonthe.

3.2 Overview of ASWA-SL

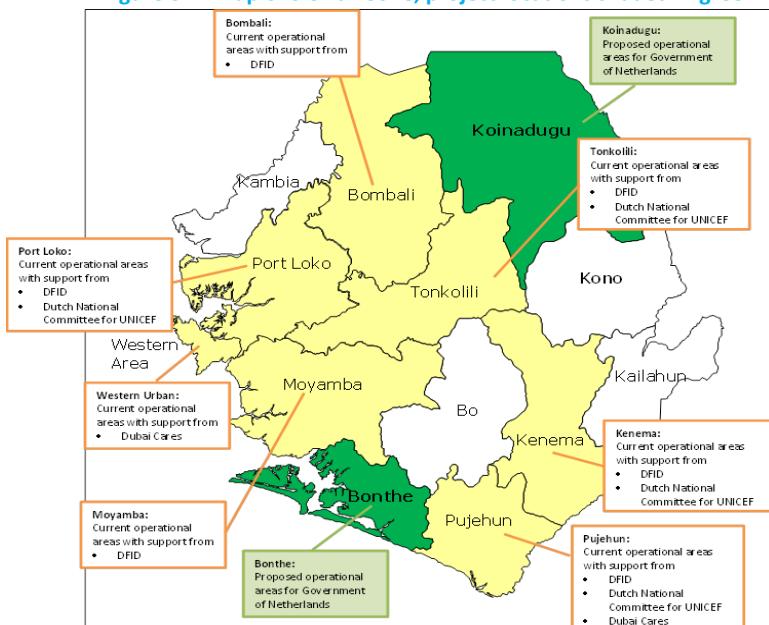
Accelerated Sanitation and Water for All in West and Central Africa (ASWA-WCA) was implemented in nine West African countries that were off track on achieving their MDG 7 targets. DGIS and UNICEF, as part of their commitment to support MDG 7 and subsequently SDG 6, initiated ASWA in Sierra Leone (ASWA-SL) in January 2013. A follow-up, the ASWA II was initiated in 2020 and is currently under implementation.

ASWA-SL was developed in a bid to support the country in achieving the WASH-related targets of the MDGs and the then active Government Poverty Reduction Strategy Paper III (PRSP III). The overall goal of the programme was to achieve improved child health, survival rates and well-being and contribute to a reduction of diarrhoea incidence among children under the age of five by accelerating the achievement of MDG 7. The objective of the programme, as identified in the programme proposal: *By 2017, contribute to reduce under five mortality rate attributed to diarrhoea by 10% and to reduced absenteeism in target district schools.*

ASWA implemented and upscaled WASH coverage in target districts, while also building government capacity and systems in rural water, contributing to the national development plan.

ASWA-SL was an integrated rural WASH programme designed to increase sustainable and equitable access to water and sanitation, improve hygiene practices, and contribute to sector capacity development in support of MDG 7 (now SDG 6) targets and national development goals, partly through mainstreaming gender into programme design. The programme included a mix of support at national, sub-national and local levels. It applied community participatory approaches and strengthened community capacity to manage their water supply and sanitation facilities. Institutional WASH was integral to the programme, with a focus on WASH in schools. ASWA-SL had five main programme outcome areas: water supply, sanitation, WASH in institutions (schools), hygiene education, and enabling environment.

Figure 3-1: Map of Sierra Leone, project locations shaded in green¹⁷



¹⁷ Source: ASWA-SL Proposal, 2012

ASWA-SL ran in target communities in the three districts of Bonthe, Koinadugu, and Falaba. Originally, the programme targeted two districts, but Koinadugu was subsequently split into Koinadugu and Falaba.¹⁸.

The purpose of ASWA-SL (as with ASWA-WCA more broadly) was to accelerate water and sanitation coverage through four major areas of focus:

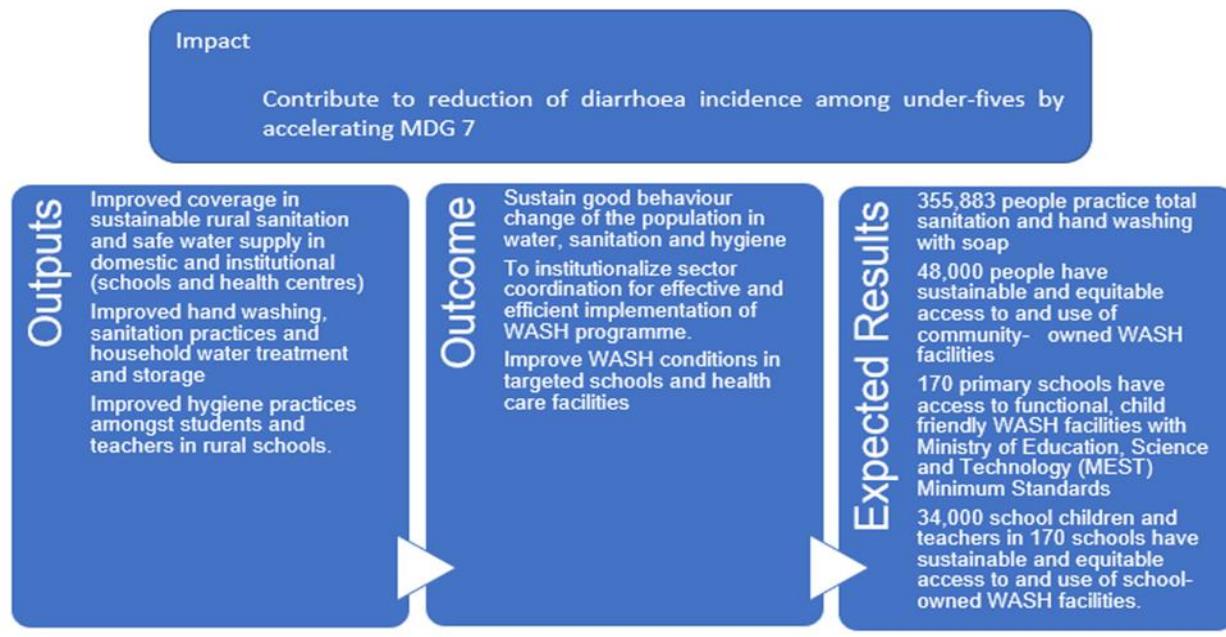
- Accelerating sanitation and water coverage to meet MDG targets;
- Strengthening national sector development;
- Institutional strengthening and capacity building to enhance WASH sector service delivery; and
- Ensuring the sustainability of systems and behaviours.

ASWA-SL utilized participatory methodologies under the CLTS approach, which is part of the UNICEF Sierra Leone community-based services delivery model. The WASH in School Programme had a strategic role in implementing a nationwide coverage of School Sanitation and Hygiene Education (SSHE) in all of the country's 5,000 schools and thereby contributed to Sierra Leone's education goals.

The expected outcomes of ASWA-SL were to sustain good water, sanitation, and hygiene behavioural change of the population and to institutionalize sector coordination for effective and efficient implementation of WASH programmes. The project was also designed to improve WASH conditions in targeted schools and thereby influence decreased absenteeism rates, especially among girls.

The expected impact, results, outcomes, and outputs are presented in Figure 3-2.

Figure 3-2: ASWA-SL results¹⁹



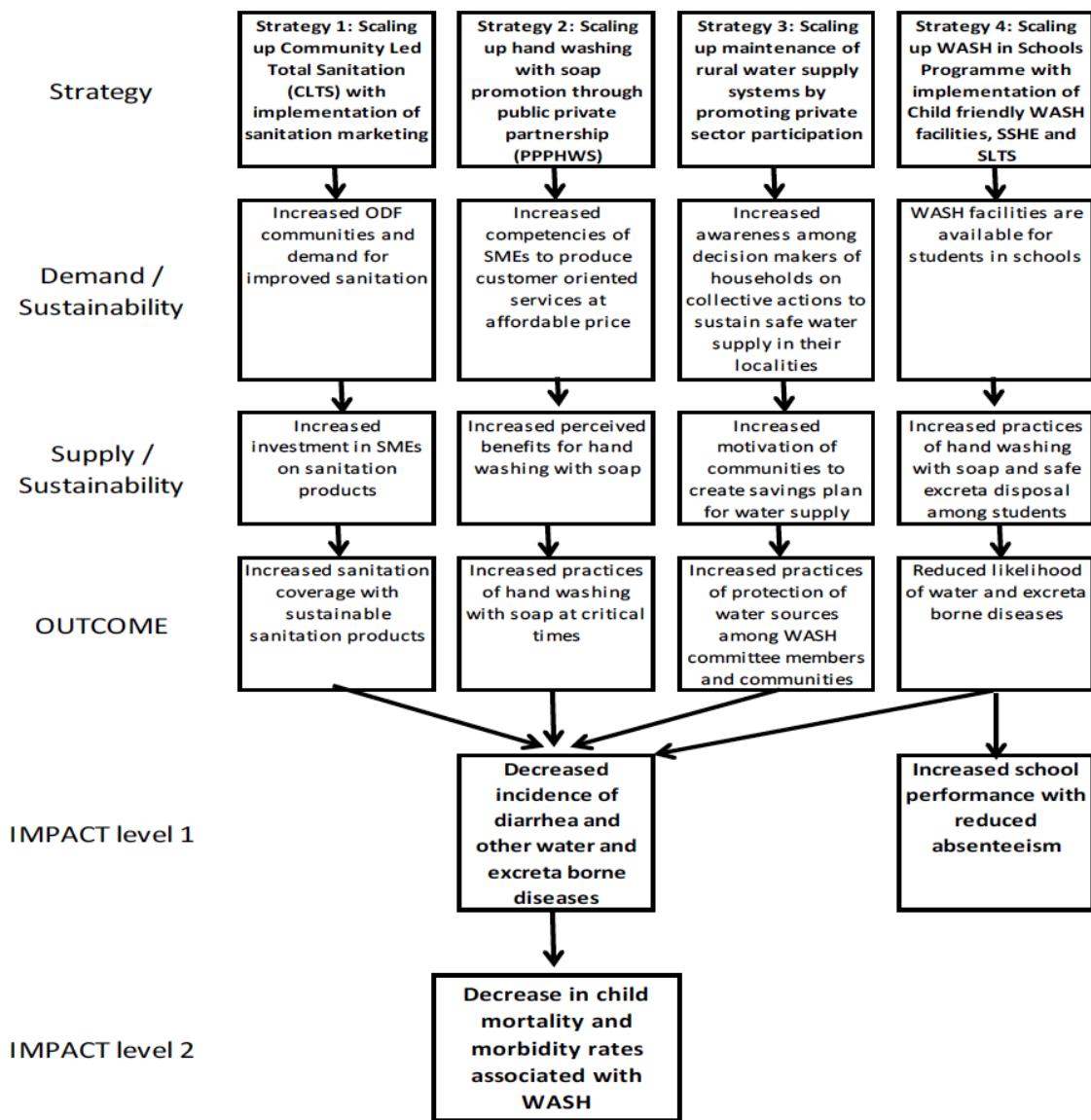
¹⁸ There are 16 districts in Sierra Leone.

¹⁹ Source of data: ASWA-SL Final Proposal

Theory of Change for ASWA-SL

The theory of change for ASWA-SL is presented in Figure 3-3 below. It illustrates the predicted health benefits that would result from the programme interventions on implementation of CLTS, promotion of handwashing, maintenance of rural water systems and WASH in Schools, having an impact on child morbidity and mortality.

Figure 3-3: ASWA-SL Theory of Change



Programme implementation arrangements

ASWA-SL focused on maximizing partnerships and leveraging resources from government and other stakeholders to scale up WASH activities. As part of the GoSL/UNICEF country programme, the programme

was implemented by GoSL, working with NGOs, WASH partners and the private sector. As such, the programme included a mix of support at national, sub-national and local levels.

At the national level, ASWA-SL activities were coordinated by UNICEF with the intent to work through the coordination mechanisms within the sector, mainly:

- **Inter-Ministerial Council on WASH (IMC):** The Inter-Ministerial Council on WASH is the apex body dealing with water resources management and supply, sanitation, and hygiene issues such as legislative proposals, decisions on institutional reforms and policies. It has representation from all WASH-related ministries.
- **Sector Policy Co-ordination Team (SPCT):** This body was established to direct, coordinate, and manage implementation of the NWSP. It has representation from the Ministry of Energy and Water Resources (MEWR), Ministry of Health and Sanitation (MoHS), Ministry of Education, Science and Technology (MEST), Ministry of Local Government and Rural Development (MLGRD) and Ministry of Finance and Economic Development (MoFED), UNICEF, and the NGO Consortium
- **Sector Budget Working Group (SBWG):** The SBWG ensures that ministry-specific and broad sector plans are harmonised with the budget cycle and that activities are funded.

At the district level, the main representation comprised the Council, deconcentrated staff of the Water Supply Division (WSD) in MEWR, the District Health Management Team (DHMT), UNICEF, and NGOs. Community WASH committees were supported to manage the implementation at community level.

A range of programming models were implemented in the ASWA-SL. Table 3-2 below broadly outlines the globally recognized WASH models implemented:

Table 3-2: Recognised WASH Approaches implemented in Sierra Leone.

WASH Programming Model	Brief synopsis of approach
Household water treatment and safe storage (HHWT) – combined with water point rehabilitation and construction of new water points	<ul style="list-style-type: none"> • Household water treatment and safe storage is an important public health intervention to improve the quality of drinking-water and reduce diarrhoeal disease, particularly among those who rely on water from unimproved sources, and in some cases, unsafe or unreliable piped water supplies.
Village Level Operation and Maintenance (VLOM)	<ul style="list-style-type: none"> • VLOM is an unofficial classification given to handpumps used in developing countries that require minimal maintenance or maintenance that can be done "at the village level."
Community Led Total Sanitation (CLTS)	<ul style="list-style-type: none"> • Community Led Total Sanitation (CLTS) is an innovative methodology for mobilising communities to completely eliminate open defecation (OD). Communities are facilitated to conduct their own appraisal and analysis of open defecation (OD) and take their own action to become ODF (open defecation free). CLTS focuses on the behavioural change needed to ensure real and sustainable improvements – investing in community mobilisation instead of hardware.
WASH in Schools (WinS) Approaches	<ul style="list-style-type: none"> • The scaling-up WASH in Schools (WinS) programme implements a range of approaches in Sierra Leone: Child friendly WASH facilities, School Sanitation and Hygiene Education (SSHE) and School Led Total Sanitation (SLTS). Key project activities include: supporting a basic package of WASH services in schools and employing participatory learning

	<p>techniques to allow school children to adopt positive sanitation and hygiene behaviour change.</p> <ul style="list-style-type: none"> • WinS activities are implemented with School Management Committees (SMCs), comprising of parents and teachers, and influencing community-wide behaviour change through SLTS which complement or supplement CLTS in the target areas. • The Child Friendly Schooling (CFS) concept has been promoted globally, as an initiative specifically focused on ensuring children's right to quality education is realised. It does this by providing a comprehensive multi-dimensional definition of quality education, encompassing inclusion; health, safety, protection; teaching and learning; and community partnership strategies, which collectively reflect the main dimensions that present barriers to education for children.
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Financial contributions

The original programme proposal planned for a DGIS contribution of USD 9,974,686, with contributions from UNICEF, GoSL, and communities. Water point mapping, international staff costs and teacher training under SSHE were cost shared and had a contribution from DfID funding and in-kind support including quality assurance and support from UNICEF staff. Table 3-3 presents the overall budget as synthesized from the original programme proposal.

Table 3-3: ASWA-SL budget by Result and partner contribution

Budget (USD)	Total	DGIS	%	UNICEF	%	GoSL	%	Communities	%
Result 1: By December 2017, 355,883 people in 700 villages of the two target districts have sustainable access to basic sanitation.									
Sub-total	4,820,150	3,850,000	80%	300,000	6%	85,650	2%	584,500	12%
Result 2 and 3: By December 2017 - 355,883 people in 700 villages of the two target districts are reached in handwashing promotion campaign with increase accessibility to soap and household water treatment options									
Sub-total	131,150	45,500	35%			85,650	65%		
Result 4 and 5: By December 2017, 48,000 people in 90 villages of the two target districts have sustainable access to improved water through 90 water points									
Sub-total	1,348,296	864,000	64%	319,926	24%	85,650	6%	78,720	6%
Result 6: By December 2017, 170 primary schools in the two target districts have access to functional, child friendly WASH facilities as per the MEST Minimum Standards.									
Sub-total	2,017,450	1,931,800	96%			85,650	4%		
TOTAL	12,486,082	9,974,686	80%	1,419,926	11%	428,250	3%	663,220	5%

4 Evaluation Purpose

This evaluation of the ASWA-SL programme was carried out in conjunction with a desk review of the eight other ASWA programmes funded by DGIS, and a parallel evaluation of the Programme d'Hydraulique et

d'Assainissement du Millénaire (PHAM) in Ivory Coast. The results of the desk review and the evaluation of the Sanitation Programme in Ivory Coast are described in separate reports.

The evaluation of ASWA-SL had two different purposes related to accountability and organizational learning:

- First, in terms of accountability to allow for reporting on the results achieved by ASWA-SL vis-à-vis the donor, DGIS, but also accountability towards the populations targeted by the programme.
- Second, in terms of organizational learning to document good practices and lessons learned from the implementation of the programme to inform decision-making on scaling up the different approaches adopted during implementation and to formulate new strategies.

Users of the evaluation

According to the ToR, the specific users of the evaluation are outlined in Table 4-1: Users of the evaluation the table below:

Table 4-1: Users of the evaluation

Who will use this evaluation?	To what end?
UNICEF WASH Sierra Leone Country Programme	Document best practices and lessons learned to inform future programming.
UNICEF Health, Nutrition and HIV (HNHIV), Communication for Development (C4D), Planning and Monitoring (PM) Sections	Document best practices and lessons learned to inform future programming.
National authorities	Use lessons learned to inform development of national WASH strategies. Use best practices to accelerate CLTS implementation country wide towards national SDG targets. Use the findings to adjust national CLTS strategy if necessary. Adjust district-led monitoring approaches to enhance quality programme delivery and development of district-led sustainability plans.
DGIS	Influence and inform future allocation of resources in the area of WASH.
Partner NGOs and other CSOs	Strengthen capacity where it is lacking, especially on community-based approaches towards sustainability of WASH initiatives.

The results of the evaluation can be used to assess performance and contribute to a range of purposes such as:

- Understanding achievements and challenges of ASWA-SL.
- identifying lessons learned at the strategic and operational levels and contribute to enhancing future implementation.
- identifying planning, technical, and methodological challenges and achievements and contribute to improving approaches in future programmes.

- Understanding good practices to eliminate open defecation and formulating recommendations for the consolidation of the gains of the CLTS approach and in respect to the scaling up of best practice.
- Contributing to the strengthening of national evaluation capacities.

5 Evaluation Objectives

The evaluation had the following specific objectives:

- Document the achievements and challenges of the WASH component Sierra Leone (ASWA DGIS).
- Identify lessons learned at strategic and operational level.
- Document good practices in eliminating open defecation.
- Formulate recommendations for the consolidation of the gains of the CLTS approach as well as in respect to scaling up the best practice.
- Contribute to the strengthening of national evaluation capacities.
- Assess the extent of coverage of the programme interventions in relation to WASH programme related needs both in terms of geographic coverage, and numbers of children and women supported as against numbers of children and women in need.
- Assess the quality of the services provided, in relation to relevant national and international standards, giving special attention to humanitarian and gender quality benchmarks.
- Assess the effectiveness of programme partnerships and coordination, particularly between UNICEF and its implementing partners and all partners working in WASH programming at local, district and national levels.
- Assess the relevance and effectiveness of the various strategies and approaches employed by UNICEF partners during each stage of the programme life-cycle.
- Assess the social appropriateness and acceptability of the programme design and approaches and explain related beneficiary and stakeholder perceptions in this regard and in terms of the overall programme.
- Assess the extent of programme compliance to the UNICEF policy and guidelines on the prevention of sexual exploitation and abuse (PSEA).

6 Evaluation Scope

Thematic scope

The evaluation focused on ASWA-SL's engagement in the thematic area of rural water, sanitation, and hygiene (WASH). The evaluation did not cover the Ebola response per se but covered some of the reprogrammed activities that occurred in response to Ebola as part of the overall programme. The evaluation covered all aspects of development rural WASH (i.e. non-emergency WASH).

Geographical scope

The evaluation focused on the whole WASH package delivered by UNICEF and implementation partners in the targeted communities in the three districts of: Bonthe, Koinadugu and Falaba.

The ToR suggested that an analysis of two comparison districts should be done, however this was changed during the planning of the data collection as other organisations besides UNICEF were carrying out WASH activities in the neighbouring districts. The data collection was therefore planned with ‘control’ communities in the target districts that were not covered by ASWA-SL.

The evaluation takes into consideration the current total population and population groups of interest to UNICEF in the three districts. The overall 2019 population in the districts targeted by the programme under evaluation according to the 2015 National Census population projections are presented in the textbox. Since ASWA was initiated in 2012 before the 2015 census, lower population estimates would have been the basis for the initial planning.

Population Projections

Koinadugu (before it was split) had an estimated total population of 456,140 (226,832 female and 229,308 male); and number of children under age five of 52,214 (25,964 female and 26,250 male). Other estimates based on the census put children under age one at 18,246, pregnant women at 18,702 and women of childbearing age at 101,263.

The total population of Bonthe is 219,218 (110,164 female and 109,054 male); and number of children under age five at 30,344 (15,243 female and 15,101 male). Other estimates based on the census put children under age one at 8,329, pregnant women at 8,537, and women of childbearing age at 46,224.

Temporal scope

The evaluation covers ASWA-SL from its initiation in 2012 to its completion in December 2019.

7 Criteria and Evaluation Questions

To fulfil its purposes and objectives, the evaluation relied on five (05)OECD/DAC criteria of **relevance, effectiveness, efficiency, sustainability, and impact**, and the additional criterion of **gender, equity, and human rights** as per UNICEF’s evaluation guidance. The evaluation questions (EQs) are grouped under these headings, as per ToRs (see Appendix 1: Terms of Reference). In consultation with UNICEF WCARO, the EQs were rationalised under the OECD/DAC heading to improve consistency and reduce overlaps. The revised EQs are presented below.

The Evaluation Matrix is presented in **Error! Reference source not found.**. The Matrix presents the indicators for each evaluation question, and outlines data collection methods and the main sources of evidence assessed to determine findings. An overview of the EQs is presented in Table 7-1 below.

Table 7-1: ASWA-SL evaluation questions

Criteria	Evaluation Questions
Relevance	<ol style="list-style-type: none">How aligned are the program interventions to the needs as expressed in relevant UNICEF Sierra Leone Country program documents, Government national and sub-national plans, and international policy and standards?To what extent were the different needs and capacities of women and men and the specific needs of children (girls and boys), persons living with disabilities, elderly people, marginalized households) identified during the design of the program?To what extent did the ASWA program components, outcomes, outputs, activities respond to the identified needs of the different groups (men, women, girls, boys, persons with

Criteria	Evaluation Questions
Effectiveness	disabilities, elderly people, marginalized households) in an inclusive manner in its design and planning?
	4. To what extent did the program interventions target specific vulnerable and underserved areas of the country for significant acceleration of water and sanitation coverage and improved hygiene and sanitation practices?
	5. To what extent were the program intervention strategy for achieving the desired WASH outcomes and impact outlined in the program document logical and coherent?
	6. To what extent was program management arrangements and the distribution of roles and responsibilities among implementing partners clear, and aligned with their mandates and capacities?
	7. To what extent did the program reach all the targeted geographical areas and population groups?
	8. To what extent have the expected results of the program been achieved?
	9. To what extent have WASH awareness and practices improved?
	10. To what extent has functional systems for operation and management of WASH facilities been put in place?
	11. What are the unintended results (if any) in terms of improving health and WASH status among the targeted women, children, and communities?
	12. What where the main external factors to UNICEF (e.g. political, emergency, or socio-cultural barriers) that hindered successful attainment of the expected results and how did UNICEF and its partners address these barriers?
	13. What were the program costs compared to its coverage?
	14. To what extent have human, financial and material resources been adequate (in quantity), sufficient (in quality) and distributed/ deployed in a timely manner for achieving results?
Efficiency	15. How effective was partner collaboration with district and local structures?
	16. To what extent was the program well-coordinated with other engagements in the WASH sector?
	17. What where the main internal factors to UNICEF and its implementing partners that contributed to successful attainment of the expected results?
	18. What where the main internal factors to UNICEF and its implementing partners that hindered successful attainment of the expected results and how did UNICEF and its partners address these barriers?
	19. To what extent are communities able and willing to contribute to ensuring the sustainability of the WASH infrastructure provided and continue with hygiene and health practices introduced by the project?
	20. To what extent is the government at national and local levels able and willing to ensure the sustainability of the WASH infrastructure provided and continue with the promotion of hygiene and health practices introduced by the project?
Gender, equity, and human rights	21. To what extent did the program design address gender equity and human rights issues including the particular situation of vulnerable households (elderly persons, persons living with disabilities, very poor household)?
	22. To what extent were vulnerable/marginalized women, children, people living with disabilities, elderly people, child, and female-headed households as well as vulnerable/marginalized communities reached by the program and their specific barriers of access to the provided services addressed?
	23. How have identified equity gaps during design changed over the program lifespan? What is the contribution of the program to these changes?
	24. How strong was the integration of education and child protection with WASH programming and what were the successful integration strategies used?

Criteria	Evaluation Questions
Impact	25. How and to what extent did UNICEF and partners' interventions contribute to addressing gender equity and the prevention of sexual exploitation and abuse?
	26. What are the lasting changes in the lives and wellbeing of women, children, families, and communities targeted by the program?
	27. To what extent has the program contributed to improving the provision of WASH by the government at national and district levels?

8 Methodology

8.1 Approach of the evaluation

The approach was theory-based and utilisation focused and drew upon a mixed-method data collection combining quantitative and qualitative methods for primary data collection as well as quantitative and qualitative secondary data from available ASWA-SL documentation. The back-bone of the quantitative approach was a survey based on a structured questionnaire similar to the WASH SDG baseline survey which also served as baseline for ASWA-SL²⁰, in combination with available statistical data. In addition, structured data collection tools were used for recording observations of the facilities implemented through the programme.

For the qualitative enquiry, semi-structured questionnaires were used for key informant interviews (KII) with key implementing partners and national and district stakeholders and for the focus group discussions (FGDs) with communities and end beneficiaries. Particular emphasis was placed on the impact/ effect on the key beneficiaries in the three programme districts: children under five, adolescent girls and boys, and women. Women, men, and youth groups were consulted to ensure that their opinions and priority needs were fully captured in the evaluation of the programme design, results, and challenges. The consultations also included female and male household heads, out-of-school children, persons living with disabilities, local community leaders, members of WASH Committees, teachers, school management committee members, community health workers, health facility staff, and religious leaders.

8.2 Sampling methods and data collection tools

8.2.1 Quantitative Sampling Strategy

The quantitative sampling design was based on purposive and random sampling method. The end-line survey aims for a district-level *before and after* comparison between the 2016 *SDG baseline survey*²⁰ and the 2020 end-line survey on the changes that occurred on the key ASWA indicators that might be attributed to the ASWA interventions. The 2016 SDG baseline survey selected Enumeration Areas (EAs) and sampled 30 localities in each of Bonthe and the old Koinadugu districts. For each of the localities visited for the SDG baseline survey 20 households were selected giving a total of 600 households in each district, the actual numbers of households sampled were very close to this. This figure was used as a guide to the magnitude of the household sample required. However, a preliminary comparison of the chiefdom/ section/ locality data in the UNICEF progress work sheets with similar data in the baseline results showed that in some cases there were very few or no ASWA interventions in the 2016 SDG baseline EAs. As discussed below the evaluation team opted for 40 localities in Bonthe and 40 localities shared between Koinadugu and Falaba with a sample of 15 households in each locality.

After obtaining coordinates for most of the ASWA interventions we compared these locations on GIS with shape files of the EAs where the 2016 SDG baseline survey was carried out and this gave a more accurate picture which showed a smaller overlap than indicated in the preliminary assessment. In the following

²⁰ The Baseline was conducted when Koinadugu was single district but was later subdivided into two districts for the purpose of the before and after comparison Koinadugu and Falaba are treated as a single district.

tables yellow shading indicates overlap between baseline localities and ASWA interventions of less than 15%.

Table 8-1: CLTS localities falling within baseline EAs.

Sampling of CLTS	Bonthe	Falaba	Koinadugu
Total localities with CLTS	335	170	291
Localities in EA sample	84	10	28
Localities in EA sample with CLTS	69	6	17
% of all CLTS localities sampled by baseline	20.6%	3.5%	5.8%

Table 8-2: WINC localities falling within baseline EAs.

Bonthe - WINC	No. of WSs			Population		
	Served	Sampled	% sampled	Served	Sampled	% sampled
Total	22	3	13.6%	5,082	1,202	23.7%
HDW/ HP	18	2	11.1%	3,604	514	14.3%
Rehab. HDW/ HP	1	0	0.0%	177	0	0.0%
BH/ HP	3	1	33.3%	1,301	688	52.9%
Falaba - WINC	No. of WSs			Population		
	Served	Sampled	% sampled	Served	Sampled	% sampled
Total	12	8	66.7%	10,104	8,207	81.2%
RWH	8	6	75.0%	1,229	771	62.7%
GFS	4	2	50.0%	8,875	7,436	83.8%
Koinadugu - WINC	No. of WSs			Population		
	Served	Sampled	% sampled	Served	Sampled	% sampled
Total	9	2	22.2%	17,671	14,785	83.7%
HDW/ HP	2	0	0.0%	635	0	0.0%
Rehab. HDW/ HP	11	1	9.1%	6,589	290	4.4%
BH/ HP	4	0	0.0%	2,354	0	0.0%
Spring prot.	1	0	0.0%	380	0	0.0%
GFS	4	1	25.0%	22,760	14,495	63.7%

We proposed to UNICEF that we would then split the sample in the approximate ratio of 70% to 30% respectively between the treatment localities (where there had been ASWA interventions) and 'control' localities (where the baseline survey had been carried out but where ASWA had not been active).

The few localities where the baseline had been carried out and where there had been ASWA interventions as well were included as far as possible.

The 2016 SDG baseline results would be taken as representative of their respective districts as a whole, which was the intention of that survey, and would provide a starting point against which to compare the results of the interventions, as captured in the survey of the treatment localities, (end line survey).

The results from the second, repeated surveys in the baseline localities would provide information on background changes independent of the ASWA interventions. An example of this background change could be national messages on hand washing and hygiene connected with the Ebola and Covid-19 epidemics. This approach was accepted by UNICEF and the detailed sampling was made.

8.2.1.1 Sampling process

Random and purposive sampling approaches were considered. Random sampling allows statistical calculation of confidence limits for a given sampling set up. For large populations, a relatively small sample can provide reasonable confidence, and this was the case with the household end line surveys. With small populations however, proportionally larger samples are required, and this was the case with the WINC and WINS interventions. The large difference between the numbers of CLTS interventions and the numbers of WINC and WINS interventions meant that random sampling of the CLTS localities might not have resulted in an adequate or representative sample of WINC and WINS interventions and some types of intervention might not have been represented at all. This would have required additional visits to localities to obtain a representative sample of and time constraints did not allow this. For this reason, a purposive sampling approach was used which allowed us to ensure representative sampling by considering a number of characteristics.

The selection of treatment and baseline localities rather than including all localities in the chiefdom was also based on a purposive approach.

CLTS sampling

In selecting CLTS localities the following characteristics were considered:

- Locality population size, so a mixture of large, medium, and small localities
- Chiefdoms, the sample should approximately reflect the actual numbers of interventions in each chiefdom. This meant that in cases where there had been very few interventions,(e.g. Kamukeh chiefdom in Koinadugu, 1 intervention), these chiefdoms were omitted.
- Implementing Partners should also be represented in approximate proportion to the number of localities where they had been active.
- In view of the time constraints for carrying out the field work, localities with a representative sample of WINS and WINC interventions were also included so that survey teams could carry out household surveys and survey WINC and WINS facilities during the same visit.
- Localities were grouped so as to reduce time travelling between them.

The availability of coordinates for the processed ASWA interventions allowed the locations to be projected in QGIS and compared with administrative boundaries and other features and this facilitated the preparation of the sample. In each sampled locality up to 15 households were selected using the random walk method.

Assuming the purposive approach described above produced a sample equally as valid as a randomly selected sample the confidence²¹ limits for the designed and realised samples are as follows:

²¹ Guidance for calculation of confidence limits: www.surveysystem.com/sscalc.htm

Table 8-3: Confidence limits for planned CLTS samples

	ASWA CLTS		Design sample			Confidence interval
	Localities	HHs	Localities	HHs/locality	HHs	
Bonthe	335	10,826	31	15	465	+/- 4.45%
Falaba & Koinadugu	461	14,414	31	15	465	+/- 4.47%

Table 8-4: Confidence limits for realised CLTS samples.

	ASWA CLTS		Realised sample		Confidence interval
	Localities	HHs	Localities	HHs	
Bonthe	335	10,826	31	410	+/- 4.75%
Falaba & Koinadugu	461	14,414	15	219	+/- 6.57%

WINC sampling

Localities with WINC interventions were selected so as to provide a representative sample using the following characteristics:

- To provide a sample which approximately reflected the proportions of the different types of facilities. In Koinadugu and Falaba there were 8 gravity flow water systems (GFS) which combined served a very large proportion of the population served by ASWA, so the number of these systems sampled was increased to reflect their relative importance.
- Localities were selected to sample the different implementing partners. This was made simpler as to a certain extent IPs preferred different water supply technologies.

WINS sampling

A similar approach to WINC sampling was used for WINS projects but in this case there were fewer water supply technologies to take into account. The sanitation interventions were relatively uniform between schools, so no additional steps were required to achieve a representative sample of these facilities.

8.2.1.2 Problems and limitations with sampling method

The term treatment and control are used in a simplified fashion to connote comparison group of a *before and after* method. They do not represent the fundamental experimental control-treatment design. No shape file was available for roads and rivers, and while this eliminated any possibility of bias towards more accessible localities it also resulted in some practical difficulties in the field, for example to reach Yiraya in Falaba the team had to pass through Guinea.

The severe road conditions and longer distances in Koinadugu and Falaba also resulted in fewer of the sampled localities being visited in these districts. More localities could have been visited by avoiding less accessible locations, but this would have made the sample less representative.

The small numbers of localities or schools with ASWA interventions would have required proportionally large samples to achieve statistically valid results, see table below, and this would not have been realistic

in view of time and resource limitations. For this reason, the results cannot be used to estimate the overall functionality or other characteristics of the facilities in the ASWA project as a whole .

Table 8-5: Samples for statistical significance of WINC and WINS surveys

District	ASWA WINC		ASWA WINS	
	Localities	Sample required*	Schools	Sample required*
Bonthe	26	24	70	59
Falaba & Koinadugu	32	30	60	52

*Sample required to achieve 95% confidence level and 5% confidence interval for 50% positive response.

8.2.2 Qualitative Sampling Strategy

The primary data collection method used both qualitative and quantitative sampling techniques. The purpose of the qualitative enquiry is to learn from respondents who have knowledge and experience of the planning, implementation and deriving benefits from the results of the ASWA interventions. The sampling strategy drew from purposive sampling techniques²² to recruit participants who can provide in-depth and detailed information about the ASWA program that is been evaluated. The techniques were deliberate and subjective choices that ensure participants have knowledge and experience of the program at the execution, implementation, and beneficiary levels.

The purposive sampling target MDAs and Local councils that were involved in the ASWA planning, oversight, and implementation, as well as communities and schools that directly benefited from these interventions i.e. community and school water supply, and the CLTS and SLTS. The purposive sampling target section of respondents for the Key Informant Interviews (KII) and for the focus group discussions at community Level.

The **Target Respondents** for the KIIs were planned to be conducted at national, district and community levels. The following KIIs were purposively selected:

1. Executing MDAs:

- i. Ministry of Water Resources (MWR), Directorate of Water resource (Director/Deputy, Head of M&E and Rural Water supply Units) with a focus on Water Supply responsibilities and ASWA-SL interventions.
- ii. Ministry of Health and Sanitation (MHS) Department of Environmental Sanitation (Director/Deputy, Head of M&E and Senior WASH Officer) focusing on Sanitation mandate of the sector and ASWA-SL intervention.
- iii. Min. of Basic and Senior Secondary Education (MBSSE) (Director of planning and head of WASH in Schools) focusing on school WASH and ASWA interventions.

²² See Statistic Solutions (2020) Qualitative Sampling Technique

iv. Min. of Local Government and Community Development (MLGCD), (Director DecSec, Director of Local Government and M&E Manager) focusing on Decentralized WASH services and ASWA-SL.

2. Non-Executing MDAs:

- i. Chief Gender Specialist, Ministry of Gender and Children Affairs (MGCA), and the
- ii. Commissioner/Deputy, National Commission for Persons with Disability (NCPD)

3. UNICEF Sierra Leone Country Office:

Chief WASH Officer, WASH Specialist, Planning & Monitoring, Education, Child Protection, EPSP Section

4. District Councils in Bonthe and Koinadugu:

The KIIs targeted the Development Planning Officer/the M&E Officer/ the WASH Officer as well as the District Health Management Team and the MWR WASH Engineers and Water Point Mappers stationed in the Districts/ Regions.

5. District-level Implementing Partners (IPs):

- i. NGO Implementing Partners

6. Community/-Institutional Level:

- i. Head Teacher and a female teacher, in the target beneficiary communities' primary schools
- ii. Midwife/head, Peripheral Health Units (PHU) in beneficiary communities

7. Private sector service providers

Private sector actors such as hand pump mechanics, hand pump spare parts dealers, sanitation materials manufacturers and suppliers.

8. Focus Group Discussion (FGDs)

The selection of FGD participants was done in consultation with the Community Leadership with the aim of a balanced representation of the groups in the communities. At the community entry engagement of the community leaders the purpose and the type of the Focus groups to be target was discussed. The community leaders facilitated the identification of the relevant group targeted.

Table 8-6 presents the target and actual respondents of the KIIs and FGDs. A total of 280 respondents were targeted and 242 (86%) respondents were actually interviewed.

Table 8-6: Key Informant Interviews and FGD Respondents

Agency	Description	Target Respondents	Actual
1. Executing MDA	MWR	3	2
	MHS	3	2
	MBSSE	2	1
	MLGCD	3	1
2. District Councils & decentralised Agencies	Bonthe	5	3
	Koinadugu	5	4
3. IPs	Implementing Partner	5	5
4. Community Institutions	Primary Schools	20	15
	PHU	10	7
5. Private Sector	WASH SME & self-employed	-	2
6. FGDs	Chief and Elder	56	52
	Women's Group	56	48

	Youth	56	44
	Pupil	56	56
Total	Respondents	280	242

8.2.3 Secondary data collection

The Secondary data collection/ desk review includes a review of programme reports; surveys and monitoring reports; reports of similar evaluations, research, and studies; and databases such as:

- **ASWA programme documentation**, including the proposal prepared by the UNICEF Sierra Leone office and the regional ASWA-WCA Programme Document for nine countries as well as the results framework and the theory of change, and other relevant documents, such as capacity assessments, internal UNICEF notes, and minutes of meetings from the programme formulation period.
- **Implementation records**, such as documentation on ASWA-SL arrangements including ToRs and contracts with Implementing Partners, contractors etc as well as progress reports, minutes of Steering Committee meetings, minutes of District WASH team meetings, inspection and supervision reports, Akvo/UNICEF project monitoring data/ dashboard, annual budgets and financial reports, and sustainability reports.
- **Statistics Sierra Leone (SSL) reports and data**, such as the 2016 WASH SDG baseline study, 2015 housing and population census, 2019 multidimensional child poverty report, 2019 demographic and health survey (DHS), 2019 multidimensional poverty index (MPI), 2017 Multi-Indicator Cluster Survey (MICS) and other relevant reports on poverty and socio-economic conditions.
- **MoHS Statistics and reports** on health indicators, sanitation including CLTS progress and status.
- **MWR Statistics and information** from the water sector information systems such as Water Point Mapping (WPM) and other data available from the MWR M&E.
- **The national WASH sector policy and strategy framework**, with documents such as the national water policy, the rural and small town strategy documents, the National Rural Water Supply and Sanitation programme, the WASH M&E framework report, M&E reports, Akvo reports, sector websites, Akvo monitoring tools, the Decentralisation Policy, public health strategy documents (EPICOME), the PRSP and national development plans, national and district WASH plans (annual and medium term), WAP studies performed for other WASH projects.

8.2.4 Primary data collection

Qualitative and quantitative data was collected through household surveys, key informant interviews (KII), focus group discussions (FGDs), community meetings, and observation. Relevant stakeholders were engaged, including staff of the national level ministries, departments, and agencies (MDAs), district councils, communities, and institutions in the target areas.

Key Informant Interviews (KII)

Purpose: The aim of the KIIs was to contribute to the evaluation objective of accountability and learning by engaging both the stakeholders that were involved in the planning and/ or in the implementation of the program and other relevant non-executing agencies that are involved with Gender, Equity and Human Right issues. The KIIs allowed the evaluation team to obtain different experiences, views and perspectives of key stakeholders related to the program and relevant policy actions.

Target Respondents: The KIIs were planned to be conducted at national, district and community levels. The following KIIs were targeted:

The KIIs targeted respondents from the executing MDAs and relevant non-executing MDAs, at national level. An initial interview was arranged with two to three key staff in the MDA followed by individual interviews with specialists as needed.

At district level, the WASH team in the Bonthe and Koinadugu Local Councils, District Health Management Team (DHMT) and the District MWR Engineers were interviewed. Initial common meetings were followed by individual interviews as needed.

At the community level, head teachers and female teachers were interviewed in a selection of schools also covered by the end-line survey. KII were also conducted with the responsible persons of community peripheral health units to gather information mainly on the incidence and prevalence of water and excreta related diseases and mortality.

To prevent the spread of COVID-19, face-to-face interviews were carried out with strict social distance (two meters) and the provision and use of face masks for both the respondents and data collectors.

The KIIs were conducted as semi-structured interviews with interview guides elaborated for each stakeholder type, and the responses were voice recorded and notes were taken manually and using tablets. The KII guides are provided in Appendix 5 Data Collection Tools. For each KII, the evaluation team first established the respondents' area of expertise and experience with ASWA-SL to focus the discussion on topics that the interviewee was knowledgeable about and areas of concern to the interviewee.

Focus Group Discussions (FGDs)

FGDs were conducted to contribute to the evaluation objective of accountability and learning from end beneficiaries at community level. They also enabled triangulation and verification of the results presented in progress reports. The FGDs were conducted in communities and schools that benefited directly from ASWA-SL. The focus groups covered the following stakeholder categories:

- Community Leadership including Chiefs and elders.
- Women's groups
- Youth groups (male and female with a special interview on women specific questions)
- Pupils (boys and girls with a special interview on girl specific questions)
- School Management Committees and Parent Teacher Associations including male and female teachers.

The FGDs were carried out in a selection of communities also covered by the end-line survey. They were conducted as semi-structured discussions with FGD guides elaborated for each stakeholder type, and the responses were voice recorded and notes were taken manually and using tablets. The FGD guides are provided in Appendix 5 Data Collection Tools.

The FGDs were administered by the field teams. The focus group participants were identified in consultation with the District WASH Team, the IPs, and the community leadership as well as at the initiative of the survey supervisors. The selection respected the 'do-no-harm' principle and avoided stigma attached to participants' situations.

The FGDs were limited to between five and seven participants per group. The FGDs were done in an open or well-ventilated and safe area for both the respondents and the facilitators following strict social distancing rules (two meters) and providing and using face masks and hand sanitizers by both the respondents and data collectors.

End-line survey in communities and institutions

A household survey was conducted to contribute to the evaluation objective of accountability and learning from experiences of the households and institutions during the implementation of the projects and the results and outcomes for the respective households and institutions. The survey provided quantitative data on results collected at household and school level and enabled a broad coverage of end-beneficiaries. The survey targeted 30 enumeration areas (EAs) and 15 respondents per EA (450) in each of the two target districts (Bonthe and Koinadugu/ Falaba) to allow for comparison to the initial SDG baseline survey with a similar sample size.

The survey results were complemented by FGD findings on the effects of ASWA-SL. As well known in Sierra Leone traditionally and also confirmed by the FGDs, WASH services have a tendency to be seen as the responsibility of women in the households, both as caregivers and the main collectors and users of water in the household. For these key reasons, mainly women (young, adults and the elderly) were targeted by the survey.

A structured questionnaire was used, and the responses were recorded with tablet/mobile phone data collection instruments. The questionnaires are presented in Appendix 5 Data Collection Tools.

Observation of facilities constructed.

The facilities constructed by ASWA-SL were inspected to contribute to the evaluation objective of accountability and learning from the functionality and quality of the WASH services provided by the programme at community level. It enabled the verification of physical results and assessment of the appropriateness, quality, maintenance, and functionality of the infrastructure constructed by the programme. The following types of infrastructure were observed:

- Community water supply
- Community/household sanitation
- School water supply
- School Sanitation services

The observations of facilities constructed with ASWA-SL support were carried out in a selection of communities also covered by the end-line survey.

A checklist of observation tools was developed for the assessment of the appropriateness, functionality and quality of WASH services supported by the project. Photos were taken of the infrastructure to document quality and operation and maintenance (O&M) status. The findings were recorded with tablet/mobile phone data collection instruments. The observation checklist is included in Appendix 5 Data Collection Tools. detailed findings are presented in ‘Appendix 7 Facilities Observations Checklist’.

8.2.5 Data on ASWA interventions

The data provided on interventions was limited to a single workbook containing worksheets for CLTS interventions, Wash in community (WINC) facilities and Wash in schools (WINS) facilities. The types of data presented in these worksheets were as follows:

	ID and location data	Population details	Progress reporting	Other data
CLTS	Chiefdom/section locality	Disaggregated population data	Numbers of facilities constructed	Implementing partner
WINC	Chiefdom/section locality	Disaggregated population data	Type of facility constructed	Implementing partner
WINS	Chiefdom/section/school name and type	Disaggregated school enrolment data	Type of facility constructed	Implementing partner

8.2.5.1 Location data

The most surprising omission from the data was position coordinates. Position coordinates were required by the evaluation team for the following reasons:

- Projecting the data onto GIS gives an immediate impression of the distribution of the interventions and facilities and their relationship with one another.
- Accurate positions also facilitate the checking and processing of data, for example, the actual position in GIS in relation to administrative boundaries allows checking and correction of the chiefdom, section, and locality names by comparing with data from other sources. Errors in coordinates, if manual transcription used, are immediately visible if projected onto satellite imagery as the position may not coincide with a settlement or school.
- Use of GIS facilitates the sampling process.
- GIS also allows more visually instructive presentations to be made.

The lack of coordinates meant that the ASWA administrative location data would have to be matched with location data from other sources²³ in order to obtain the coordinates, however, this data also had a large number of inconsistencies, for example:

- Some section names in the lists did not match any actual section names for these districts.
- In many cases the chiefdom, section and locality names were not consistent with each other.
- Some locality names suffered from errors of transcription, and this required investigative work in each case.
- Comparing the administrative location names to those in the 2015 Population and Housing Census showed many differences in spelling which prevented the effective use of Excel formulae such as INDEX/MATCH. This approach only captured 2-3% of the localities so the remaining 97-98% had to be corrected manually.

²³ The following data bases were used as sources of coordinates: 2015 Population and Housing Survey (PHC 2015); 2018 Education Management Information System survey (EMIS 2018); 2016 Water Point Mapping survey (WPM 2016); Baseline survey database (Baseline 2016)

- Some location data was missing, e.g. in the WINS worksheet there was no column for locality name, this was included in the name of the school, but was missing for 14 of the schools.

Some examples of the of incorrect data with brief explanations of the corrections applied are included in ‘Appendix 6 ASWA Communities and Survey Samples’.

8.3 Data collection, Analysis and Quality Assurance

The analysis carried out comprised:

- i. A comparative analysis of the baseline and end-line survey data
- ii. An analysis of the evaluation criteria and the information related to the EQs.

In addition to analysis the evaluation criteria, the effectiveness of ASWA-SL was assessed from the achievement of the reported results compared to the programme results framework. The analysis in the overall evaluation matrix (see: **Error! Reference source not found.**) was used to identify under each EQ and the indicators defined for the EQs, the type of information expected from the document review, the KIIs, the FGDs, the end-line surveys and the observations checklist, respectively. References were included for the respective questions on the guides used for the KIIs and FGDs to enable referring to the relevant answers for the qualitative analysis.

The analytical tools applied included **triangulation**: Data from different primary sources (KIIs, FGDs, end-line survey, observation of facilities) and secondary sources (baseline survey, programme documentation, statistical data) were analysed and compared to validate and assess the strength of the findings. Findings from different sources were compared, both in terms of comparing stakeholder consultation and site inspection data with information from documents, but also by comparing findings from different KIIs and FGDs, and comparing information obtained from KIIs/FGDs with different stakeholder types in order to understand different perspectives.

Special attention was paid to assess the extent of achievement of the intended results, especially with respect to open defecation and its resultant effect on children’s sanitary environment both at home and in schools, and the benefit of reducing waterborne diseases and learning outcomes for children.

The impact evaluation was based on a comparison of the situation before and after the programme, establishing differences between the baseline benchmarks and the end-line survey data.

8.3.1 Timeline of the evaluation

A contract for undertaking the evaluation (contract no 43288363) was signed between UNICEF and PEMconsult on the 11th of November 2019, and the inception period for the evaluation started immediately after contract signing. The final draft Inception report was submitted on the 5th of February 2020 and subsequently discussed with the Evaluation Reference Group (ERG) on the 21st of February 2020 and thereafter finalised and submitted on the 10th of March 2020.

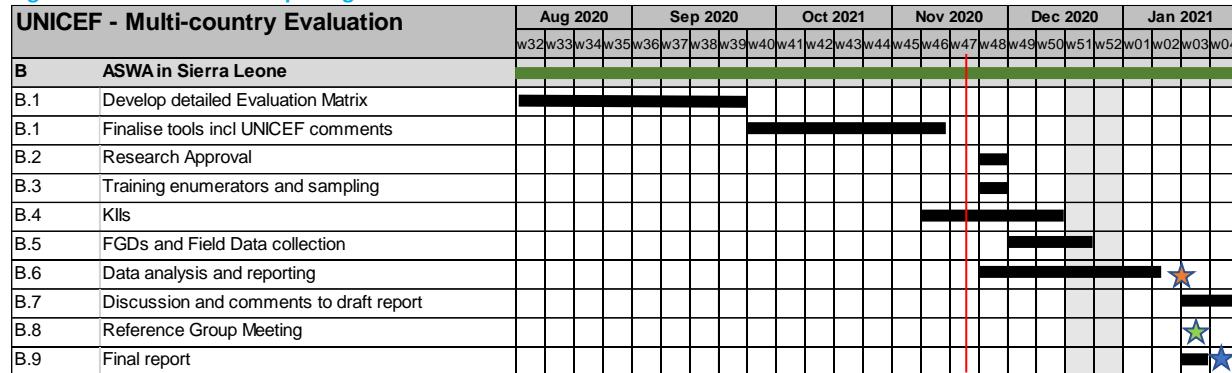
The emergence of the COVID-19 global pandemic resulted in some delays in the implementation of the evaluation as travel restrictions affected field work and required the development of detailed data

collection tools for the Sierra Leone-based team members with the internationally-based team worked remotely. The data collection modalities and tools were finalised in November 2020. A document review and drafting of a preliminary report, based on the desk review was carried out in October – November 2020.

The data collection for the evaluation started immediately after finalising the tools, 11 months after the end of the ASWA programme. Key informant interviews (KIIs) with national stakeholders were carried out in November – December 2020. Mobilisation and training of enumerators was carried out in November 2020 and the fieldwork, including focus group discussions (FGDs) at community and school level, interviews in districts and communities, household and school surveys, and facility observations were carried in December 2020.

The qualitative and quantitative data analysis was done in December 2020 – January 2021. A draft evaluation report was submitted in January 2021. The timeline for the completion of the evaluation is illustrated in Figure 8-1.

Figure 8-1:Timeline for completing the evaluation.



8.4 Validation of Findings

The **Evaluation Reference Group (ERG)** consisting of UNICEF, Statistics Sierra Leone (the country's Central Statistics Office), Ministry of Planning and Economic Development, National Monitoring and Evaluation Directorate, Ministry of Water Resources and Ministry of Health and Sanitation officials were consulted during the inception of the evaluation.

This draft report was presented and discussed at a “findings and sense-making” workshop. This event provided the opportunity for UNICEF and a selection of its partners to validate and respond to the initial evaluation findings. Prior to the workshop, an electronic copy of the draft report was shared with UNICEF and relevant stakeholder for reviewing. The comments received on the draft report were assessed and the final evaluation report elaborated, taking the comments received into consideration.

8.5 Ethical Considerations and Evaluation Principles

The evaluation fully adhered to the ethical standards of UNICEF (e.g., Norms and Standards for Evaluation; Report Standards Checklist for Evaluation Reports) and the United Nations Evaluation Group (UNEG²⁴). During the evaluation inception phase, the evaluation teams in dialogue with UNICEF planned how data collection would be conducted in line with UNICEF's ethical standards, including UNICEF's procedures for ethical research involving children.

The evaluation team members had no prior engagement in ASWA-SL. The six obligations for evaluators (independence, impartiality, credibility, conflicts of interest, honesty and integrity, and accountability) were duly applied in the conduct of the evaluation as follows:

- Independence: None of the evaluation team members had any prior or ongoing engagement in ASWA-SL.
- Impartiality: A wide range of stakeholders were consulted to obtain different perspectives and cover different interests – covering all types of stakeholders, including UNICEF staff, IPs, GoSL managerial and technical staff at central and sub-national level, development partners, school management, teachers, committees, different community groups, incl. leaderships WASH committees, VSLAs, women and female-headed households, youth (women and men), people living with disabilities, school children (girls and boys).
- Credibility: The terminal evaluation team comprised senior experts in evaluation methodologies, surveys, WASH, infrastructure, gender. Data and information from different sources (primary and secondary, quantitative, and qualitative) were compared and triangulated, and major discrepancies found are clearly described in the evaluation report.
- Conflicts of interest: None of the evaluation team members had any prior or ongoing engagement in ASWA-SL.
- Honesty and integrity: All experts on the evaluation team were well-known to PEMconsult and trusted. All primary data collected by national field team was analysed by international experts. An evaluation expert that had not been involved in the data collection and analysis carried out a thorough quality assurance of the draft report.
- Accountability: The evaluation team maintained a dialogue with the client. Stakeholders were given the opportunity to comment on key findings (positive and negative). The draft report was shared with the client for comments. All comments received were carefully assessed.

Care was taken to present facts, findings and issues, conclusions, and recommendations in a comprehensive and balanced manner; based on data and observations that are considered reliable and trustworthy with respect to the quality of the instruments, procedures and analyses used to collect and interpret the information. The evaluation had ethical clearance from the Sierra Leone Research and Ethical Council, Ministry of Health and Sanitation and respected the ethics of research when working with diverse population groups. The team respected the right of institutions and individuals to provide information in confidence and ensured that sensitive data cannot be traced to their source, unless prior and informed consent was given.

²⁴ For example UNEG (2008) Code of Conduct for Evaluation in the UN System; UNEG (2010) Quality Checklist for an Evaluation

With regard to **handling of sensitive topics of child abuse, risks of sexual exploitation, and gender-based violence from communities**, during the early discussion with UNICEF Sierra Leone's Child Protection Specialist and Education Officer, the following recommendations²⁵ were developed, communicated to the field team, and applied in the data collection:

- It was explained clearly to respondents that responses were anonymous and will be treated confidentially, and that the evaluation team will not intervene in the community, but only use the responses for learning and to inform future programming. It was also clarified that the evaluation would discuss risks and mitigating factors without discussing actual cases.
- School Management Committee and teachers at schools were interviewed.
- Women's group leaders were consulted.

The Team Leader, PEMconsult established the approach to ethics during the inception phase and made team members aware of it:

1. The evaluation shall adhere to independent and objective principles of an evaluation.
2. Evaluation team shall adhere to high quality of service and good evaluation practices based on standards prescribed in United Nation Evaluation Group (UNEG).
3. Evaluation team shall be responsible for identifying the need for and securing any necessary ethics' approval for the study in the country.
4. The evaluation team and representatives in fieldwork shall avoid harm to participants in studies including women and children.
5. Participation in evaluation should be voluntary based on **informed consent**, and the evaluators and representatives should ensure **confidentiality** of information, privacy, and anonymity of study participants.
6. Ensure that the evaluation team respected the right of institutions and individuals to provide information in confidence, and the sources of specific information and opinions contained in this report are not disclosed, except where necessary and only after confirmation by the person consulted.
7. The evaluation team shall respect ethical consideration of women, girls and boys, the subjects of the evaluations.
8. The evaluation team should operate in accordance with international human rights conventions and covenants.
9. The evaluation team shall respect all sensitive cultural norms.
10. The Research and evaluation team of the evaluation is completely independent of those implementing the ASWA intervention or programme under study.
11. The evaluation team has ensured particular emphasis on the participation of women and socially excluded groups.

²⁵ Reference was also made to: Graham, A., Powell, M., Taylor, N., Anderson, D. & Fitzgerald, R. (2013). Ethical Research Involving Children. Florence: UNICEF Office of Research - Innocenti.
<https://childethics.com/home/compendium-downloads/>

8.6 Limitations and mitigation measures

A number of limitations affected the evaluation. These limitations related either to the conduct of the evaluation activities (e.g. COVID-19 affecting data collection and the team's in-country interactions), or to the availability of information, in particular vis-à-vis the **impact** and **sustainability** criteria.

The evaluation was not expected to include an opinion or audit of the accounts or the administration of ASWA-SL funds. Hence, the findings do not address the efficiency in terms of proper accounting of funds and possible misappropriation.

A major limitation of the evaluation was the timing and design of the **baseline survey** for ASWA-SL. The baseline was conducted in 2016, four years after the ASWA-SL programme was initiated, and was a national study carried out by Statistics Sierra Leone with support from UNICEF and other partners, such as AfDB, to set a general baseline for the WASH related SDG indicators. UNICEF used this as a baseline for districts covered by ASWA-SL.²⁶ Since the baseline survey was conducted three years into effective programme implementation, some tangible WASH results might well have been delivered in a number of beneficiary communities prior to the baseline. Hence, it was not possible to fully establish and quantify the **impact** of ASWA-SL. In the time between start of ASWA-SL in 2013 and the baseline survey in 2016, Sierra Leone was seriously affected by the Ebola pandemic, so the baseline described the post-Ebola situation and while the differences (baseline to end-line) do not describe development through the implementation period, it clearly indicated changes attributable to ASWA-SL activities.

Another limitation was **staff turnover**, particularly with respect to international UNICEF staff, who are on a staff rotation, and the associated loss of institutional memory of the early years of ASWA-SL implementation and in particular the design of ASWA-SL. It was also difficult to access documents from the early stages of ASWA-SL. The evaluation team also did not have access to complete data on the communities included in ASWA-SL to assess the total number of communities and the target populations. The available data did not have coordinates for the location of the communities making sampling for the end-line survey more difficult²⁷.

A proper **analysis of impact** would ideally require counterfactual information of what those outcomes would have been in the absence of the intervention. Although the ToR stated that an analysis of two comparison districts were to be included in the end-line survey, this was deemed of limited value as other donors besides UNICEF were supporting WASH activities in the remaining districts, and as such there are no "control" districts available in Sierra Leone.

Hence, the methodology employed for assessing impact was partly qualitative and descriptive in nature. At the community level this is appropriate, and issues of attribution are of less concern as UNICEF had defined programme areas. However, when considering impacts at the national level related to the enabling environment, establishing the counterfactual was more challenging.

²⁶ The ASWA-SL baseline report is dated 2018.

²⁷ The identification of location of the ASWA-SL target communities had to be established manually by comparing locality names with census data – this is very cumbersome due to different spelling of locality names.

Although the evaluation attempted to gauge the impact of the program on the entire target population, it placed emphasis on the impact of the program on children (girls and boys) under age five, adolescent girls and boys, and women. A number of evaluation questions (EQs) addressed the results in relation to gender, age and people with disabilities and information is provided in particular from the FGDs and KIIs at local level. It was, however, in most cases impossible to obtain monitoring data that was disaggregated accordingly.

Attribution of results was challenging for the evaluation, as the extent to which other WASH programmes in Sierra Leone, or inputs from other stakeholders have contributed to changes observed, was not always clear. Smaller programmes and grants were active in the same thematic area. The DGIS funded ASWA-SL was implemented in two districts, while at the same time the UK Department for International Development (DfID) funded ASWA-SL in rural 11 rural districts, with similar objectives, while in addition also focusing on WASH in health centres. The DfID-funded ASWA-SL also targeted improving the enabling environment for WASH and strengthening policies at the national level. Efforts were made to clearly highlight areas where other organisations may have contributed to the changes observed.

The available ASWA-SL documentation contained limited evidence on the specific outcomes for youth, elderly, people with disabilities and the poor, due to a lack of disaggregated data available for these groups. This posed a limitation for the ability to quantify the outcomes for vulnerable groups, as included in the various EQs and indicators. The assessment of the outcomes for the groups was thus mainly based on the primary qualitative field data collected by the evaluation. The evaluation team was not supplied with programme design documents relating to assessments of vulnerability of the target population, which would have been a valuable source of information.

The information provided to the evaluation team in the form of the December 2019 Progress report workbook was incomplete, contained numerous errors and also did not provide any position coordinates for any facility. The evaluation team spent considerable time correcting and completing the data and also matched about 90% of the localities with SSL localities and so was able to obtain locality position coordinates. This is further detailed in Chapter 8.2.1.2 and in Appendix 6 ASWA Communities and Survey Samples.

There still remain errors in this information, for example facility types are sometimes incorrect or may not actually exist at the locality indicated.

The 10 CEDA solar BH piped water systems in Bonthe were also omitted, together with an unknown number of similar systems built by WVI.

The restrictions on movement in response to the COVID-19 pandemic affected the data collection. Field trips were postponed, and the international evaluation team members could only to a limited extent participate in a limited number of facility observations and in a limited number of KIIs through VoIP services. The survey, FGDs and most KIIs were carried out by the national team.

Table 1 : Limitations and mitigation measures of the evaluation

Limitations and constraints of the evaluation	Mitigation measures applied
Timing of ASWA-SL baseline survey, limiting findings made on the Impact criteria	Evaluation team used other secondary sources of information
Sample for baseline survey provide district level	Assess the result of the baseline and end-line survey

Limitations and constraints of the evaluation	Mitigation measures applied
statistics while the end-line focus on the ASWA-SL target communities	considering these limitations
Time interval since inception of the programme and availability of staff and documentation	Identification of KIIs with persons involved in the early activities of the programme and use of available programme reporting
COVID-19 pandemic and international travel restrictions restricting normal in-country team and client interactions	Interactions and consultations carried out using Zoom and other Internet communication applications
The COVID-19 pandemic impact on field data collection	Rescheduling of field work until the COVID-19 situation in Sierra Leone allowed for inter-district travel and community field work
Unavailability of disaggregated data in ASWA-SL reporting	Collection of information through KIIs and FGDs and disaggregated data through end-line surveys
General availability of reports on the ASWA Programme and completeness and accuracy of data provided on ASWA-SL target communities and completed facilities	Matching data with SSL data on localities to carry out sampling and planning for field work.

9 Findings and Preliminary Conclusions (by criterion)

9.1 Relevance

Criterion	EQ
Relevance	<ol style="list-style-type: none">1. How aligned are the program interventions to the needs as expressed in relevant UNICEF Sierra Leone Country program documents, Government national and sub-national plans, and international policy and standards?2. To what extent were the different needs and capacities of women and men and the specific needs of children (girls and boys), persons living with disabilities, elderly people, marginalized households) identified during the design of the program?3. To what extent did the ASWA program components, outcomes, outputs, activities respond to the identified needs of the different groups (men, women, girls, boys, persons with disabilities, elderly people, marginalized households) in an inclusive manner in its design and planning?4. To what extent did the program interventions target specific vulnerable and underserved areas of the country for significant acceleration of water and sanitation coverage and improved hygiene and sanitation practices?5. To what extent were the program intervention strategy for achieving the desired WASH outcomes and impact outlined in the program document logical and coherent?6. To what extent was program management arrangements and the distribution of roles and responsibilities among implementing partners clear, and aligned with their mandates and capacities?

9.1.1 EQ1 Relevance – Alignment

How aligned are the program interventions to the needs as expressed in relevant UNICEF Sierra Leone Country program documents, national and sub-national plans, and international policy and standards²⁸ ?

UNICEF objectives

The strategies used in ASWA-SL were strongly aligned with UNICEF's strategies – at the country level, and at the global strategy level in WASH. The strategies in ASWA-SL aimed at addressing the challenges as described in the UNICEF Country Programme Documents CPDs (see section 1.0) in the period (CPD 2013-2014; CPD 2015-2018) that consistently demonstrated that access to water and sanitation facilities in schools was low, and low levels of access to rural WASH existed, being considerably lower than in urban areas.

UNICEF CPDs indicate that low levels of access to WASH have contributed to diarrhoeal disease, acute respiratory infection (ARIs) and undernutrition among children in Sierra Leone. ASWA-SL plans were in line with the intention in the CPDs of UNICEF's WASH programme addressing bottlenecks in investment plans. While the CPDs did not specifically refer to ASWA-SL, or vice versa, there was a high degree of

²⁸ Sources of evidence: UNICEF Sierra Leone Country Programme Document 2013-2014; UNICEF Sierra Leone Country Programme Document 2015-2018; UNICEF Sierra Leone Annual Report 2014; UNICEF Sierra Leone Annual Report 2018; JMP update reports; KIIs (UNICEF WASH and non-implementing partners)

coherence between the vision of ASWA-SL and the overall goal of the UNICEF's CPD strategy (particularly 2015-2018) to support national efforts to accelerate the realization of the rights of children by improving access to services, developing the capacity of systems, building resilience among households and communities, and providing social protection to the poorest and most vulnerable families.

ASWA-SL aimed to contribute to cumulative targets in the CPD cycle ending in 2019. Particularly in the area of rural sanitation, the programme contributed to UNICEF's 'Sanitation Game Plan' to eliminate open defecation, and the second phase of ASWA is building on the lessons of ASWA-SL. A key result area for children in the 2019 Annual Work plan was ending open defecation.

UNICEF's Global Strategy in WASH (2006-2015) highlighted the three pillars of balanced WASH programming: support to enabling environments, behaviour change, and water and sanitation services. ASWA-SL very broadly addressed all three of these pillars in a balanced way. The Global Strategy also outlined strategies "in other countries" (i.e. countries not in transition/emergency):

1. Improving hygiene awareness and promoting behaviour change: ASWA-SL Result Area 2 and 4
2. Drinking water quality: ASWA-SL Result Area 1.
3. WASH emergency preparedness: Not addressed – except for the flexibility in reallocating program funding for Ebola response activities.
4. National monitoring for achievement of MDGs: ASWA-SL Result Area 5

As such, ASWA-SL was highly aligned with UNICEF's global strategy in WASH, with its primary objectives linked to three out of four of UNICEF's strategies for countries that are not responding to emergencies.

National plans

ASWA-SL supported relevant national plans, strategies, and agreements. There was a high degree of strategic coherence between ASWA-SL and national plans: ASWA-SL supported the development and implementation of national plans of action, which resulted from the SWA initiative. The programme was designed to contribute to the NWSP (2010) and the Agenda for Change (2009-13), and the Agenda for Prosperity (2013-2017). It was also broadly aligned to Poverty Reduction Strategy Paper (PRSP) IV, and the new medium-term National Development Plan (2019-23). The programme was designed to not only implement and scale up WASH in the targeted districts, but also to build government capacity and systems that contribute to the enabling environment for WASH.

Over the period of implementation ASWA-SL played a part in supporting many principal WASH policies, strategies, and national guidelines, showing a strong alignment between the programme and GoSL's WASH sector priorities. Some of these national policies and guidelines included: WASH in schools guidelines (2017), WASH in healthcare facilities guidelines (2017), the national CLTS protocol (2018), and the ongoing WASH policy review (2019 – onwards). It is generally acknowledged that ASWA-SL, due to its scope that included support to developing the national WASH policy and strategy framework, and the strength of UNICEF's influence and advocacy on the national WASH sector, led to such alignment.

As mentioned above, the programme was in alignment with a) the NWSP (2010) in water supply and sanitation and the National Decentralization Policy (2010) that aimed to decentralise primary/basic services, such as basic education, primary health and rural water supply; and b) the PRSP III in the operation and maintenance of water supply and sanitation facilities with encourages greater involvement of NGOs, the private sector, and utilisation of community based approaches as per the Sanitation and

Water for All (SWA) commitments made by the GoSL. ASWA-SL also supported a number of review conferences where key counterparts devised plans on sector strengthening.

National stakeholders (MDAs) in the WASH sector affirmed that the program was aligned with the WASH policy and plans of GoSL. ASWA-SL aimed at improving water and sanitation in rural areas and WASH in schools. However, MWR was not in existence during the planning phase of ASWA-SL. In addition, cross-cutting ministries, and agencies such as the Ministry of Gender and Children Affairs and the National Commission for Persons with Disability (NCPD), were reportedly not involved in the planning of ASWA-SL. A key concern across the ministries was not being involved with the supervision and quality control of ASWA-SL interventions in the districts.

District plans

Coherence with sub-national plans was not fully reflected in the ASWA-SL programme design since the identification of needs at the district level was only carried out during ASWA-SL implementation. During the course of ASWA-SL implementation, GoSL developed the National Rural Water Supply and Sanitation Programme (NRWSSP) in 2015-17, which further details the planning and coordination processes in the districts. The NRWSSP has been approved by GoSL at high level and guides the sector, although no formal implementation has yet started.

Districts are expected to have water and sanitation plans that guide all implementation and coordinate activities. At the district level, UNICEF, through ASWA-SL funding for monitoring activities, partnered with District Councils and involved them in identifying district and chiefdom/ community priorities. As such, ASWA-SL supported the districts to identify needs and align their responses to these more systematically.²⁹

Most of UNICEF's Implementing Partners (IPs) reported that ASWA-SL interventions were aligned to international, national, and sub-national policy and standards. Some IPs interviewed expressed the following: "*We have an implementation and community engagement strategy, which LEAVES NO ONE BEHIND*"; and "*The national policies mandates education and provision of menstrual hygiene. This keeps the girl child at school better than before the intervention*". However, other IPs reported that they were unaware of ASWA's alignment with, and contribution to, the development of the country's national WASH policies.

International WASH policy and standards

ASWA-SL was designed in the MDG era (up to 2015), while the 2030 Agenda for Sustainable Development, in particular SDG 6 came into force during the course of programme implementation (2016 – present).

MDG 7, specifically Target 7C, was addressed by ASWA-SL: "*By 2015, halve the proportion of people without sustainable access to safe drinking water and basic sanitation*". The SDGs broadened the scope to "*safely managed water and sanitation for all*". The ASWA-SL programme design was in line with the MDG focus with the indicators for the programme being designed according to the MDGs, with a focus on sustainability, water quality, access to basic sanitation through community led total sanitation (CLTS) and supporting open defecation free communities.

²⁹ Source: KII responses from IPs (CEDA and PACE) and Bonthe District Council Engineer

When the SDGs came into effect, the indicators were revised to reflect the new definitions. There does not appear to have been a transition within the programme to address the wider shift to ‘safely managed’ facilities to reflect the different definitions outlined in the SDGs, however, the programme design reflected well the international standards at the time of design. The focus in the programme on access to basic water and sanitation services was in line with the national approach as for example expressed in the NRWSSP. This approach had a more realistic focus on providing ‘basic services’ since the higher standard of ‘safely managed services’ (e.g. on-site, 24 hour supply of potable water standard) remains difficult to achieve in Sierra Leone (and most developing countries), considering the present level of WASH services, sector challenges, and the aim of providing ‘some for all’ rather than ‘all for some’.

Sierra Leone joined the SWA partnership in 2010, and it is acknowledged that ASWA-SL (as part of the larger ASWA-WCA programme) built on commitments made at SWA meetings.

Key findings related to EQ1:

FINDING 1.1: The strategies used in ASWA-SL were strongly aligned with UNICEF’s strategies – at the country level, and at the global strategy level in WASH.

FINDING 1.2: ASWA-SL supported relevant national plans, strategies, and agreements. For example, the preparation of the national guidelines for institutions, sanitation and hygiene strategy and development of M&E systems.

FINDING 1.3: Coherence with sub-national plans was not fully reflected in the ASWA-SL programme design, since the identification of needs at the district level was carried out during ASWA-SL implementation.

9.1.2 EQ2 Relevance – identification of needs of groups

To what extent were the different needs and capacities of women and men and the specific needs of children (girls and boys), persons living with disabilities, elderly people, marginalized households identified during the design of the program and in programme components³⁰

Stakeholder consultations

Broadly speaking, ASWA-SL responded to specific needs of different groups. For example, at the national level, the WASH sector is geared towards identification of equity gaps and narrowing them in underserved locations, to achieve Sierra Leone’s development goals. ASWA-SL targeted districts of high vulnerability.

The needs of vulnerable groups were identified through a sound assessment process that engaged local, district, and national stakeholders³¹. The process attempted to identify and ensure the needs of various groups within the population. The vulnerability assessments were conducted by UNICEF’s IPs before

³⁰ Sources of evidence: ASWA Sierra Leone Final Proposal (2012); Programme Implementation Tracking Tables; KII

³¹ Sources: KII responses from IPs (CEDA and PACE) and Bonthe District Council Engineer

implementation. According to IPs, the vulnerability analysis report³² was submitted and approved by the local council for the agreed communities and localities to be targeted.

In line with UNICEF's programme implementation strategy, the national and sub-national governments led the discussion through consultative meetings with key sector actors, including NGOs and community representatives. UNICEF ensured that the discussions were led by the government and at district-level through various consultative forums³³.

Implementing partners engaged all sectors through consultations with schools, local authorities, youth leaders, and District Council representatives. Existing secondary data and pre-intervention assessments provided needed information on the existing gaps in the sectors and areas of felt needs. At the community level, participatory assessments were carried out to involve beneficiaries in providing information on the status of WASH services in their communities and possible solutions and options they prefer.

ASWA was aligned to district-level development objectives and community-based priorities, and capacity development needs. Stakeholders affirmed that '*community-based approaches such as vulnerability assessment were used to involve the beneficiaries in identifying their needs. Regular participatory stakeholder engagement was the strategy employed during the implementation to ensure that all the beneficiaries of the WASH facilities are involved in the needs assessment*'.

The Programme Document stated that ASWA-SL ensured that women, men, girls, and boys were fully involved in the design, implementation and maintenance of WASH infrastructure and services at community level. However, the evidence of a meaningful input in these groups is limited. According to MWR, national level stakeholders were involved in the identification of most important WASH needs for all categories of the population including women, children, and vulnerable groups such as people living with disabilities and the elderly.

The MDAs confirmed that they provided input in the program design on the side of GoSL through consultations with technical and administrative staff and made relevant inputs with respect to the results matrix and theory of change. The process was participatory and through direct engagement of heads of units and presentations/ debriefings. In addition, some senior members were involved in international workshops/ high-level engagement in pre-implementation/ formative stage of the program.

The National Commission for Person with Disability (NCPD) was not consulted in the planning or during the implementation of the ASWA-SL. Concerning design of WASH programmes, the KII with the NCPD noted that:

"affirmative actions must be taken firstly; we should be involved in the planning stage and allow to participate on what is best for People Living With Disabilities (PLWD). Secondly, for accessibility to WASH facilities we need an audit of our facilities. For instance, the doors in our facilities must be able to open inside and the wheelchair must be able to turn in 360 degrees without hindrance and also our toilet should

³² KIIs mentioned vulnerable groups as children (boys and girls) and women with regards to sexual exploitation and violence and ease of access to WASH facilities, people with disabilities with regards to ease of access to WASH facilities, poor and female headed household with regards to access to financial independence. However, a general WASH assessment report was mentioned but not a specific vulnerability assessment report.

³³ Sources: KII responses from IPs (CEDA and PACE) and Bonthe District Council Engineer

have hand bars/ handles for easy access. At the macro-level, the commission can be involved to give technical advice”.

The Ministry of Gender and Children Affairs (MGCA) was also not involved in the formulation of ASWA-SL. The KII responses from the ministry noted that GoSL and its partners should be guided by the Medium-Term National Development Plan with specific reference to cluster 5 on ‘empowering women, children, and persons with disability’; the National Gender Strategic Plan; and the Gender Equality and Women’s Empowerment Policy. At operational level, there should be adequate consultations at every level involving women, capacity building for women to actively participate in the processes, and measures to ensure women are part of the WASH services committees, among others.

Stakeholders in the districts confirmed their involvement in the needs assessment of communities for the implementation of ASWA-SL. The stakeholders provided guidance on the selection of communities that should benefit from ASWA-SL, in order to a) avoid duplication of efforts of other organisations implementing WASH projects in the district, and b) to ensure that communities in need benefited rather than selecting communities at random.

UNICEF’s IPs generally reported that UNICEF consulted them at the outset of the intervention by sharing the program concept and issuing calls for expressions of interest (EOI). When an IP was selected, an agreement (PCA) which determines the objectives and areas of intervention was signed. Following the signing of the PCA, using an inclusive strategy, the IPs worked with stakeholders (representatives from Local Councils, DHMT, MEST, MWR, community chiefs, women, youth leaders and other beneficiaries) to assess community needs. Vulnerable communities were identified and reported to UNICEF and communities were selected using vulnerability criteria, such as the level of access to community and school WASH services and wealth ranking. The following excerpt illustrates how IPs were involved in programme design and planning: *“PACE was very much involved in the planning, budgeting, and implementation stage of programme intervention. My organization was involved in the assessment to select beneficiary communities in collaboration with WASH MDAs and local stakeholders.”*

Community leaders and the women confirmed communities’ involvement in needs assessment, planning as well as in the implementations of the projects. Consultations were also said to have been done with all the relevant groups in the communities. The youth shared different views on this; not being fully involved in the planning nor during the needs assessment and not happy with the process of ASWA planning and youth inclusion during the implementation process. There were instances mentioned by IPs that youths wanted to be paid for their involvement. Community leaderships and Women revealed that communities were happy with their level of involvement in the planning process.

Types of needs identified.

At the strategic level, ASWA-SL responded well to the needs of women and children. Overall, in the design and planning of the programme, the needs of children were addressed through the intended programme impact aiming at improving access to WASH and thereby improving children’s health. ASWA-SL’s rationale addressed the link between improved access to safe water and sanitation and improved outcomes for women and children – for example, that the lack of safe water supply makes women and girls walk long distances to collect water, which in turn takes a physical toll on them, especially pregnant women.

Although the programme documents largely reference global research rather than local contextual research, context-specific data on access to WASH in schools informed ASWA-SL design. The Programme

Document stressed ASWA-SL's vision, to address WASH gender issues related to women, boys, and girls within the rural communities. However, similar considerations were not evident for persons living with disabilities, elderly people, and marginalized households (and there was no clear identification of parameters for marginalized households).

At the programme level, ASWA-SL targeted support to children (girls and boys) through WASH in Schools (WinS). Overall, the needs of children were targeted with the water and sanitation facilities and the hygiene education activities; however there is little evidence that children's' needs, including addressing sustainability challenges, were fully considered at design level. ASWA-SL activities in schools were part of UNICEF's support to ensure children have access to quality water and sanitation facilities in schools with separated and differentiated toilets for girls and boys, as a strategy for retention of girls in school and improving learning outcomes, as stipulated in the UNICEF Key Results for Children (KRC) 8.

There is no evidence that the design and implementation of the community component of ASWA included the participation of children. There appears to have been an intent in design of ASWA to track progress for children. Some of the objectively verifiable indicators (OVIs) in the Project Document contained disaggregated indicators, some examples include: percentage of children aged 0-59 months with diarrhoea in the past two weeks; percentage of children aged 5-14 years reported having diarrhoea in the past two weeks; absenteeism rates in 170 schools (girls/boys).

In terms of project design, targeting women and people with disabilities was largely carried out through WASH in Schools activities, however the evidence of targeting specific groups at community/ household level is less convincing. The Education Sector Plan (ESP) 2007-2015 stipulates that all schools should have girl-friendly and disabled friendly WASH facilities to improve the quality of primary education.³⁴ However, the Ministry of Education, Science and Technology (MEST)³⁵ has no budget allocation for WASH in schools and heavily relies on external support. WASH in schools is a significant part of the Child Friendly Schooling standards, which MEST promotes to ensure the provision of favourable learning environment for every child in the country.

The ASWA-WCA 2019 Progress Report highlighted that engagement of women and girls was an important strategic programme shift for the new ASWA II. The report stated that empowering and engaging women had been critical in the success of CLTS, Household Water Treatment (HHWT) and safe storage, and community water engagement and that in the future, demonstrating more gender transformative programming approaches would be necessary. Despite this, there does not appear to be convincing evidence that such strategic programme priorities were made in ASWA-SL. The following summarises the evidence for the inclusion of different vulnerable groups in the programme design:

- **Targeting women:** A reasonable WASH and gender narrative existed in the ASWA-SL Programme Document. However, the existence of specific needs for women and girls was addressed solely through WinS. Very broadly, the programme document outlined that gender was one of the priorities in the PRSP including a commitment to have more women in elective and appointed positions, reviewing discriminatory laws, and domesticating the Convention on the Elimination of all kinds of

³⁴ Education Sector Plan 2007-2015. 2007. Ministry of Education, Science and Technology.

³⁵ The Ministry was later changed to Ministry of Basic and Senior Secondary Education (MBSSE)

Discrimination Against Women (CEDAW). However, there is no evidence that these strategies were addressed in the programme components.

- **Targeting people with disability:** With the WinS activities, there was a strong intention to ensure that latrine installation was based on disability needs, with school latrines constructed in accordance with UNICEF, GoSL agreed standards and designs. The design on special facilities in schools was developed in cooperation/ conjunction with the DfID-funded WASH programme in Sierra Leone where disability friendly facilities were being designed for healthcare facilities covered by DfID WASH. School facilities included ramps, holding bars etc. and designs were very thorough to address both software and hardware to ensure people living with disabilities were provided with satisfactory facilities. However, there appears to have been little discussion on how ASWA-SL could promote specific interventions that addressed disability, for instance through accessible latrine designs in communities.
- **Children:** Some of the activities in schools was established with children's specific needs in mind, e.g. training of girls and teachers and providing material for girl-friendly menstrual hygiene production. Also separate girls' toilets were observed in most school toilets. However, in the ASWA-SL Program design, girls' specific needs could have been better addressed. The menstrual hygiene package was not included in the inception of the programme in schools, and only integrated at later stages of ASWA-SL.
- **Elderly people:** There is no evidence in the programme design that needs of the elderly were integrated in ASWA-SL.
- **Marginalized households:** The programme targeted two districts with high vulnerability. The programme implementation models included methods to integrate vulnerability. For instance, the CLTS model was designed with inclusion at the village level, where a fully sanitized state is achieved when all households of the village are supported to achieve open defecation free (ODF) status. Furthermore, the HHWT model built upon research from randomized controlled intervention trials, which demonstrated that household water treatment and storage contribute towards significant reduction in water borne diseases, especially among vulnerable populations.
- The needs of marginalized populations, in that they may be more vulnerable and unable or lack the means to carry out maintenance of facilities was addressed in the design.

The national MDAs engaged in WASH noted that the identification of specific and most important gender sensitive WASH needs was done through staff based at Local Council offices and also through support from the UNICEF IPs. The IPs confirmed that they conducted pre-implementation vulnerability assessments of chiefdoms and communities through participatory engagement with these community groups, and their reports were shared with the respective councils for review and validation. The vulnerability analyses aimed at leaving no one behind across gender and vulnerable groups especially people with a physical disability.

District WASH stakeholders reported that needs assessments and stakeholder consultations at community level were carried out to identify the specific and most important WASH needs for the different population categories. The issue of population and distance was discussed to ensure that the facilities were accessible to vulnerable groups especially women, children and people living with disabilities, as well as poor households. Beneficiaries were given the opportunity to contribute to the discussions and bring out suggestions for improving the accessibility of WASH facilities to all categories of people in their respective communities. UNICEF used a standard questionnaire administered by mapping officers to capture the needs of the targeted beneficiaries.

IPs confirmed that the specific needs of the various target groups were identified mainly through community consultation, wealth-ranking and transect walks. Generally, the most important need expressed by all beneficiaries was simply to get access to potable water and sanitation facilities. Other needs expressed included easy access to WASH facilities in schools for children living with disabilities, separate sanitation facilities for girls and boys, and comfortable space for menstrual hygiene. For female headed households, as well as the vulnerable, a need for financial independence was identified. Excerpts from some IPs: "*Contractual agreement clearly requires inclusiveness of all community groups*", "*inclusiveness was factored into all aspects of needs assessment and project implantation*", and "*communities that lacked potable water were prioritized and this caters for water needs of all community members/ groups*".

Community capacity

No assessments of community capacity were carried out for the initial planning and design of ASWA-SL. However, the respective roles and responsibilities defined for communities were in line with common knowledge and strategies in the sector, and community capacity building outputs and activities to fill the known gaps were included in the programme design. Nonetheless, UNICEF carried out a comprehensive capacity assessment early in the programme, which informed the detailed planning of programme activities. The assessment indicated that communities had a low capacity to maintain WASH facilities.

National MDAs confirmed that they as ministries were not directly involved with the assessment of capacity and conducting capacity-building for communities. These activities were carried out by staff at district level in collaboration with Local Councils, which is consistent with rural WASH responsibilities of councils. District WASH stakeholders reported that an assessment of capacities and capacity building needs of the communities vis-à-vis community-based WASH management and their roles in ASWA implementation were carried out in the target communities. The measures/ activities that were included in the program design to address the identified capacity gaps were: Formation of community structures such as WASH committees to manage the facilities, training of maintenance officers, and training of water and sanitation managers.

Key findings related to EQ2:

FINDING 2.1: Broadly speaking, ASWA-SL design responded to specific needs of different groups such as women, men, children, and vulnerable groups such as people living with disabilities and the elderly and targeting needy communities identified in an assessment process engaging local, district, and national stakeholders.

FINDING 2.2: At the strategic level, ASWA-SL responded well to the needs of women and children e.g. in the provision of WASH facilities in safe locations and reducing workload for collecting water.

FINDING 2.3: In terms of project design, targeting women and people living with disabilities was largely carried out through the WASH in Schools activities, with evidence of specific attention to people living with disabilities at community/ household level being less convincing and largely as a result of using the integrated approach – ‘No one left behind’ with limited specific affirmative actions for the vulnerable groups.

9.1.3 EQ3 Relevance – responding to needs.

To what extent did the ASWA program components, outcomes, outputs, activities respond to the identified needs of the different groups (men, women, girls, boys, persons with disabilities, elderly people, marginalized households) in an inclusive manner in its design and planning?

ToC and result framework

The Theory of Change (ToC) generally responded to the needs for improvements in WASH services in schools and communities, but not specifically to the identified needs of the different groups. There is nothing unusual in this, since the programme was naturally implemented in an integrated manner where the WASH facilities targeted all groups in the communities and schools. Nonetheless, the ToC specifically mentioned child-friendly facilities in the strategy and also specified impact on child mortality and morbidity. The Results Framework (RF) also generally described the activities, outputs, indicators and targets in the target communities and schools and only mentioned child-friendly facilities and children in the targets.

The tracking matrix for overall reporting on progress in the implementation of the ASWA Programme did not include indicators disaggregated into the respective groups. The actual numbers of men, women, girls, boys, persons with disabilities, elderly people, marginalized households that were reached by the programme in the respective communities were thus not tracked.

District WASH stakeholders revealed that the programme design included the inclusion of the different beneficiary groups through consultative meetings. Most communities agreed that there was an equitable representation of men women and vulnerable groups in various WASH related groups. The IPs also reported that the School Hygiene Clubs (SHC) comprised of schoolboys and girls from all grades, with at least two (a boy and a girl) per grade. The SHCs were responsible for ensuring environmental sanitation of the schools and encourage personal hygiene of all pupils. SHCs reportedly engaged their households and communities through hygiene and sanitation awareness and campaigns.

Implementation arrangements

The strongest evidence for ASWA-SL's attention to equity lies in the selection of models during the design and planning process, which are renown globally for promoting equity and gender inclusion in a general sense. For example, the CLTS model aims to achieve fully sanitised status with evidence of inclusion. This model promotes a “no one left behind” approach, where all community members work towards a fully sanitized status. CLTS was also a good way to include the vulnerable, as certain requirements at village level had to be met, so community members had to meet each other and help each other.

ASWA-SL was also inspired by the Child Friendly Schooling (CFS) concept promoted by UNICEF globally, as an initiative specifically focused on ensuring children's right to quality education is realised. It does this by providing a comprehensive multi-dimensional definition of quality education, encompassing inclusion; health, safety, protection; teaching and learning; and community partnership strategies, which collectively reflect the main dimensions that present barriers to education for children.

The IPs confirmed that the contractual agreements (PCA) clearly required inclusiveness of all community groups. Inclusiveness was factored into all aspects of needs assessment and project implementation. Communities that lacked potable water were prioritized and this catered for water needs of all community members/ groups.

Key findings related to EQ3:

FINDING 3.1: Generally, the ASWA-SL programme has responded to specific needs of different groups, with the strongest evidence in the selection of models used by UNICEF for promoting equity and gender inclusion. This includes the CLTS model with a “no one left behind” approach to include the vulnerable; and the Child Friendly Schooling concept.

9.1.4 EQ4 Relevance – Targeting vulnerable and under-served.

To what extent did the program interventions target specific vulnerable and underserved areas of the country³⁶

WASH access

ASWA-SL targeted vulnerable and underserved districts while also avoiding districts with other substantial WASH programmes ongoing. The rural areas in Sierra Leone are in general marred by high levels of vulnerability.³⁷

The level of access to WASH in the respective districts in 2010 and 2017³⁸ is illustrated in Figure 9-1. In the target districts and in Sierra Leone in general, there is very low access to the combined WASH services – households using basic water and sanitation services and also practicing handwashing with soap and water. The districts with larger urban populations such as Western Area and Bo, have better access to WASH.

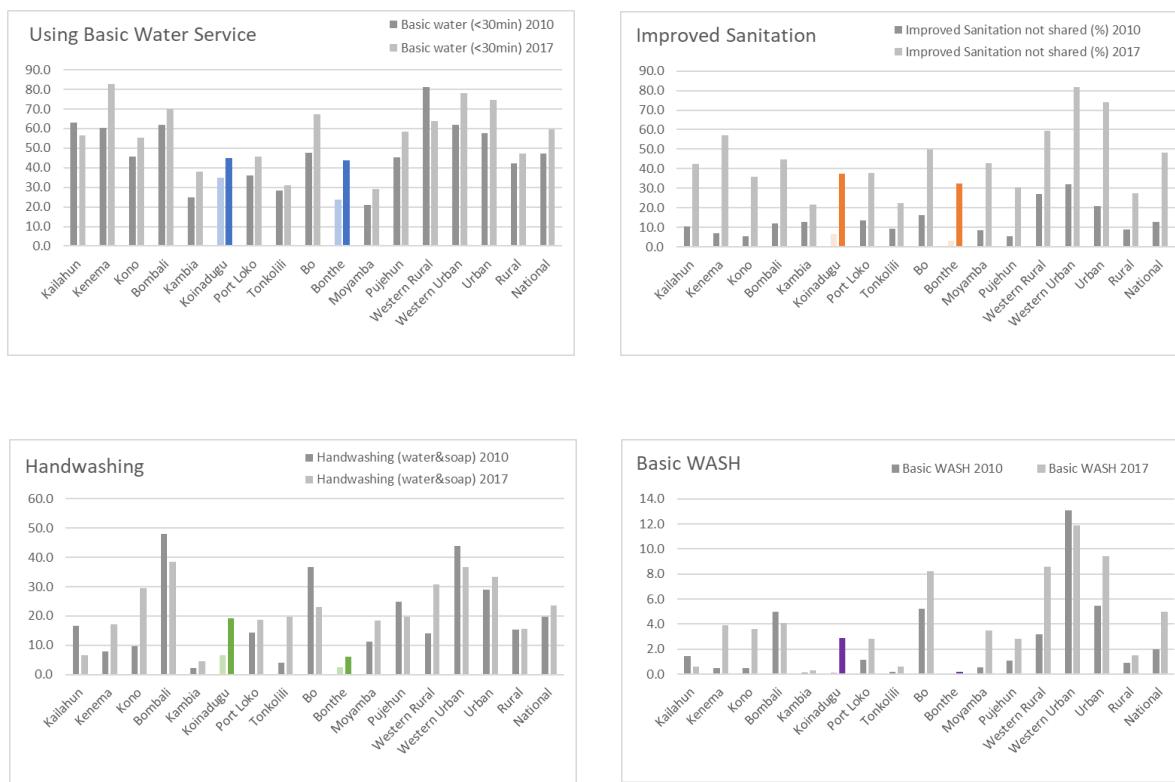
This supports the ASWA-SL strategy of targeting marginalised and vulnerable rural areas. Koinadugu and Bonthe districts are among the districts with the lowest levels of access to services. Substantial improvements were achieved between 2010 and 2017 in the access to water, improved sanitation, and handwashing in the two districts.

³⁶ Sources of evidence: ASWA Sierra Leone Final Proposal (2012); GoSL Agenda for Prosperity (2013), ASWA Baseline Report, 2018; GoSL WASH Sector Performance Report (2017)

³⁷ See: GoSL’s Agenda for Prosperity outlines Absolute Poverty in the Districts by Incidence, Gap and Severity and percentage of the population, 2003.

³⁸ General data on access to WASH in Sierra Leone at the end of 2019 are not available.

Figure 9-1: Access to WASH services in 2010 and 2017³⁹

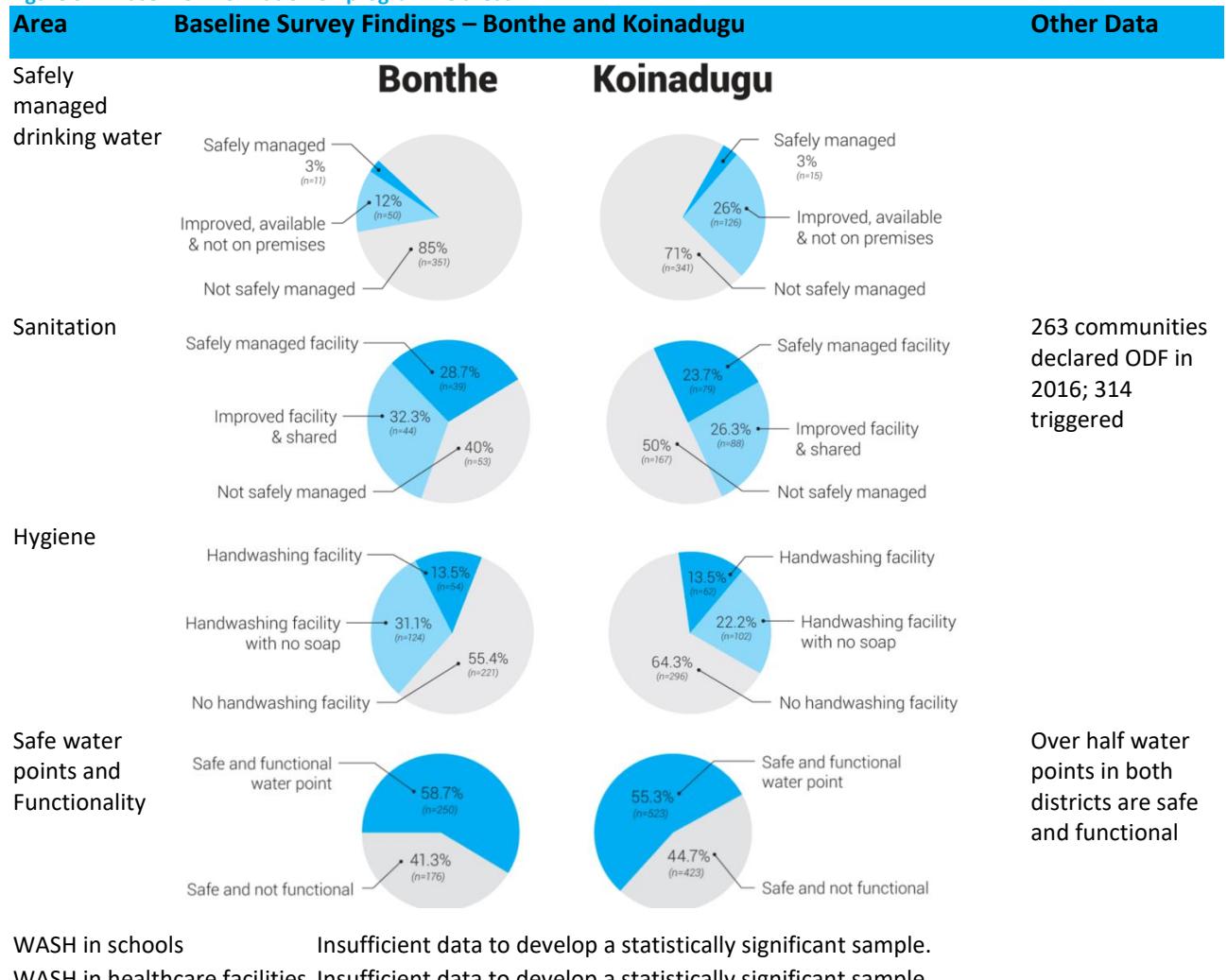


While district level data on poverty and rural water access and sanitation access is very poor, it can be assumed that underserved areas were selected for ASWA-SL intervention. However, there appears to have been issues with targeting at sub-district level, especially in Bonthe, where the choice of target chiefdoms was problematic, according to the 2017 Sustainability Check: “At 54.6% water supply coverage (WPM:2016), it is unclear how Jong could have been prioritized over Kwamebai Krim (0.21%) or Sittia (3%) or Dema. The tension has led to lingering challenges with project coordination, in a district where senior district officials have called for greater accountability”. UNICEF also made efforts to avoid duplication with other development partners’ programmes, which would have meant that in not all cases the district with the highest vulnerability score was selected if another programme was active in that district.

The ASWA Baseline Report 2018 provides some analysis of indicators, which includes both the GoSL 2016 Water Point Mapping Exercise and the MICS 2017. Figure 9-2 outlines the key baseline information presented in the 2018 ASWA Baseline Report in the two targeted districts, demonstrating widespread poor levels of access. The baseline data on access are further described in relation to the end-line data in 9.2.2 below, demonstrating the low level of access in the target districts as well as the low functionality of water facilities.

³⁹ based on data from the SSL Multi-Indicator Cluster Surveys (MICS 2010 and MICS 2017). The MICS5 is the first time that comprehensive data have been collected on combined WASH services, so the 2010 figures shown in the graph are determined from the access to combined water and sanitation combined with data on practicing handwashing.

Figure 9-2: Baseline Information on programme areas⁴⁰



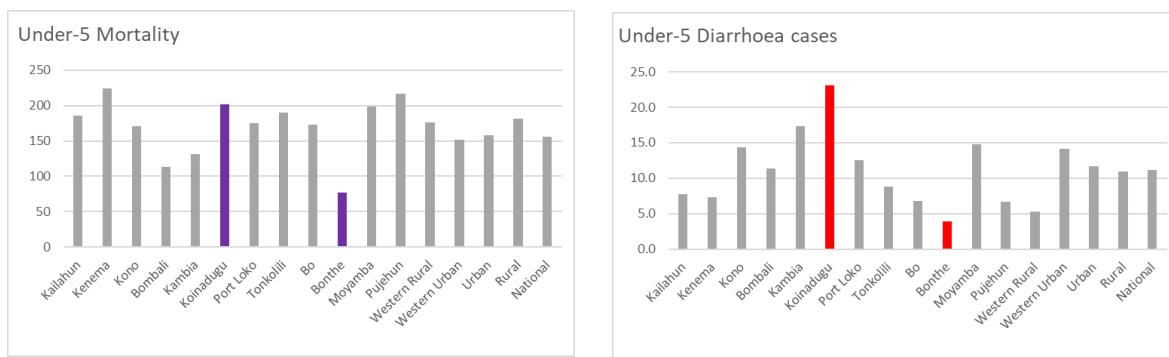
Prevalence of water borne diseases.

The targeting of locations with high rates of water borne diseases is clear in the case of Koinadugu, which had the highest rate of diarrhoea cases as shown in Figure 9-3⁴¹. The rates for Bonthe district for both under-five mortality and the diarrhoea cases were surprisingly low.

⁴⁰ Source : ASWA Sierra Leone Baseline Survey

⁴¹ SSL 2013 Demographic and Health Survey

Figure 9-3: 2013 Under-five mortality and diarrhoea cases



Poverty levels

The poverty gap index is a measure of severity of poverty in a defined population. In Sierra Leone, GoSL's Agenda for Prosperity measures absolute poverty in the districts by incidence, gap and severity and percentage of the population⁴². Poverty is most severe in the rural areas, with a severity index of 9.1% compared to 2.8% in urban areas. Moreover, poverty most severe in the Northern region (where Koinadugu/ Falaba is located) with a severity index of 8.1%, compared to 7.4% in the Southern region and 7.5% in the Eastern region.

In 2003, Bonthe was the district with the highest incidence and severity of poverty in the Southern region. Koinadugu, ranked 3rd out of four districts in terms of incidence of poverty, in Northern region and 2nd highest in terms of severity. Nationally, Bonthe and Koinadugu rated similarly on the poverty severity index, Bonthe ranked 3rd highest out of 12 districts at 21.1%, while Koinadugu ranked moderately at 17.6%. Hence, while districts selected were not the most severely affected by poverty in absolute terms; they were still vulnerable areas of the country. Stakeholders confirmed that the two districts selected for DGIS represent some of the least developed and hardest to reach districts in the country and are generally marred by poor infrastructure such as roads network and electricity.

Key findings related to EQ4:

FINDING 4.1: ASWA-SL's design targeted vulnerable and underserved districts including rural areas which are experiencing high levels of vulnerability in Sierra Leone.

FINDING 4.2: The programme components responded to the needs of vulnerable groups in an inclusive manner by implementing CLTS through its "leave no one behind approach" and CFS, with its strong ethos of inclusion.

⁴² The Government of Sierra Leone, 'The Agenda for Prosperity: Road to Middle Income Status', Sierra Leone's Third Generation Poverty Reduction Strategy Paper (2013-2018)

9.1.5 EQ5 Relevance – logical and coherent intervention strategy

To what extent was the program intervention strategy for achieving the desired WASH outcomes and impact outlined in the program document logical and coherent?⁴³

Intervention strategy

A clear description of context and gaps/ needs in the WASH sector guided the intervention strategy. The programme intervention strategies were informed by a clear analysis of the national sector context and status of WASH challenges on the Programme Document. The programme focus and strategy were clearly linked to addressing the challenges identified. The context analysis was backed up by evidence from a range of different reliable sources, including GoSL Sector Performance Reports and the JMP analysis.

ToC and result framework

A clear strategy linking activities and outputs to the intended results (outcomes and impact) was lacking in the Theory of Change (ToC) and results framework. The ToC and results framework were not fully aligned, the outcomes, results and the assumptions outlined in the results framework were inconsistent with the ToC. The ToC did not indicate outcomes for WASH in schools. Moreover, the ToC's outcome level results stated very broad outcomes. The use of terms "outcome" and "output" were interchangeable in planning documentation – both referred to outcomes.

Table 9-1: Example outcomes from different planning and monitoring documents⁴⁴

Theory of Change Outcomes	Outcomes from Results framework	Outcomes Targets from Programme Tracking Matrix	Annual Report Outcomes (revised outcomes)
Increased sanitation coverage with sustainable sanitation products	Sustain good behaviour change of the population in water, sanitation, and hygiene and.	39,119 New users of (improved) basic sanitation facilities and 179 new open defecation free communities	450,883 beneficiaries continue to undertake water treatment
Increased practices of handwashing with soap at critical times	To institutionalize sector coordination for effective and efficient implementation of WASH programme	39,119 people with improved sanitation and hygiene behaviours	450,883 beneficiaries continue to maintain (improved) basic sanitation facilities
Increased practices of protection of water sources amongst WASH committee members and communities	To improve WASH conditions in targeted schools and thereby influence decreased absenteeism rates, especially among girls.	72,111 new users of household water treatment	50,000 water users continue to get safe water supply
Reduced likelihood of water and excreta borne diseases			450,883 beneficiaries are reached with education on improved hygiene behaviours

The ToC did not capture the policy and institutional dimensions that were otherwise well described in the narrative of the programme document, while the results framework only captured the local institutional

⁴³ Sources of evidence: ASWA Programme Document; Programme Implementation Tracking Tables

⁴⁴ ASWA-SL Project Document

level and not the policy and national level institutions, although these were stated as areas of engagement.

Health centres/ clinics were mentioned in project document, but not in the ToC, results framework, activities, or targets. The intended coverage of these is thus unclear. The expected results in the results framework and narrative were formulated differently and Result 7 (*By 2017, the two districts councils of Bonthe and Koinadugu are strengthened to deliver monitoring and evaluation responsibilities to inform the sector on sustainability of water and sanitation facilities*) was not fully correlated regarding national level targets and results.

Indicator quality

The output indicators largely correlated to results in the results framework and were mostly SMART⁴⁵ and well-designed to capture the relevant data, with a large focus on quantitative data collection. However, in some cases, the indicators at outcome and impact level were not SMART and undermined by a lack of clarity surrounding their measurement. Moreover, the indicators were formulated differently in the original results framework, the ‘Programme Monitoring Tracking Table’ and the progress reporting.

The programme intervention strategy indicated the intended impact of the programme, but the results framework and monitoring of ASWA-SL did not clearly link to programme impact or track impact. There were no impact indicators for ASWA-SL.

The targets were largely clearly identified and integrated in the definition of results in results framework, although not all indicators had corresponding targets. Some targets were revised upwards., but in general, the original targets were low given the relative size and budget of ASWA-SL. Some examples are given in Table 9-2 below.

Table 9-2: Sample Impact and Outcome indicators from ASWA-SL reporting and assessment

Impact and Outcome Indicators	Source	Assessment
48,000 new water users (repaired/ rehabilitated water points, new water points (boreholes fitted with HP and small scale water supply networks)	2018 Sierra Leone Annual Report	In principle SMART if clear definitions of standards of access were used (this seems not to be the case as detailed in Appendix 7 Facilities Observations Checklist – Technical Narrative)
450,883 new users of basic (*improved) sanitation facilities	2018 Sierra Leone Annual Report	This indicator was in principle SMART, however the terminology for standard of sanitation facilities was not entirely clear since ‘basic’ is also used to describe SDG WASH service levels and in the ASWA-SL reporting it appears to be used for any type of latrines, whether improved or not (in line with the CLTS approach).

⁴⁵ Specific, Measurable, Achievable, Relevant and Time-bound

Impact and Outcome Indicators	Source	Assessment
39,119 Estimated number of people with knowledge on improved hygiene behaviours	Sierra Leone Programme Implementation Tracking Tables (Excel)	This indicator was SMART, but the target appears low, given the initial budget. A result of 473,441 people was reported to have been achieved. The ‘knowledge, attitude and practice aspects’ were not sufficiently clear. The reported achievements counted all persons covered by awareness raising activities which not necessarily result in ‘improved hygiene behaviours’ for which ASWA-SL also reported the same high achievement of 473,441 persons.
40 Repaired/ Rehabilitated water points	Sierra Leone Programme Implementation Tracking Tables (Excel)	This was clearly measurable and achieved. The programme reported a total of 104 water points in the 2013-2019 timeframe, more than double the target. In view of the low level of functionality of water points at the time of designing the programme, the target seems low, even given the initial budget.
34,400 new students continue to maintain and use water points	2018 Sierra Leone Annual Report	This indicator was SMART, and the target is measurable, achievable, and relevant. However, there were different formulations of the indicator in the progress reporting and the ‘Programme Monitoring Tracking Tables’ ⁴⁶

Monitoring of indicators

National WASH stakeholders noted that the ASWA-SL supported the design and development of a national M&E platform to virtually collate data at district level. However, the platform was not regularly populated by the districts. District WASH stakeholders confirmed that the monitoring system and tools were effective for measuring results. The indicators were well defined; for example, ‘100% absence of excreta in open spaces and the presence of covered latrines that are used by all households’ show that there is no open defecation in the community. However, stakeholders lamented that UNICEF had stopped funding monitoring by district stakeholders (e.g. the MWR Engineers and Water Point Mappers) indicating that there is need for addressing the available resources at district level for monitoring and supporting WASH in communities by the Government and Development Partners.

The IPs found the indicators well-defined and measurable; but did not have the ability and time to prepare objective reports. Some relied on informal conversations with beneficiaries and WASH stakeholders. They stated that the DHMT and the clinics could provide objective health indicators. The IPs did not carry out surveys of the proportion of girls using menstrual hygiene facilities; but assumed that most girls would be using the facilities.

Annual reports reported regularly on impact, but in a generalized way. For instance, the 2018 annual report contains a statement without supportive data: *“Although no conclusive impact assessment has been done so far, the programme is still ongoing until December 2019 and anticipated that it will greatly contribute to the reduction of diarrheal diseases associated with WASH in Programme areas. However, this will only be realized if various CLTS community remain motivated to commit to maintain ODF status*

⁴⁶ The tracking tables report on ‘3.a.3 New students using water points in schools’ which is different from the outcome of continuing maintaining the water points.

and commit resources to household sanitation and move up the sanitation ladder. In the long-term, if the programme outcomes are sustained, then it is envisaged that it will contribute to the reduction in child mortality and morbidity rates associated with water, sanitation and hygiene.” This statement indicates the challenges that needed to be addressed for programme impact to occur but provided no concrete analysis of trends or indication of targets or milestones being achieved.

Assumptions and risks

The assumptions outlined in the ToC and results framework were not actually assumptions but risks – they did not adequately outline critical sector bottlenecks, nor did they consider what are well-known for challenges for community-based models for rural water supply and the long-term behavioural changes required for CLTS.

The sustainability of the CLTS model, as a behaviour change intervention, which creates a social norm within communities and needs to be sustained beyond the triggering phase was not adequately considered in the ToC. The assumptions outlined did not adequately capture the complexity of the required collection actors and simultaneous actions required for the CLTS approach to progress. In both areas (water and sanitation) the assumptions outlined that leadership was required from GoSL but did not adequately describe the specific actions required beyond budget allocation and guidance.

Obvious risks that might prevent the change predicted from taking place were not identified. For instance, poor sustainability is a well-known sector challenge faced in rural water supply schemes that rely on community-based O&M and cost recovery. That this was also an issue for ASWA-SL is documented in Appendix 7 Facilities Observations Checklist – Technical Narrative’ describing the challenges related to functionality of water services.

Key findings related to EQ5:

FINDING 5.1: A clear description of context and gaps/needs within the WASH sector has guided the intervention strategy. The clarity of the strategy and framework linking activities and outputs to the intended results (outcomes and impact) in the Theory of Change and results framework are however lacking.

FINDING 5.2: In terms of the correlation and coverage of indicators vis-à-vis the intended outcomes and impact, indicators are generally SMART,⁴⁷ however clarity on the indicator definitions is needed on aspects such number of persons served per water point and knowledge, attitude and practice aspects to determine persons covered by awareness raising activities and persons with ‘improved hygiene behaviours’. The lack of clarity on indicator definitions has resulted in uncertainty of the reported achievements compared to original targets.

FINDING 5.3: The programme intervention strategy indicates the intended impact of the programme; however the results framework and monitoring of ASWA-SL does not clearly link to programme impact or track impact in a measured way.

⁴⁷ Specific, Measurable, Achievable, Relevant and Time-bound

FINDING 5.4: The assumptions outlined in the Theory of Change and results framework do not adequately outline critical sector bottlenecks, nor do they resolve the present challenges that are well known and faced during community-based models for rural water supply and the long term behaviour change required for CLTS.

9.1.6 EQ6 Relevance – management roles and responsibilities

To what extent were program management arrangements and the distribution of roles and responsibilities among implementing partners clear, and aligned with their mandates and capacities?⁴⁸

Roles and mandates

The roles and responsibilities for programme management arrangements and the lines of communication with partners were clearly defined. Within UNICEF, the WASH Manager managed the day-to-day implementation and worked on two levels with partners: through GoSL counterparts, and through counterparts at the district level.

At the national level, the WASH Manager's direct counterparts were the Director of Planning in consultation with the Chief Education Officer at MEST (now MBSSE), the Director of Environmental Sanitation and public Health in consultation with Deputy Chief Medical Officer at MoHS, and the Director of Water Resources in consultation with the Permanent Secretary at MEWR (now MoWR).

Counterparts at the district level included District Councils' development planners and WASH officers, DHMT members, District Directorates of Education, and MWR Engineers stationed in districts. These joint district teams were responsible for coordinating, monitoring, and supervising ASWA-SL interventions, including organising monthly coordination meetings and quarterly monitoring of IP implementation. At the community level, ASWA-SL had a range of partners including: WASH Committees, sanitation facilitators, trainers, master trainers, CLTS leaders and hygiene promoters; for water supply and water user groups: (WUGs), hand-pump mechanics, manual drilling company staff; for WinS: SMC, education supervisors; and for monitoring the NGO staff. The IPs also confirm that the DDE team also assist in facilitation of the School Hygiene Clubs. Most FGDs affirmed the engagement of community leaders and women's group and the establishment of WASH committees.

Partner roles were well-defined and built upon existing community structures to avoid duplication. At the community level, groups were established with clear roles, and guidelines on how to operate, including in relation to other community groups. An example is the collaboration with community health workers. Sierra Leone has a community health workers' system, from the national level to communities that operates to identify sanitation/ public health issues and communicate problems including disease outbreaks, and ASWA-SL activities were established with clear lines of communication towards community members and from the health workers to the districts.

⁴⁸ **Sources of evidence:** KII, ASWA Programme Document

The arrangements were made based on results from pre-feasibility assessments (conducted by partners, together with UNICEF and communities), which assessed community structures including the chiefdom representatives, district councils, DHMT, and schools.

The nature and type of roles assigned were aligned and consistent with the mandates of the IPs and they had the capacity to fully carry out their roles. Communities confirmed their involvement in the implementation of the projects in terms of labour, monitoring, and providing local building materials, such as stones, sand, and sticks and advice based on their indigenous knowledge for the implementation. The communities were also responsible for safe storage of the construction materials. The community members reported that they only contributed money to support cooking of food for the contractors' technicians. The community leaders found their roles were to advise, monitor and liaise with the community and the implementing partners on issues surrounding the project management at the local-level. The youth groups were responsible for cleaning and providing labour, e.g. for digging and other manual work.

Youths suggested better arrangements, such as signing of contracts between implementing partners and the communities including paying for their labour as recommendation for future projects. Women and pupils recommended building more facilities, while community leaders recommended hiring semi-skilled community members to be part of future projects instead of only asking communities to offer free support. These responses could be taken as a reflection of the situation in rural communities with few opportunities for paid jobs and not necessarily as a critic or demand for future project implementation. The responses are an indication of the need for extensive consultations and discussion with all groups on the implementation roles prior to implementation to avoid dissatisfaction.

The SMC reportedly had similar responsibilities for the school WASH activities, except that they relied on community stakeholders to support the provision of unskilled labour and accommodate the technicians. In some cases, SMCs excluded schoolteachers from the implementation due to alleged corrupt practices with respect to storage of the construction materials.

The IPs confirmed the community responsibilities and added that the communities also accommodated IPs' technicians in residences of households, were custodians of project materials, monitored day-to-day implementation activities, and ensured sustainability of facilities after completion. National WASH stakeholders confirmed the community responsibilities and that the communities were also facilitated to lead CLTS interventions.

There had been no discussions on disagreements of roles between implementing partners and community members. Communities in Bonthe confirmed that their roles were clear and appropriate.

The district joint implementation teams were responsible for monitoring IP implementation. Monthly meetings were held at the district coordination meetings to review the implementation progress and set new targets. District WASH stakeholders participated in the assessment of targets, coordinated WASH monthly meetings, conducted joint monitoring and supervision visits with MDAs, facilitated training of pump and solar mechanics and CLTS masons, and certified facilities upon completion.

Representation in decision-making

The key ministries of MWR, MoHS and MBSSE participated in ASWA-SL decision making in the steering committee. However, the participation of cross-cutting MDAs such as MLGRD, MGCA, and NCPD did not

fully participate. These MDAs should be fully involved in the overall strategic planning of WASH interventions in the district and in the communities; and the MLGRD should be involved in the implementation to ensure good coordination with the role of Districts in WASH implementation.

The DHMT, District councils, MWR District staff and IPs participated in regular coordination meetings with WASH actors, which were held regularly to discuss implementation and funding mechanisms, and coordinate the intervention areas of different WASH actors, to avoid duplication of effort. Reportedly, all stakeholders were represented in the WASH coordination meetings.

In terms of implementation, School Management Committees (SMC) reportedly comprised 70% men and 30% women, which KIIs and FGDs found were due to the low availability of female teachers. The SMCs were responsible for the day-to-day running of programme implementation and were custodians of implementation materials as well as ensuring the continuous functioning of the school WASH facilities.

Community WASH Committees mainly comprise equitable representation i.e. about 50% men and 50% women and in some case more women than men. The committee also has same responsibilities of keeping the water point clean, formulation of bylaws with respect to the use of the facility and raising funds for repairs and maintenance.

Village Savings and Loans Associations (VSLA) generally had 80% female and 20% male membership. Reportedly, female-headed households, ultra-poor and adults living with disabilities formed the core of membership. VSLAs had the objective of enhancing income generation and welfare including contribution to community activities such as WASH.

Key findings related to EQ6:

FINDING 6.1: ASWA-SL had a clear division of the roles and responsibilities for programme management arrangements, and lines of communication with partners were clear. Programme management arrangements at community, district and national level were generally clear.

9.2 Effectiveness

Criterion	EQ
Effectiveness	<p>7. To what extent did the program reach all the targeted geographical areas and population groups?</p> <p>8. To what extent have the expected results of the program been achieved?</p> <p>9. To what extent have WASH awareness and practices improved?</p> <p>10. To what extent has functional systems for operation and management of WASH facilities been put in place?</p> <p>11. What are the unintended results (if any) in terms of improving health and WASH status among the targeted women, children, and communities?</p> <p>12. What were the main external factors to UNICEF (e.g. political, emergency, or socio-cultural barriers) that hindered successful attainment of the expected results and how did UNICEF and its partners address these barriers?</p>

9.2.1 EQ7 Effectiveness – reaching targeted areas and groups.

To what extent did the program reach all the targeted geographical areas and population groups?

Communities reached compared to targets.

Broadly, the targeted communities were reached at district level and by target group. Table 9-3 lists the number of communities, people and households that were targeted by ASWA-SL.

Table 9-3: ASWA-SL target communities and households⁴⁹

ASWA-SL Targets	Koinadugu	Falaba	Bonthe	Total
No of communities	254	181	336	771
Target population	78,251	64,866	73,931	217,048
No of households	8,721	5,693	10,826	25,240

Due to the Ebola pandemic, some target locations were changed in accordance with GoSL's shifted strategies. In 2017, the GoSL brought together development partners to outline post-Ebola Presidential Delivery Priorities, which were delivered through a Secretariat in charge of identifying beneficiaries and their locations. This had major bearings on ASWA-SL and the remaining locations within the two target districts. ASWA-SL's partners at the district revised their targeting according to GoSL's plan. KIIs and FGDs have shown that when possible, UNICEF was thorough with the identification of beneficiaries through a strong partnership and coordination with the target District Councils. UNICEF supported District Councils with funds to conduct district level joint monitoring of the implementation activities carried out by the IPs for progress and quality control.

District WASH stakeholders confirmed that communities were selected through consultations with the chiefdom stakeholders. UNICEF had its own criteria for selecting communities based on vulnerability assessment of the target communities and targeting the underserved in the area/ chiefdom in close

⁴⁹ Source: UNICEF data provided on target communities for CLTS activities. UNICEF later informed that this data is not complete.

consultation with the district. Communities with WASH facilities supported by other organisations were excluded in order to avoid duplication. The IPs reported that all target locations were reached, including hard-to-reach areas.

Groups reached compared to targets.

ASWA-SL partners engaged entire communities rather than specific segments within the communities, in part due to the models selected (i.e. CLTS is based on a total community approach).

Some challenges were reported in relation to covering all WASH components in the communities; all targeted communities were reached with sanitation and hygiene promotion interventions, but a few communities were not reached with water supply due to poor availability of ground- or surface water as well as time and funding constraints. The facilities observation revealed that in a number of communities, the water points were not adequate for the population or seasonal resulting in obvious hygiene problems due to lack of easy access to potable water.

Strategies were adjusted midway through implementation to address these challenges, e.g. by drilling deeper, solar motorized boreholes with larger reticulated gravity schemes, especially in Koinadugu and Falaba, which naturally benefit from rolling hills and mountainous terrain to serve schools, healthcare facilities and communities in close proximity to each other from one source, as opposed to only constructing individual hand dug wells.

Considerable effort was made to reach all vulnerable groups, especially with the design and deployment of disability-friendly WASH facilities in schools. However, one IP reported some challenges in reaching people living with physical disabilities not having the means of mobility to attend community sensitization sessions. This was also mentioned by the commission of people living with disability that most of the rural people living with disabilities are heavily constrained and depending on assistance from relatives for mobility.

District WASH stakeholders confirmed that vulnerable groups in the target communities were reached. However, in Fullah communities in Koinadugu/ Falaba, women were not allowed to take leadership roles in WASH committees for religious reason as Fullah communities are dominantly Muslims. The IPs noted that all vulnerable groups were reached in the target communities as part of their commitment to ensure no-one is left behind in their WASH interventions.

Community groups in Koinadugu/ Falaba districts confirmed that ASWA-SL, especially the water facilities, reached every member of the community and that the facilities are in locations easily accessible for all. The main obstacle, to accessing the water facilities is the inability of some members to pay monthly contributions in some communities for the maintenance of water points.

Some of the community leaders and youth in Bonthe district expressed concern that the project did not reach everybody, including the elderly and people living with disabilities because the facilities were built at a distance and heights that some could not access easily.

There is some evidence that overarching strategies that addressed the needs of women and children were utilized in day-to-day programme implementation. Partners at the district level, e.g. Akvo, included reporting on parameters capturing whether special needs were addressed at the community level, including among the beneficiaries the proportion of people living with disabilities, youth, and children.

Key findings related to EQ7:

FINDING 7.1: The targeted geographical areas and targeted groups were generally reached, but reaching people living with disabilities was challenging due to location and design of facilities.

9.2.2 EQ8 Effectiveness – achievement of results

To what extent have the expected results of the program been achieved?

Achievement of targets

ASWA-SL reported that all targets were reached in excess of initial targets. Targets in the PD were adjusted upwards in Annual Reports and monitoring tools were adjusted upwards at different stages of programme implementation, while budget was adjusted downwards during the course of implementation (see Table 9-5 in the Efficiency Section). Table 9-4 shows the targets at design, the revised targets, and the final reporting on achievements of the programme.

The targets were set and reported in terms of persons served, but not disaggregated to gender or age and groups in the community.

Table 9-4: Reported level of achievements of the expected results⁵⁰

	Target*	Status for indicators		Level of achievement
		Outcome	Output	
Result 1: Water Supply				
Target at Design	355,883 people in the two target districts are reached in hand washing with soap promotion campaign with increased accessibility to soap and practicing household water treatment and safe storage	Target reached – 2 indicators ⁵¹	Target reached – 4 indicators ⁵²	
Revised Target	50,000 new water users ⁵³ continue to get safe water supply and 450,883 beneficiaries continue to get water treatment			
Result achieved	173,220 new water users continue to get safe water supply ⁵⁴ and 571,614 beneficiaries continue to get water			Target revised upwards and exceeded

⁵⁰ based on the 'Years 2013 – 2018, ASWA-WCA Tracking Table – Sierra Leone Results; and the ASWA-SL Final Report

⁵¹ 1.a.1 New water users (Repaired/ Rehabilitated water points, new water points (boreholes fitted with HP and Small scale water supply networks); and 1.a.2 New users household water treatment.

⁵² 1.b.1 Repaired/Rehabilitated water points; 1.b.2 Construction of new water points (boreholes fitted with HP); 1.b.3 Small scale water supply networks; 1.b.4 Households reached with water treatment activities through usage of any approved techniques (chlorine, filter, boiling, SODIS, etc.);

⁵³ please note there is a discrepancy on the 2019 Final Report on the summary table where 50,000 is the target and results table which has 48,000 as the target.

⁵⁴ Difficult to assess for the ET as analysis of available data indicates that the total population of the WINC localities in the progress database is 47,904 but some large gravity systems and others are not completed as of December 2020, giving a maximum of 25,527 if all other water points and water systems have been completed.

	Target*	Status for indicators		Level of achievement
		Outcome	Output	
	treatment			
Result 2: Sanitation				
Target at Design	355,883 people in the two target districts practice total sanitation.	Target reached – 1 indicator ⁵⁵	Target reached – 1 indicator ⁵⁶	
Revised Target	450,883 beneficiaries continue to maintain (improved) basic sanitation facilities			
Result achieved	211,495 people in the two target districts practise total sanitation ⁵⁷ . 128,855 new users of basic (⁵⁸ improved) sanitation facilities			Target revised upwards and exceeded
Result 3: WASH in Institutions				
Target at Design	34,000 school children and teachers in 170 schools in the two target districts have sustainable and equitable access to and use of school-owned WASH facilities.	Target reached – 4 indicators ⁵⁹	Target reached – 4 indicators ⁶⁰	
Revised Target	34,400 new students have access to sanitation and safe drinking water and continue to maintain and use latrines and water points			
Result achieved	59,048 new students using latrines and water points			Target exceeded
Result 4: Hygiene Education				
Target at Design	355,883 people in the two target districts practice hand washing with soap and HWTS.	Target reached – 1 indicator ⁶¹	Target reached – 1 indicator ⁶²	
Revised Target	450,883 beneficiaries are reached with education on improved hygiene behaviours			
Result achieved	473,441 people with improved hygiene behaviours			Target revised upwards and exceeded
Result 5: Enabling Environment				
Target at Design	Enabling environment and sector strengthening	No outcome indicator	Target reached	

⁵⁵ 2.a.1 New users of (improved) basic sanitation facilities

⁵⁶ 2.b.1 New Open Defecation Free communities

⁵⁷ These figures have been calculated from the UNICEF ASWA progress database of November 2019.

⁵⁸ result areas are adjusted according to sub-sector, i.e. Result 1 in ASWA-WCA is water supply, but in ASWA-SL is sanitation

⁵⁹ 3.a.1 New students using latrines; 3.a.2 New patients using latrines; 3.a.3 New students using water points in schools; 3.a.4 New patients using water points in health centres

⁶⁰ 3.b.1 Schools with new/ rehabilitated latrines; 3.b.2 Health centres with new/ rehabilitated latrines; 3.b.3 Schools with new/ rehabilitated water points; 3.b.4. Health centres with new/ rehabilitated water points

⁶¹ 4.a.1 Est. # of people with improved hygiene behaviours

⁶² 4.b.1 Est.# of people with knowledge on improved hygiene behaviours

	Target*	Status for indicators		Level of achievement
		Outcome	Output	
No Revised Target			– 8 indicators ⁶³	
Result achieved	Varied reporting: i.e. 3 sector coordination mechanisms in place, 3 Joint Sector Reviews organized			Unclear target. Good level of results reported.

Based on the data from the evaluation team's field observations some activities were not completed, e.g. two of the communities in Koinadugu district reported that all planned activities were completed while in two others, the expected projects were far from being completed. For the sanitation activities, this seems to indicate that the CLTS approach was not effectively disseminated since the 'programme' is not constructing toilets, but the households were expected to build their own latrines or have arrangements with neighbours for the use of a latrine. The access to toilets facilities was seen in many communities as being inadequate, most households sharing facilities and not being comfortable for visitors to inspect their facilities.

Equal access to water facilities was provided to all the communities, although of different levels of access in the respective communities, with a high number of persons sharing water points in some communities.

Likewise, community leaders and youth in Bonthe district expressed that the planned activities in their community were not completed on time and did not entirely fulfil their expectations. The evaluation team's field work indicates that approximately 70% of the communities have access to water supply, but not adequately so. For sanitation, some reported that they only had access through the facilities built at the school. Demand for sanitation and hygiene were created through the CLTS approach. Despite the fact, households built toilets, but handwashing facilities were missing during the field visit, however, except for those provided by Village Savings and Loan Association (VSLA) members in the fight against COVID-19.

People reached compared to targets.

The number of persons and primary school pupils reached by the ASWA-SL Programme as compared to targets for selected outputs from the 'UNICEF Programme Monitoring Tracking Table' are shown in Figure 9-4.

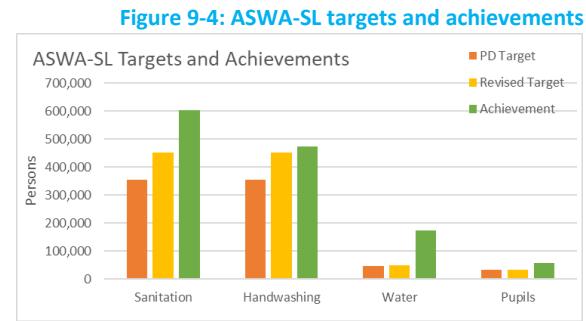
⁶³ 5.b.1 Sector coordination mechanism put in place; 5.b.2 Annual WASH Indicators monitored and Joint sector reviews organized; 5.b.3 WASH national policies/ strategies developed; 5.b.4 Situation analysis of WASH in school carried out and investment case exists for resource mobilization; 5.b.5 Technical norms and standards for water supply and drinking water quality developed; 5.b.6 Knowledge Management implemented (documentation and sharing of experiences, best practices, etc.); 5.b.7 National Planning for Results Initiative (NPRI) conducted; 5.b.8 WASH-BAT, MoRES organised and fed in WASH planning or Evaluation Framework monitoring

The tracking tables presents impressive achievements in terms of number of persons covered, exceeding all targets. The definition of the indicators to measure the achievements are important and the evaluation team found that the headings in the Tracking Tables needed clarification. For example:

- [The tracking table reports on result area 1 ‘People with sustainable access to improved water’](#): consultations with UNICEF indicated that this includes all the water sources constructed or rehabilitated by ASWA-SL and functioning at the time of completion. The field observations indicate that this includes some that are seasonal and/or not-functioning⁶⁴.
- [The tracking table reports on result area 2 ‘people with sustainable access to basic sanitation’](#): Consultations with UNICEF indicate that the reported achievements are the population that have access to improved sanitation facilities. The target for new users of (improved) basic sanitation facilities is the same as the target for result area 4 ‘hygiene education and sanitation promotion’ and the achievement for result area 2 of 604,606 people is higher than the population reached by result area 4, the promotion campaigns of 473,441 people. The reported achievement of access for more than 600,000 persons is very high compared to the total population in the target districts of 675,000 people. The Evaluation Team did not have access to data verifying that the persons reported actually have sustainable access to sanitation.
- [The tracking table reports on result area 4 on ‘Hygiene Education and Sanitation Promotion’](#): the targets and reported achievements are the same for ‘People with improved hygiene behaviours’ and ‘People with knowledge of improved hygiene behaviours’. The population reported seems to be the persons reached by the hygiene promotion activities and campaigns, however knowledge does not necessarily result in changed hygiene practices. UNICEF has also clarified that the number for improved hygiene behaviour include direct beneficiaries (those involved in direct hygiene promotion activities and monitoring behaviour change) and indirect beneficiaries (a small proportion of those reached through hygiene promotion campaigns).

Water in communities

The field observations of facilities and consultations with communities revealed some shortcomings in the functionality of a number of completed wells and piped water systems, with some design issues that prevent systems from delivering water as expected, e.g. water not being available during dry seasons. It was also observed that a high number of persons were reported served by some water installations. For example, one hand dug well in Bonthe serves a community of 437 persons which is far above the national standards of an average of 250 persons per installation, and well above the expected yield of the installation. These observations are described in detail in ‘Appendix 7 Facilities Observations Checklist – Technical Narrative’.



⁶⁴ While the non-functionality is related to a specific date of data collection it is a general indication of reduced access to safe water.

The challenges with seasonality of hand dug wells and the general functionality of the water installations indicate that the reported number of persons served by the water installations is higher than the actual persons getting water from the ASWA installations.

In the case of seasonal wells or other water supplies their inclusion in the progress reporting implies that this community has now been provided with at least a basic service level, but a basic service level requires that the service be provided at all times, i.e. for 12 months of the year. If there are periods when the community can no longer get water from the protected source they will have to resort to unprotected or surface sources with a consequent increase in health risks and time spent collecting water. For facilities which are repairable by the community using their own resources, non-functionality is not an issue which should affect reporting, but where the water supply is partly functional or non-functional due to a design or construction defect, it seems incorrect to include these localities in the progress report as having been provided with a basic service.

The IPs and the District WASH teams (in particular the MWR water point mappers stationed at district level) seem not to have utilised the Water Point Mapping⁶⁵ tools to record the completed installations although these were developed by the MWR in collaboration with support from UNICEF.

The total number of persons in the ASWA-SL target communities reported as having been covered with access to water services is 173,220 persons⁶⁶ which is similar to the number of persons reported to have been provided with access to water services through the ASWA-SL⁶⁷. This corresponds to 82% of the population in the target communities.

The results from the baseline and end-line household survey on the SDG WASH indicators for access to water are shown in Figure 9-5.

⁶⁵ Latest entry on <https://washdata-sl.org/water-point-data/> seems to be in October 2016 when the general WPM Update was conducted as part of the national SDG WASH Baseline survey

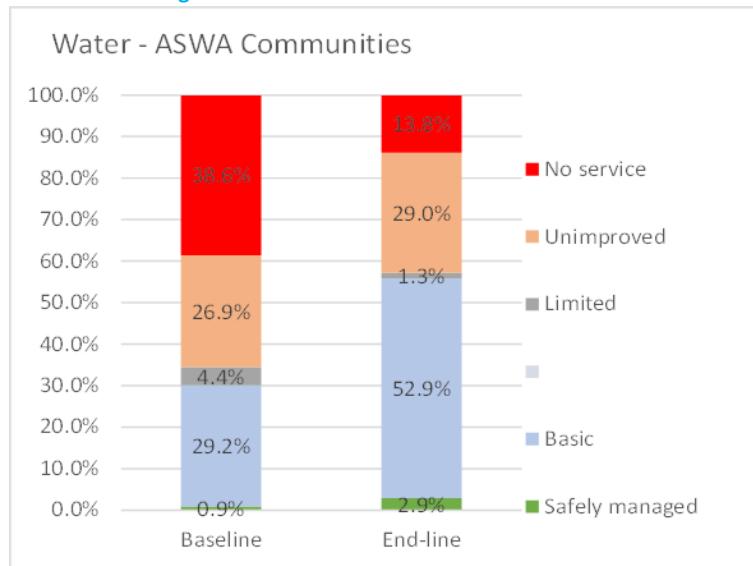
⁶⁶ UNICEF: Programme Monitoring Tracking Table 30 May 2020

⁶⁷ With the available data, it was not possible for the evaluation team to estimate the number of persons covered by the ASWA-SL program with different standards of WASH services since i) in Bonthe district population figures are not available for most of the CEDA solar borehole systems. There are also an unknown number of WVI solar borehole systems; and ii) for statistical reasons it is not possible to reliably estimate the numbers of functional water systems or their service levels from the samples inspected, this is explained in more detail in the section on sampling.

Figure 9-5:Baseline and end-line statistics on access to water

This shows substantial improvements in the levels of basic and safely managed service from 30% in 2016 to 56% in 2020. However, these figures are for the wet season situation and the reader is referred to the annex on data analyses section 15 which shows sharp decreases in levels of service in the dry season.

It is also seen that the proportion of users obtaining drinking water from surface sources has fallen substantially from 38.6% in 2016 to 13.8% in 2020. The analysis in section 15 of the annex shows that this improvement is carried over to the dry season. In 2016 most users affected by the seasonality of their water sources used surface water as an alternative. In 2020 most users affected by seasonality were instead obtaining water from unimproved sources, which are safer than most surface sources.



Sanitation in communities

The results from baseline and end-line household surveys on the SDG WASH sanitation service ladders showing the proportion of the population in the ASWA target communities using the respective standards of sanitation access are shown in Figure 9-6.

The reduction of more than 20% in the population without access to any sanitation is a good achievement of ASWA-SL as it clearly reduces open defecation.

The high proportion of persons using unimproved latrines of almost 56% is in line with the success of the CLTS process of households constructing the type of toilets they can afford. The population using limited sanitation⁶⁸ is also in line with the CLTS approach encouraging households to use neighbours' toilets if the household does not have its own.

56.9% of the households responding to the end-line survey reported safe disposal of children's stool. There was an increase in the number of households in the Bonthe district who reported safe disposal of children's stools from 53.4% at baseline to 57.1% in the end-line survey. However, there was a decrease in Koinadugu from 68% to 56.7%.

⁶⁸ the SDG WASH indicator for limited sanitation is using an improved facility but shared with other households.

The proportion of the population practicing open defecation at district level⁶⁹ in the two target districts in 2017 was 23.6% compared to 25.2% in 2016. The responses to the end-line survey indicate that approximately 41% of the households were of the opinion that their communities have been declared ODF. In Bonthe, 24.7% reported that their communities have been declared ODF compared to 64.8% of the households in Koinadugu.

Handwashing in communities

The end-line survey indicates that there is an increase from 10.7% to 13.2% in the households having handwashing facilities with soap and water in the ASWA-SL communities. In Bonthe, 11.2% and in Koinadugu/ Falaba, 16.9% of the households have handwashing facilities with soap and water on the premises. This is a very small increase in Bonthe⁷⁰ from 10.1% and a larger increase from 11.4% in Koinadugu/ Falaba during the baseline survey. The baseline and end-line surveys results are illustrated on Figure 9-7.

Contradictory to the relatively low level of handwashing facilities, about 59% (54.3% in Bonthe and 65.9% in Koinadugu/ Falaba) of households interviewed in the end-line survey responded that they wash their hands with soap after defecation. This is an increase from the baseline where about 45% in the two districts responded that they wash their hands with soap after defecation.

These results indicate some success of the hygiene education as generally it seems that people are well aware that they ought to wash hands while actual practices might be lacking behind. Effective handwashing will also be limited by the easy access to water in many communities since hand washing is unlikely to be sustained in the absence of an adequate, convenient, and reliable supply of water.

Figure 9-6: Baseline and end-line statistics on access to sanitation

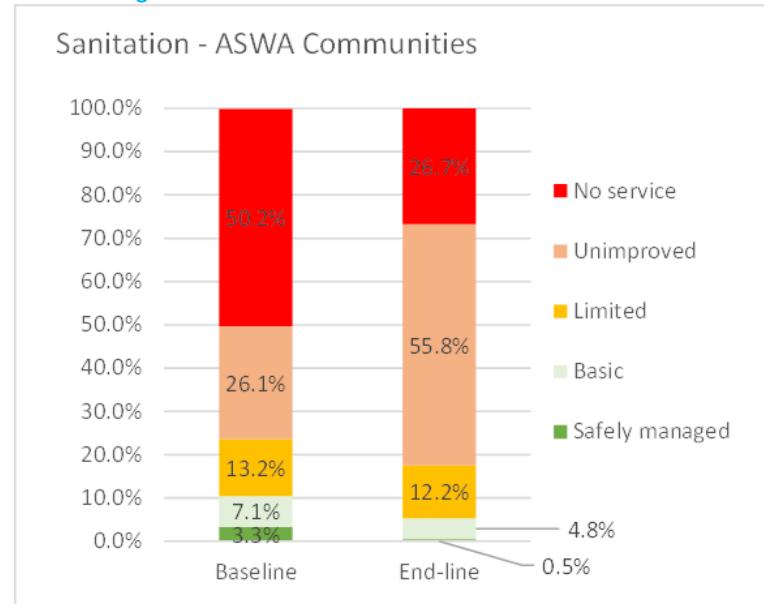
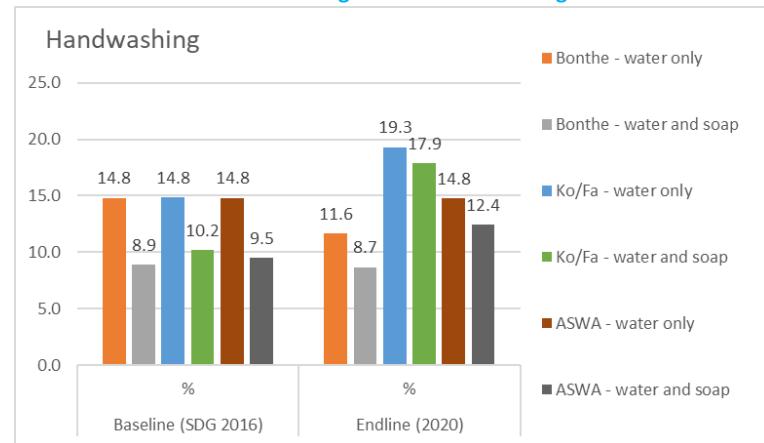


Figure 9-7: Handwashing baseline vs end-line



⁶⁹ 2017 figures from MISC6 and 2016 figures from population census

⁷⁰ The surprising results from Bonthe might be influenced by the baseline being district level data and the end-line focussing on the ASWA-SL target communities.

Household water treatment

ASWA-SL promoted household water treatment methods to improve the quality of drinking water used in the households. The baseline and end-line survey collected information on the use of water treatment methods in the communities and the results are illustrated on Figure 9-8.

The use of chlorine and bleach seem to have decreased in the ASWA target communities while the proportion of households responding that they strain the water or let it stand and settle have increased substantially in the target communities.

Solar disinfection has been introduced but is used by a very small proportion of the households while the boiling of water and use of water filters have also increased, while remaining a small proportion of the treatment methods used.

The effectiveness of removing contaminants from the drinking water by simply straining or letting it stand and settle might be limited.

This is in particular an issue in view of the serious water quality issues that persists in rural systems in Sierra Leone as illustrated on Figure 9-9 showing the household level water quality map for Bonthe district⁷¹.

Figure 9-8: Household water treatment

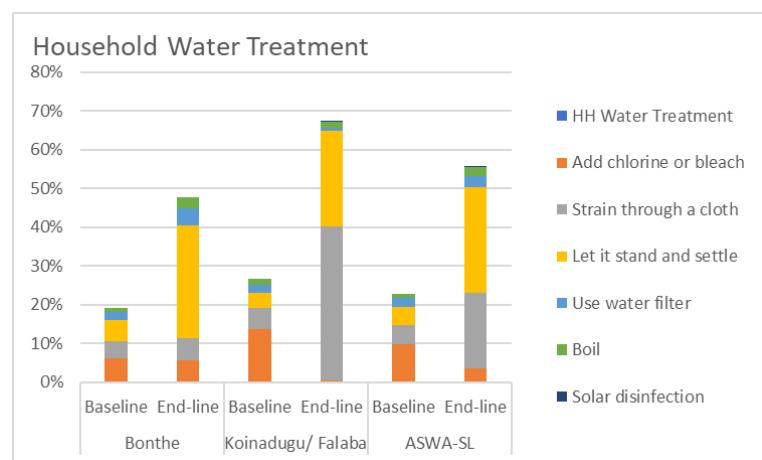
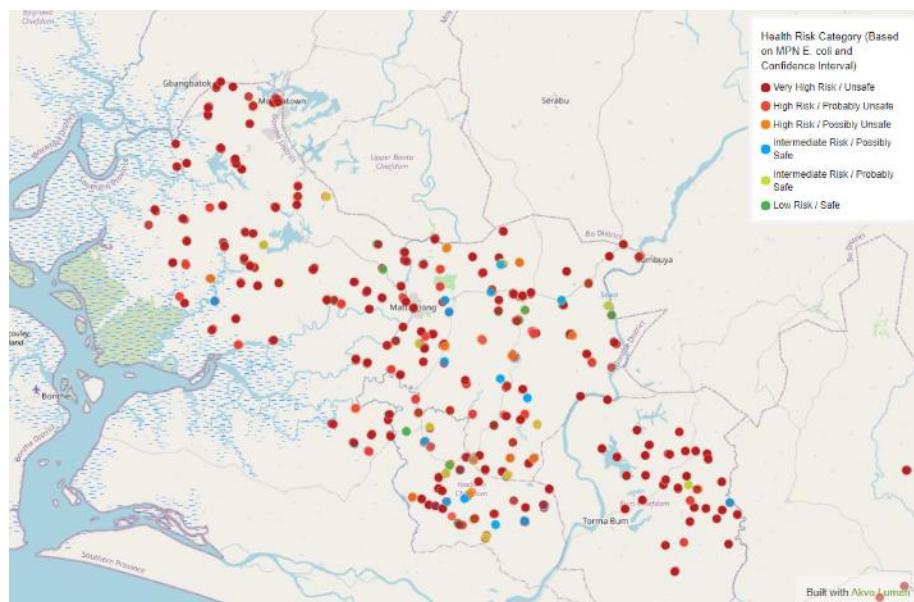


Figure 9-9: Map showing household level drinking water quality in Bonthe district.

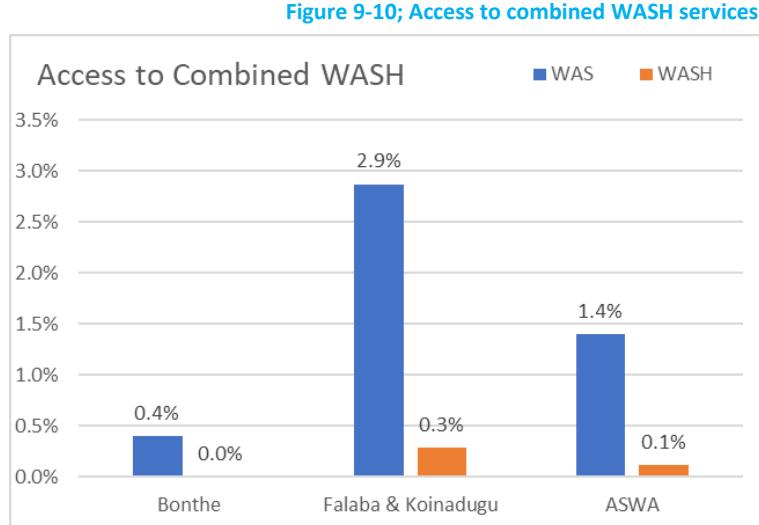


⁷¹ <https://sierraleone.akvolumen.org/s/jvy2IUDccb4> : monitoring data from UNICEF ASWA funded data collection on water quality in 2019. An example of underutilised tools available to the WASH MDA and UNICEF.

Combined WASH in communities

Health benefits from WASH investments are more likely when households have combined access to basic water and sanitation services together with hand-washing facilities and soap.

For the first time, in 2016, MICS collected data on the combined access to WASH (basic water and sanitation, handwashing and soap) in households in Sierra Leone. The data indicated a very low combined access of about 2% in rural areas. This is confirmed by the end-line survey data as presented in Figure 9-10 showing the proportion of households (1.4%) that have both basic water and sanitation (WAS) and the proportion of households (0.1%) that have access to all three components of WASH.



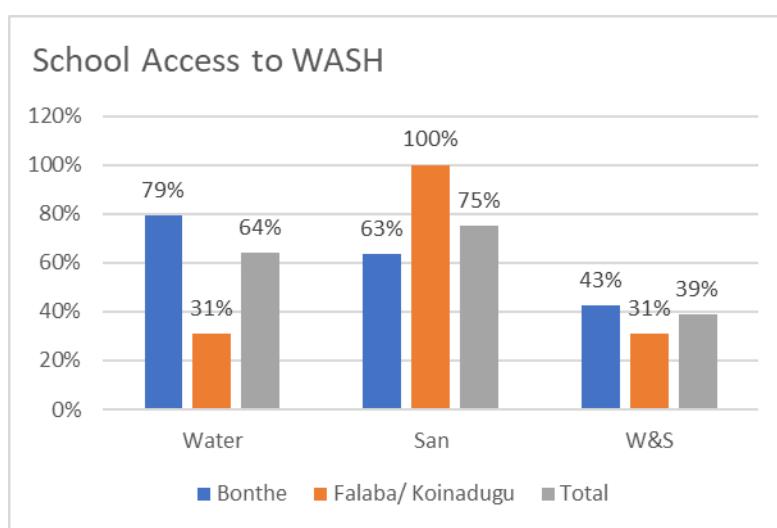
WASH in Schools

The results of the end-line data collection and the facilities observations in schools that were targeted by ASWA-SL are illustrated on Figure 9-11.

The results shown for 'water' is the proportion of the surveyed schools that had water services in accordance with the MBSSE standards. The main reason some schools do not have services is functionality and seasonality.

The results shown for 'sanitation' are the proportion of the surveyed schools that have sanitation services according to the MBSSE standards for toilets (privacy, separation, number of cubicles etc.).

Figure 9-11: Access to WASH in schools



All schools had provision for handwashing in the form of buckets and most provided soap, but the effectiveness of these measures is closely linked to the water supply and less effective where the water supply does not meet standards⁷².

The last group of results shown on Figure 9-11 for 'W&S' are the proportion of the surveyed schools that have access to both water and sanitation according to national standards. Only 40% of the surveyed schools fulfil this.

Beneficiary views on benefits

In Koinadugu and Falaba districts, easy access to water and improved sanitation are seen as the main benefits derived by communities from ASWA-SL. While some communities said they were happy with the facilities provided, all requested for more, especially toilets. The time spent on fetching water was reduced significantly. Similarly, in Bonthe district, the community leaders and youth experienced significant benefits in terms of easy access to drinking water. Community leaders were very pleased with the results and wanted continuation of ASWA-SL.

Community leaders and youth groups both expressed that ASWA-SL provided significant improvements. Open defecation had ended, and they wash their hands frequently after domestic activities, and they now have easy access to facilities, and nobody have to fetch water from streams. For the wealthy and poor people, there is now no difference as both have access to water and sanitation. Some of the toilet's facilities built are accessible for people living with disabilities.

Enabling Environment – policies, plans, strategies, and guidelines

To support the enabling environment, ASWA-SL intended to ensure that ministries and government agencies at all levels could successfully undertake their roles and responsibilities, which in turn would contribute to strengthening sector capacity and achieving programme results (Result 5).

National Capacity Building: KIs have indicated that UNICEF has not accurately reported on how ASWA-SL contributed to national sector capacity building activities under Result 5 (Enabling Environment) and not indicated the level of collaboration with sector partners. For instance, ASWA-SL annual reports state that ASWA-SL supported GoSL in facilitating a national WASH sector conference where the national political leadership was represented. KIs with sector stakeholders indicate that the UNICEF WASH Programme's professional/ technical contribution to the sector conference was jointly done with other donors, and that UNICEF's contribution was minor. Another example is that ASWA-SL reporting stated that ASWA-SL supported the development of the national Urban WASH Policy (2019), while stakeholders indicate that UNICEF's involvement was limited in an extensive process. This might be due to the fact ASWA-SL focused on rural interventions.

Coordination: In terms of sector coordination, ASWA-SL worked in collaboration with GoSL to support a national WASH sector platform which brings together all sectors partners and donors on a monthly and quarterly basis to review the sector progress and discuss policy issues. Stakeholders have a mixed assessment of the coordination platform, with one interviewee stating that early in ASWA-SL coordination

⁷² See 'Appendix 7 Facilities Observations Checklist – Technical Narrative' for details of water supply in schools.

was effective, but deteriorated in the later stages of implementation, and that the Steering Committee was not functional.

The national level WASH sector coordination by nature has to be government-led, and low priority given to effective sector coordination by GoSL was not an issue that ASWA-SL could address on its own. It must, however, be recognised that the manner in which UNICEF and other donors and non-governmental development partners retain full control over the resources for programme implementation with limited room for decision-making by the WASH MDAs could be a demotivating factor for the WASH MDA professionals to participate, which in turn reduces the effectiveness of the GoSL led coordination.

Nonetheless, some results were achieved by UNICEF WASH and ASWA-SL vis-à-vis creating an enabling environment, which are seen to be a success by the KII respondents at national level.

National Monitoring : One area is an improved emphasis on rural WASH monitoring, which was seen to be largely absent previously. There is a broad recognition that sector monitoring now pays more attention to disaggregating data by groups, gender, age, etc. and is able to identify specific aspects of WASH access (e.g. where water contamination occurs), however,, a national, sector-wide monitoring system that demonstrates progress in all districts has yet to be established.

ASWA-SL demonstrated the need for national monitoring and how such a system can function. However, it must be recognised that there are many challenges in operationalising the national M&E system and that the establishment of the monitoring tools is the easy part, whereas the continued data collection and integration of the data collection tools in the daily work of WASH partners in districts and the private sector to use the systems is the difficult part.

As mentioned in Chapter 9.2.1, well-established tools like the water point mapping were not used consistently to record the data and functionality of water facilities implemented with support from ASWA-SL, whereas this could have been a good opportunity to illustrate the use of the monitoring tools to WASH stakeholders in Sierra Leone by ensuring that data on all facilities implemented by ASWA-SL were collected and made available in the M&E Systems. ASWA also facilitated the WASH platform and inter-collaboration with WASH MDAs (MWR, MHS, MBSSE), however their active functionality remains a challenge.

Key findings related to EQ8:

FINDING 8.1: ASWA-SL reporting indicates that all targets have been reached, in excess of initial targets, however an adjustment in targets suggest an initial under-targeting. Initial target setting appears to have under-estimated populations that could be reached.

FINDING 8.2: Targets were met or exceeded, although the field data collected indicates lower achievements compared to UNICEF progress reporting, to some extent related to unclear definitions of programme indicators.

FINDING 8.3: There were challenges with seasonality of hand dug wells and piped gravity systems using surface water sources and with the functionality of the water installations generally, pointing to possibilities for improving the technical capacities for designing and implementing gravity water facilities and for supervision and inspection.

FINDING 8.4: Some communities were not adequately served by the facilities constructed according to national standards, e.g. 250 persons served per water point. The combined access to all three WASH components remains low in the ASWA target districts and in Sierra Leone generally. However, it is to be noted that the programme was not specifically designed to monitor and report against these specific standards.

FINDING 8.5: ASWA-SL's contribution to the national WASH governance framework and capacities is appreciated by stakeholders, in particular in relation to the sector M&E and the close collaboration with Districts and sub-national MDAs. However the attribution of ASWA-SL to national sector capacity building activities is not clear and reporting does not indicate level of collaboration with sector partners.

9.2.3 EQ9 Effectiveness – WASH awareness and practices

To what extent have WASH awareness and practices improved?

Adopting safe hygiene practices

Overall, widespread improved awareness practices in programme locations were identified as a strength of ASWA-SL. Partners and ASWA-SL monitoring generally indicated that the proportion of beneficiaries who adopted safe hygiene practices including handwashing at critical times and the use and upkeep of toilets increased compared to baseline. This was confirmed by community leaders and teachers, as illustrated by these quotes: *"Before our intervention people in the community use to put their cloths and plates on the floor, but after our intervention every household have a cloth lines, plate rags etc."* and *"It (sensitization) was not sustainable at the initial stage. But second phase was far better. Lot of positives change with regards WASH awareness and hygiene practices in the school"*.

Implementing partners worked continuously on awareness activities in collaboration with community members (WASH Committees, community health workers, schools health clubs).

As shown in section 9.1.2, the end-line survey revealed some improvements in hygiene practices, such as 59% of the respondents informed that they wash hands with soap after toilet use.

Communities in Koinadugu/ Falaba Districts said there had been a change in hygiene behaviour compared to before the project, highlighting regular handwashing, water tanks for toilets in schools, monthly general cleaning, and the framing of new bylaws on sanitation. In Bonthe district, community leaders and youth reiterated that hygiene behaviour had improved in communities and schools; open defecation had stopped, hands were washed frequently after visiting toilet, laundry was hung on the sticks instead of laid the ground for drying.

IPs noted that a one-year sensitisation of community was necessary but not sufficient to change age-old behaviours. It needs a sustained effort at the community-level over longer time.

Perceived benefits of changes in hygiene practices

The FGD in Koinadugu and Falaba revealed that the changes in hygiene behaviours were considered important and needful to continue because they were considered as beneficial in preventing communities from a number of diseases. This was reiterated by the community leaders and women in Bonthe district

that expressed that hygiene practices have improved because diarrhoea and other related water borne diseases have reduced drastically in the communities.

Menstrual hygiene practices

Menstrual hygiene sensitization done in schools was seen to be a successful contribution ASWA-SL; such sensitization had not been done previously. Pupils, head teachers and female teachers in Koinadugu and Falaba confirmed students' awareness of the importance of menstrual hygiene and the practice of good hygiene practices by pupils who had started menstruation both in school and elsewhere, and that nearly all female students at the menstrual age practiced good menstrual hygiene. One teacher in Bonthe stated that:

"There is also an increase of school enrolment for the girl child because a separate room for menstrual hygiene and we also train them how to fabricate menstrual pads. In all these efforts the female teachers in the school are part of the training process."

Youths affirmed that female students are generally aware of the importance of menstrual hygiene practices and the responses from the FGD indicate that about 85% practice good menstrual hygiene.

Key findings related to EQ9:

FINDING 9.1: Improved awareness practices in programme locations have been identified as a strength of ASWA-SL.

FINDING 9.2 : Menstrual hygiene management sensitization done through school activities, was seen to be a successful area of ASWA-SL as this is an area without previous sensitization activities.

FINDING 9.3: Community members commenting on inadequate numbers of household sanitation facilities indicate challenges in the introduction of CLTS principles at community level and the understanding of these since the CLTS process is encouraging community-members to construct household latrines.

FINDING 9.4: A high level of awareness of hygiene practices was achieved through hygiene education in schools and communities as well as the support to the establishment of WASH Committees, VLSAs, and SHCs. However, the field observations indicate that this has not resulted in a similar high level of actual practice of hygiene and handwashing.

9.2.4 EQ10 Effectiveness – O&M Systems

To what extent has functional systems for operation and management of WASH facilities been put in place?

Functionality

Water Supply: The observations of water in communities found that six out of nine water points and water systems in Bonthe, none out of three in Falaba and two out of seven in Koinadugu were functional as they were still under construction at the time. UNICEF reported that these will be completed in June 2021. (see Appendix 7, WinS observation checklists A1-A5).

Of the 11/21 non-functioning water points it is possible that in some cases this was due to breakdowns which should be the responsibility of the community to repair. A determination of the cause of the breakdown was beyond the scope of the observation checklists but in 10 of the 11 cases there were obvious sustainability and serious long term issues related to the design and construction such as seasonality and, water quality, or capacity. In the case of the water point at Gbahama in Bonthe district, it was simply that the water point had never worked since it was completed. UNICEF, however reported that this facility was not included in the final report.

Similar results were found for school water supplies: six out of nine in Bonthe, one out of two in Falaba and none out of two in Koinadugu were functional (see Appendix 7 WinS observation checklists C1-C4).

The same comments as made for WINC also apply to WINS facilities where 7/13 were non-functional and 6 of these facilities are also had serious long-term issues such as seasonality.

Overall for all the water points and water systems inspected during the 2020 survey only 16/32 (50%) were functioning. The small sample size means we cannot say with confidence that 50% of all ASWA water supplies are therefore non-functional, the actual situation may be better or worse than this, but it does indicate the need to investigate and determine the true extent of the problem and the extent to which seasonality and construction issues are the cause.

WASH Committees exist and are operational in the communities consulted Koinadugu and Falaba, and in charge of, and collecting funds for, managing, operating, and maintaining water points. Monthly contributions are generally done on a flat rate for every member of the community. Minor repairs are done by the WASH Committees and when faults are very serious, experts in water points maintenance were hired. Two out of the four communities said they have people who were trained on hand pump repairs.

Community leaders in Bonthe confirmed that normally a member of the WASH Committee is responsible for water point maintenance. However, a few youth groups said that they did not know who was responsible for maintaining the water points. Approximately 45% of the community leaders confirmed that their community had a system of management and operation but no systems for maintenance and financial management.

The observation checklists showed that in all districts the preferred method for paying for repairs was by collecting funds, when needed for a repair, by making a collection from households. Some localities did make monthly collections from households and in 2 cases fines for breaking byelaws were added to the repair fund.

Communities complained that while some infrastructure was of good quality other facilities were of poor quality, such as some household toilets that did not even last a year and frequent breakdowns of hand pumps. Maintenance and repair of facilities were the role of WASH Committees. According to community leaders, a good number of the facilities are broken down. Several maintenance efforts have been done but the facilities were still not working.

Sanitation Facilities: The observations of school sanitation facilities found that 11 out of 13 facilities visited in Bonthe, all four in Falaba, and all four in Koinadugu were functional, i.e. an overall 90% functionality (see Appendix 7 WinS observation checklist D2).

In the communities consulted in Koinadugu and Falaba districts, women have the main responsibility for maintaining the household sanitation facilities. Community leaderships reported that they implement bylaws as a way of ensuring good hygiene practices in the communities. In the schools, sanitation facility maintenance is a shared responsibility between boys and girls across different classes. At one school it was reported that pupils arriving late at school were required to carry out latrine cleaning duties.

Community leaders in Bonthe reported people were assigned to maintain the sanitation and the washing facilities, while youth groups said that those people who are closer to the facilities are responsible. Community leaders said that they will continue with the awareness raising in the community after the end of ASWA-SL. 15% of the youth groups indicated that they would continue to survey the communities and report people who are not maintaining the facilities.

School Management Committees: The end-line survey found that 95% of the SMC for WASH are functional, 92% of the schools in Bonthe and all schools in Koinadugu reported that all their SMCs are functional and active. However, SMCs are not fully fulfilling their roles with regards to the WASH facilities as some schools reported breakdown of water facilities with SMCs not doing enough to ensure repairs were carried out. In Bonthe SMCs expressed that they are monitoring and supervising the WASH facilities and ensuring that they are in good condition. The SMCs typically meet twice annually.

School Health Clubs: The end-line survey with head teachers indicated that functional SHCs exist in 83% of the targeted schools (75% in Bonthe and 100% in Koinadugu).

WASH Committees: Three of four communities consulted in Koinadugu and Falaba have a WASH Committee according to community leaderships and women. However, three of the four youth groups were unaware of the existence of WASH Committees in their communities but did know individuals responsible for looking after the water points. WASH Committees are largely perceived as fulfilling their roles.

Village Savings and Loan Groups (VSLAs): Functioning VSLAs were in place and well-functioning in all the communities consulted. While the VSLAs are considered very important and useful in improving the livelihoods of members, respondents said presently the individual members pay for latrines construction and water points maintenance, and loans from the VSLA are presently not common for WASH activities.

Cost recovery

None of the communities visited for the observation of facilities produced records of income and expenditure, but several communities had been able to raise funds and arrange for repairs of hand pumps and replacement of taps without outside financial help and this is an indicator of the viability of community O&M. Six out of nine communities in Bonthe, one out of two in Falaba, four out of five in Koinadugu carried out repairs or improvements at their own expense (see Appendix 7 WinS observation checklists A1-A5). One locality with a solar borehole piped water supply had been able to collect funds and pay for an extension of the distribution system to a nearby health facility.

In Koinadugu, community members, especially women, pay monthly contributions to WASH Committees for the maintenance of water points. In two of the communities visited, the contribution is a flat rate per individual (mostly women) and not per household. In the other communities, a flat rate per household was applied. Community members are required to make extra contributions in the event that what the WASH Committees cannot afford spare parts from the monthly contributions. In Bonthe, community

leaders and youth groups indicated that no payments are made when collecting water and they contribute based on their personal saving when funding for specific repairs are needed. Funds collected are kept in cash boxes and names of individuals or households that have contributed are recorded in books. However, only one community was able to show its cash box during the observation of facilities. Major repairs or spare part purchases sometimes require extra contributions.

Spare part shops and hand pump mechanics

Communities in Koinadugu and Falaba confirmed that Kabala is the only place where they can get spare parts for hand pumps. While most of the parts are available, some parts can be difficult to get. Some communities have mechanics that were trained on maintenance, while others hire mechanics from the chiefdom or from other communities. Communities found that mechanics are always available and generally affordable.

Monitoring by districts

In Koinadugu and Falaba, community visits by district or ward officials/ councillors to support WASH services were rare and uncommon. Not a single community leader or woman recalled the last visit by either district officials or councillors in relation to WASH services. However, the district council officials were perceived by the community leaders as lobbying on the communities' behalf for more programs, either related to WASH or other areas of community development. Community leaders in Bonthe said that they seldom had visits from the district officials – once or maybe thrice in a year. The councillor from the Chiefdom headquarters visited more frequently.

Key findings related to EQ10:

FINDING 10.1: Functional systems for O&M of community and school facilities have generally been put in place in the ASWA-SL target communities; however field observations identify challenges with functionality of water points.

FINDING 10.2: Follow-up visits from the District WASH teams was limited. The lack of data on the completed water points similarly indicates weak inspections by the MWR engineers and water point mappers stationed at district level, although ASWA-SL provided funding for district level monitoring.

9.2.5 EQ11 Effectiveness – unintended results

What are the unintended results (if any) in terms of improving health and WASH status among the targeted women, children, and communities?

No unintended results were identified in terms of improving access to WASH and health conditions amongst the communities related to the ASWA-SL activities.

Respondents in the FGDs expressed that having to abandon their work to offer support to the implementing partners for the implementation of the WASH facilities was a challenge and it reduced their livelihood. This in turn resulted in the difficulties in raising money for the contribution towards the projects, like constructing household latrines or contributing to the community's provision of food and accommodation for the implementation. These responses are not an indication of lack of appreciation by the communities of the support for WASH, but more an indication of the livelihood challenges facing many

rural households. These responses can inform approaches used by UNICEF and IPs in the future when mobilising for WASH activities in other communities.

Leaders in some communities claimed that they unexpectedly had to contribute extra funds to ease the burden on those who could not afford to contribute financially. This indicates a high level of solidarity in the rural communities. Also, VSLAs have been gaining momentum at community-level.

Key findings related to EQ11:

FINDING 11.1: No unintended results of the ASWA-SL activities in terms of improving WASH access and health conditions were identified; however communities expressed unintended or unexpected impact on livelihoods by having to provide labour for implementation restricting the normal income generating activities.

9.2.6 EQ12 Effectiveness – external factors

What where the main external factors to UNICEF (e.g. political, emergency, or socio-cultural barriers) that hindered successful attainment of the expected results and how did UNICEF and its partners address these barriers?

The Project Document identified some risks such as a) misuse of funds by implementing partners, b) inflation driving up costs, c) weak capacities of government and other partner, leading to delays in implementation or insufficient capacity to provide a response at the desired scale, d) civil unrest (upcoming general election), and e) sub-optimal participation of communities, resulting in poor ownership. ASWA-SL was formulated in 2011-12 before the establishment of the MWR.

Ebola pandemic

Effective implementation of ASWA-SL started in 2013, and in 2014-15 the country was engulfed by the Ebola epidemic. The Ebola epidemic was an unforeseeable challenge that reversed some gains made by the ASWA-SL and also forced the programme to suspend implementation to devote efforts to fight the epidemic. During the crisis, healthcare systems collapsed, and impacted on ASWA-SL's programme performance in a number of ways: for instance, concerns about safety of health facilities led to an estimated 70% drop in clinical admissions and a marked increase in maternal and infant mortality. The long-term impact of Ebola on infant mortality rates at least partly offset the impact of ASWA-SL on infant mortality.

The outbreak hampered implementation as the workforce was reduced. Technicians either waited patiently for free labour or had imported labour and bought materials from elsewhere to continue the project. Implementation restarted after the country was declared Ebola free.

The Ebola pandemic naturally had a large impact on all population groups in Sierra Leone. One 'positive' effect of the Ebola in the ASWA-SL communities and in all areas of Sierra Leone has been the increased focus on hygiene and hand washing and intensive hygiene promotion campaigns that the Ebola pandemic prompted. This can have affected positively the responses received from almost all communities on the knowledge and attitude to hygiene and hand washing. However it may be less reflected in the actual practices of hand washing as the end-line survey revealed that only 14.6% in Bonthe and 18.1% in

Koinadugu of the households in the ASWA-SL communities have hand washing facilities with water and soap. The increase from the baseline figure of 13.5% in both districts can be attributed to the ASWA-SL activities as the baseline was also carried out after the Ebola pandemic. These observations are on the presence of handwashing devices and possibly some households might practice handwashing without having a dedicated handwashing device.

Weather and access

Seasonality and weather events/ natural disasters affected road networks and caused migration of beneficiaries (heavy rains, wildfires, timber vehicles destroying roads).

A major unforeseen barrier was the poor road infrastructure in the project areas that was perpetually impassable during the raining season. The rainy season usually limited operations for 2-3 months. The disruptions were in part mitigated by stockpiling construction materials during the dry season and limiting external travel. To access difficult terrain during the rainy season, other means of transportation, such as motor bikes, were used. Partners were able to plan their activities; one partner stated that: "*We plan before the raining season. We dodge those two months, and we make sure we do the chunk of the work before and may be after the rains fall heavily*". It seems evident that the IPs were addressing the challenges effectively.

During the farming season, it was difficult to meet with key stakeholders in the communities as they were busy on their farms. Meeting times were adjusted to meet with key stakeholders when they were not engaged in farming.

One IP suggested that rather than have one level of cost for all areas that allowance should be made for the higher costs incurred when operating in remote areas with difficult access. UNICEF clarified to the Evaluation Team that the IPs are presenting their budgets for the activities and the issues related to higher costs in remote areas should be discussed between UNICEF and the IPs at that stage.

Politics

During the elections in 2018, some staff and beneficiaries were unavailable to work on projects. For example, political campaigns took away young men that provided labour, women who cooked for and fed technicians and people who provided local materials for project implementation.

Access to parts and services

Major barriers hindering continued access to services mentioned by the stakeholders included a) insufficient access to spare parts and technical WASH maintenance personnel, and b) insufficient finance for maintenance and c) seasonality of hand dug wells and sources for piped gravity systems.

Policy environment

The upscaling of the CLTS, SLTS and community water supply depended on GoSL for the creation of an enabling environment and continued support, and on community commitment to maintain the facilities and continue sanitation and hygiene activities.

A conducive policy framework was in general in place since the formulation of the NWSP in 2010, but the implementation of the intentions in the policies remained insufficient throughout ASWA-SL implementation. Constraints included insufficient capacity and availability of funding at national and district levels to effectively carry out the coordination and planning as well as the supervision, inspection

and monitoring activities needed to ensure effective service delivery by IPs as well as supporting communities.

The NRWSSP was intended to operationalise the enabling framework as outlined in the NWSP, but while it was approved in 2017, formal implementation has not yet started and the capacity constraints in the sector remains.

Key findings related to EQ12:

FINDING 12.1: GoSL, UNICEF and IPs responded appropriately and with flexibility to major upheavals, such as the Ebola pandemic. Similarly flexibility was shown in mitigating logistic challenges.

9.3 Efficiency

Criterion	EQ
Efficiency	13. What were the program costs compared to its coverage? 14. To what extent have human, financial and material resources been adequate (in quantity), sufficient (in quality) and distributed/ deployed in a timely manner for achieving results? 15. How effective was partner collaboration with district and local structures? 16. To what extent was the program well-coordinated with other engagements in the WASH sector? 17. What where the main internal factors to UNICEF and its implementing partners that contributed to successful attainment of the expected results? 18. What where the main internal factors to UNICEF and its implementing partners that hindered successful attainment of the expected results and how did UNICEF and its partners address these barriers?

9.3.1 EQ13 Efficiency – Program cost and coverage

What were the program costs compared to its coverage?

Only a broad assessment could be made on programme costs, as data was not fully available to the evaluation. The ET's understanding of the ASWA-SL budgets is shown on Table 9-5. The original budget for the DGIS contribution was USD 9.97m. The programme was temporarily suspended during the Ebola outbreak and funds were re-programmed for Ebola response in agreement with DGIS. A separate grant from DGIS was provided for the Ebola response. The final budget of ASWA-SL was USD 7.9m plus the contributions from UNICEF, GoSL and Communities resulting in a final contribution of USD 10.81m. By end 2019, there was an 80% utilization rate of the DGIS funding.

The anticipated contributions from other partners were 20% from UNICEF Sierra Leone, GoSL and communities, including in-kind contributions, such as UNICEF's design and implementation of the sustainability framework and community contributions. See Table 9-5 that outlines the utilization rate after project closure. It appears that the actual contributions by UNICEF have been increased compared to the budget. The Government and community contributions are reported to remain as budgeted however in percentage terms these have increased since less of the overall DIS funding has been utilised due to some activities not yet being completed.

Table 9-5: Reported utilization for UNICEF, GoSL and Communities

Budget (USD)	Budget		Final Report 2020	
	Contribution	Percentage	Final Contribution	Percentage
DGIS	9,974,686	80%	7,959,346	74%
UNICEF	1,419,926	11%	1,735,398	16%
GoSL	428,250	3%	448,250	4%
Communities	663,220	5%	663,220	6%
Total	12,486,082	100%	10,806,214	100%

The actual cost per beneficiary was consistent with the original budget, with minor variations as shown in Table 9-6.

Table 9-6: Unit Costs – Source: ASWA Tracking Tables, ASWA Proposal)

	Budgeted (USD)	Achieved 2013-2019 (USD)	Percentage change
Average cost per beneficiary who gained access to basic sanitation	11	12	+9%
Average cost per beneficiary who gained access to basic safe water supplies (i.e. 'basic plus')	18	18	0%
Average cost of constructing a school latrine cubicle, i.e. per drop hole	1,332	1,329	-1%
Average cost of achieving an externally verified water safe community	6,564	6,932	+5%
Average cost of achieving an externally verified ODF community	300	306	+2%

The unit costs presented in the Table 9-6 are found reasonable compared to the costs generally seen in Sierra Leone as reflected in the NRWSSP estimates; however the comments above in Chapter 9.2.2 on the difficulties in assessing the actual number of persons served, combined with the lack of actual data on the implementation of projects including the costs experienced for the respective facilities and activities hinders an accurate assessment of the actual unit costs.

Key findings related to EQ13:

FINDING 13.1: The ASWA-SL unit costs appear reasonable compared to costs experienced in Sierra Leone generally, but it is not possible with the available data to fully confirm the actual unit cost of facilities, hygiene education, and capacity building to assess its overall cost efficiency.

9.3.2 EQ14 Efficiency – adequacy of resources

To what extent have human, financial and material resources been adequate (in quantity), sufficient (in quality) and distributed/ deployed in a timely manner for achieving results?

Adequacy of financial resources

District stakeholders and some IPs reported that the financial and human resources provided by UNICEF were adequate for the quality of WASH infrastructure but inadequate for effective capacity development. The training was thus not completed as promised. However, some communities reported that they had not received training because they had prior knowledge on their roles in the implementation and not due to inadequate resources.

Other IPs, on the other hand, expressed concern over the 10-12% partner contribution, although this is an important part of the partnership arrangements between UNICEF and the IPs.

Other concerns raised by the IPs included case-by-case cost of water points, especially in areas where the water table was low and completion of water points that are not seasonal can be more costly. Concern was also expressed by IPs regarding distribution of logistics for implementation; “*Some were given motor bikes while others were given 4WD vehicles*”. While this expresses the opinion of some IPs, vehicles are costly, and UNICEF has clarified that these were used vehicles that UNICEF passed on to the partners based on availability.

Despite the considerable achievement of results, IPs reported that some interventions were not adequately budgeted during the process of design and costing by the IPs. For example where designs of interventions were revised for various reasons, this would have a knock-on effect on costs. The IPs expressed the opinion that such changes were not always adequately resolved between UNICEF and the IP. For example, for the gravity flow water systems visited, costs had increased beyond the budget agreed with UNICEF, in some cases very substantially. Some apparent errors in the system design exacerbated this problem. One of the consequences of this situation is that four out of eight gravity flow systems visited by the evaluation team were still incomplete by end 2020.

UNICEF, however, reported that where there are revisions on the design of a WASH facility, UNICEF had where necessary revised budgets and paid for the additional quantities using the unit rates quoted by the IP.

UNICEF also stressed that most of the gravity-fed systems covered were only being rehabilitated under ASWA, and this had influenced the designs and improvements that could be achieved. While recognising that many of the gravity-fed systems were only rehabilitated under the ASWA project, the Evaluation Team, however, finds it important, that when funding is used for rehabilitation of existing systems, these should be put back into full working order and work implemented in accordance with appropriate quality and designs. This is in particular important in the rural WASH situation in Sierra Leone where there are serious challenges with seasonality and functionality of the existing water systems.

At a number of other localities facilities had not been completed at the time of the visits by the evaluation team. The discussions with the IPs and community members revealed that this is due to various reasons including the planning and budgeting issues. UNICEF WASH has expressed the opinion that the findings from the field are unbalanced and that generally budgeting was efficient.

Community leaders also expressed that there were a lot of delays, due to financial support directed to fighting the Ebola pandemic. Some facilities were completed while others were still under implementation in late 2020. Work on some facilities had been suspended and they were only completed during 2020 or were still under construction when the facilities observations were carried out by the evaluation team.

Timeliness of disbursements

All IPs reported that UNICEF quickly disbursed the first tranche of funds after signing PCAs. Financial reporting by IPs to UNICEF was the basis for further disbursement. However, IPs reported that agreements were not managed in a timely manner. Some IPs expressed concern on the “timeliness” of funds disbursements. The development of water points was seasonal. When funds were disbursed close to the rainy season at the start of implementation, implementation had to be postponed until the dry season, when the true level of the water table was reached. This affected financial reporting and further disbursements and delayed timely completion of implementation.

Some IPs expressed that they had to shoulder the financial burden, and in some cases, costs still remain unresolved. One IP reported that in the agreement they were to co-finance at 20%, but resultantly had to co-finance 60% of project costs, with payments still outstanding.⁷³ The IP expressed that they were required to pre-finance program activities and were often faced with challenges that affect efficiency in the delivery of intended results. UNICEF WASH has expressed that IPs have not been required to pre-finance activities beyond the agreed proportions. A detailed audit of disbursements and reporting beyond the scope of this evaluation would be needed to clarify these issues; however the evaluation only highlights that the smooth implementation of future interventions would benefit from clarifying the financial responsibilities between UNICEF and the IPs in a well-documented manner highlighting cost overrun issues when they arise.

Some of the youth that had been hired to be part of the project in the various communities had reportedly not been paid by the IPs. While this might be opportunistic by the youth, it indicates that the communication of roles and responsibilities for implementation needs attention by UNICEF and the IPs.

District stakeholders also lamented that there were delays in the payment for the purchase of materials and staff salaries and pointed out that the UNICEF's internal bureaucracy sometimes delayed implementation. ASWA-SL did not pay staff salaries at district level, so the misunderstanding is likely to be related to disbursement of the contribution to the cost for districts to carry out their monitoring obligations.

Contribution from beneficiaries

Community contribution comprised unpaid unskilled labour, accommodation, and preparation of food for skilled labour. The communities also provided local materials, which were paid for by UNICEF through the IPs. The IPs also reported that no community organised child labour in the work or food and local materials as this was against UNICEF regulations.

There was no financial community contribution to capital expenditure to replicate similar WASH infrastructure. However, cash contributions were made by the communities to enable WASH Committees to repair and maintain the WASH facilities.

There were challenges with the availability of unskilled labour, especially at the peak of farming. Community leaders reported that they organised youth groups to support the IPs during the work to avoid delays in project completion.

Availability of materials and skilled personnel

In general, human resources were adequate, albeit with partners reporting problems at certain periods, and also reporting continuity problems. All IPs reported availability of quality materials as needed and equipment and skilled personnel in all programme locations as well as at central level for construction of WASH infrastructure. These requirements were said to be embedded in the PCA/ToRs of IPs.

Communities commended the contractors for the boreholes for qualified personnel, equipment, and the modest need for involving community members in their work. The team of engineers that identified the locations for the water points were also commended. The contractors who failed to complete their

⁷³ The ET were unable to review financial reports for each individual partner and payment.

projects, such as the unfinished reservoir projects, were considered inefficient and having lower quality equipment. Communities in Bonthe found that contractors generally used good quality materials (e.g. concrete aggregates, building sand) and these were readily available. However, some communities reported that some of the school toilets failed within a very short period after construction. As presented in 'Appendix 7 Facilities Observations Checklist – Technical Narrative', the Evaluation Team found that the construction quality was generally good, but with some room for improvement.

Community members responded that they did not require training for their tasks but received guidance on what to do while working with some contractors.

The facilities observations revealed that the quality of construction of facilities was generally fair to good, but there were some areas of weakness and particular facilities, which were not satisfactory. These are discussed in detail in Appendix 7 Facilities Observations Checklist – Technical Narrative). Key challenges included:

- Most rainwater harvesting installations inspected were not satisfactory and this included both school and domestic installations.
- Some hand dug well rehabilitations had been carried out on wells where rehabilitation was not feasible, usually because deepening was not possible due to hard rock.
- The hatches provided for well covers were much improved compared to typical wells in Sierra Leone, but further improvements are required to ensure they provide sanitary protection of the well.
- The hinges of security gates for the concrete fences around hand pumps were sometimes poorly anchored in the concrete.
- In piped water systems there were many cases where pipelines had not been installed at sufficient depth and so had become exposed to damage or interference.
- The capacity of the distribution system at 2 solar borehole piped systems appeared to be limited and this may be due to design and/or construction issues.

Key findings related to EQ14:

FINDING 14.1: The resources available for the ASWA-SL implementation were adequate, but challenges were experienced in the budgeting for some interventions such as piped systems and wells in difficult hydrogeological areas like Koinadugu/ Falaba and this led to implementation challenges.

FINDING 14.2: The quality of construction of facilities was generally fair to good, but there were some areas of weakness related to the siting of hand-dug wells and design of piped systems.

9.3.3 EQ15 Efficiency – district and local level collaboration

How effective was partner collaboration with district and local structures?

Engagement with local government

Improved stakeholder collaboration at district and local levels was a strength of ASWA-SL, as described in KIIs and FGDs. IPs and UNICEF staff worked continuously with stakeholders and identified groups on sensitization activities. However, while partnerships with district authorities were more challenging, progress was made in developing coordination structures. District focal points worked at district and

chiefdom levels to support supervision and coordination throughout the programme period. District council officers in the districts were engaged and staff capacities enhanced through training (e.g. preparedness and planning training).

UNICEF supported District Health Management Teams (DHMT) in enhanced harmonization of various functional structures at the district and community levels such as the roles of the district public health superintendent and public health aids to best serve ASWA-SL and related WASH interventions at community-level.

The engagement with the District Councils included improving continuous monitoring of needs and priorities through the roll-out of the Akvo mobile phone-based monitoring platform in all three districts. Previously, there had been a time lag and inconsistent monitoring of needs at sub-district level, and the introduction of the platform supported district structures in coordination and collaboration.

ASWA-SL built the capacity of both national and districts government structures to implement the Akvo Flow mobile phone-based WASH monitoring platform. The mobile phone-based WASH indicator monitoring, and district-led joint monitoring allowed real-time feedback from and to local leadership and concerned communities. However, the monitoring tools seem not to have been utilised by ASWA-SL to collect accurate data and status of the facilities implemented with support from the programme.

The process of district level WASH planning was supported by GoSL, in particular the MLGRD Decentralisation Secretariat and through various development programmes such as the DfID-funded WASH Facility supporting the development of district WASH Plans in 2012-13 and the WB support to financial decentralisation and district development grants.

District support to communities

The support provided by the District Councils and the MWR professional staff stationed at district level to the communities are perceived by the communities to be very limited. Most communities remarked that the visits from the district level were infrequent and hardly ever took place. The responses from the District WASH teams indicate that monthly visits were carried out as required utilising the ASWA-SL support for monitoring; however the evaluation did not find documentation for this, e.g. by entries in the national monitoring systems like the water point data.

Key findings related to EQ15:

FINDING 15.1: Coordination at district level generally worked well, with good collaboration with District Councils, deconcentrated staff from WASH MDAs and other partners active in the districts.

FINDING 15.2: The support provided by the Districts to the communities are perceived by the communities to be very limited; however District have responded that visits were carried out monthly, but this is not documented.

9.3.4 EQ16 Efficiency – coordination with others

To what extent was the program well-coordinated with other engagements in the WASH sector?

The DGIS part of ASWA-SL was implemented concurrently with a larger DFID funded programme supporting other districts on WASH in communities, schools, and health centres as well as the AfDB funded RWSSP in 5 districts including Bonthe and Koinadugu. Some of the national elements of ASWA-SL targeting sustainability of the WASH sector were co-funded, allowing for good coordination. Because of the flexibility of the funding mechanism, DGIS' contribution to ASWA-SL allowed UNICEF to support GoSL in innovative experimentation that benefited other rural WASH programmes, including: digital monitoring; development of community-based rainwater harvesting and gravity water schemes in Koinadugu, and policy guidelines on iron removal in some water facilities and many documents.

ASWA-SL contributed to dialogue and information sharing with other WASH implementers and donors at the national level in some way – This was facilitated through direct contributions to consultative forums through experts; and indirectly by paying for staff that contributed to the forums e.g. a WASH specialist who would input to national policies in progress.

National stakeholders found that the national level mechanism for dialogue and information sharing with implementing partners and donors was primarily through national coordination meetings expected to be carried out quarterly and the annual sector review conference. However these dialogue mechanisms were generally irregular. The coordination meetings were sometimes only held once a year and the annual conference was skipped a number of times, partly due to funding constraints and the unforeseen circumstances such as the Ebola epidemic. The effectiveness of sector coordination has also been affected unclarity about whether MWR or MoHS were to lead, although MWR has been slated to lead a diverse sector with more than three ministries involved. Despite the irregular formal consultations there appear to no overlaps in the target areas for ASWA-SL and other implementing partners or Development Partner programmes.

ASWA-SL supported an M&E platform for virtual progress updates and sharing of information on implementation of WASH in the districts. The tools are working, but there seems to be issues with the regular updates on the project achievements. UNICEF complemented the support from other partners, such as AfDB, for the development of the national WASH M&E framework, including part-funding of an SDG baseline survey and for updating the water point mapping carried out by Statistics Sierra Leone (SSL) in 2016.

District coordination meetings with WASH actors are held regularly (monthly) to discuss implementation and funding mechanisms. These meetings discussed the various roles and intervention areas of ASWA-SL IPs and other development partners. This prevented duplication of effort and followed best practice. However, the coordination faced some challenges, such as inadequate funding, insufficiently communication channels, and poor road and transport infrastructure complicating attendance.

IPs shared information with WASH stakeholders during community meetings, monthly joint monitoring visits and update meetings with WASH MDAs at district level. Additionally, monthly progress reports were submitted both to the District WASH MDAs. The IPs experienced no challenges with district dialogue.

Locations of WASH deprived/ vulnerable communities were shared by national/ central level MDAs with UNICEF during programme design and planning. IPs, District WASH MDAs and beneficiaries verified this information during the assessment of target beneficiaries. UNICEF convened project update/ progress meetings and annual/ midterm with IPs and WASH MDAs.

Key findings related to EQ16:

FINDING 16.1: Coordination at the national level was working with some coordination between WASH MDAs and implementing partners. However the coordination mechanisms such as the Sector Coordination Meetings and the Steering Committee Meetings were not regular.

FINDING 16.2: Despite the irregular formal consultations there appear to be no overlaps in the target areas for ASWA-SL and other implementing partners or Development Partner programmes.

9.3.5 EQ17 Efficiency – UNICEF contributing internal factors.

What where the main internal factors to UNICEF and its implementing partners that contributed to successful attainment of the expected results?⁷⁴

UNICEF support

The responses from the KIIs with IPs indicate that UNICEF staff (technical, financial, M&E, and cross-cutting section staff and management staff i.e. Deputy Representative) provided some support to IPs in order to facilitate implementation. UNICEF structures were supportive of IPs, which were supported with trainings, programme reviews, and coordination meetings, which allowed IPs to discuss progress and challenges. UNICEF also provided technical supportive supervision.

IPs largely reported smooth processes and support to initiate projects. UNICEF staff were found supportive in finding the most efficient methods of initiating projects and supported partners with major logistic needs (e.g. for the water point mapping). Support from the UNICEF Regional Office (i.e. through ASWA-WCA) in identifying partners and supporting the designing of projects; and one interviewee suggested that where regional intervention was made, the project approval was facilitated in an efficient manner.

Training was provided to IPs on a) financial management procedures (HACT), b) project implementation strategies, guidelines and tools, and c) monitoring and reporting procedures. Organizational capacity support was also provided, including staff, vehicles, equipment. The IPs reported no challenges with adhering to UNICEF rules and procedures.

Advance financial support was provided to IPs to procure construction material including cost of transportation of materials, basic construction tools, computers and accessories, and skilled labour. Motorbikes were provided for staff movement, although due to an increased number of IPs this was later changed to bicycles and fuel.

⁷⁴ Sources of evidence: KIIs (UNICEF Chiefs from other sections)

Most IPs found that the support provided was adequate whilst others suggested that UNICEF should waive the 12% partner contribution; and would have preferred if ASWA-SL had provided a vehicle instead of motorbikes as the terrain in beneficiary communities was difficult to traverse.

The selection of the programme model was based on previous experiences/ lessons in similar contexts, and this facilitated programme success. ASWA-SL continued supporting development of the participatory methodologies under its CLTS approach.

UNICEF also supported the IPs in adjustments to the plans when needed. For example, midway through implementation, for Result Area 1 (access to safe water) plans were modified to include drilling deeper, motorized boreholes with large-reticulated gravity schemes to serve schools, health care facilities and communities which are in close proximity to each other from one source, as opposed to construction of individual hand dug wells only.

The capacity of partners was continuously supported as UNICEF employed an engineer who worked hand in hand with IPs, providing technical advice, and supported infrastructure design and monitoring.

There were some problems with the support or input provided by UNICEF to IPs in the survey and design of the gravity water systems as evidenced by the failure of water from the sources to reach the storage tanks in 3 of the 8 systems.

M&E and decision-making

There is some indication that UNICEF M&E systems contributed to informed decision-making and program management. UNICEF's systems for planning and monitoring contributed through programme review committee inputs and oversight, reporting modalities (i.e. partner reporting, Programme Strategy Notes), and mid-year and end-of-year reviews where lessons learned were identified with IPs. The UNICEF Chief of Planning and Monitoring, and senior management (i.e. Deputy Representative) carried out oversight.

It appears that the Progress Database was the only tracking mechanism (with end reporting in 2019) with community-level data disaggregated by men, women, boys, and girls. The Programme Implementation tracking tables additionally tracked boys and girls, but only in relation to the use of WASH facilities in schools.

To understand community capacity levels, UNICEF developed a digital real-time monitoring system with photos and progression step-by-step monitoring. Community apathy was identified early on in ASWA-SL and targeted with continuous, multi-factor support. There was also an early understanding of low community capacities to carry out and maintain WASH inputs. ASWA-SL monitored the outputs of various trained groups continuously to ensure the knowledge and skills acquired were translated into action in timely manner.

The IPs stated that the programme indicators were monitored through joint monitoring visits by District MDAs and UNICEF M&E staff. Reports from SMCs, DHMT/ and Health Units and informal conversations with beneficiaries were also used for monitoring indicators. It was reported that decisions were made after debriefing from the joint monitoring visits on issues of concern.

UNICEF supported capacity building of both national and districts government structures to implement the Akvo flow mobile phone-based WASH monitoring platform. Roll-out of the Akvo based monitoring platform was done in all 13 districts (including the two newly created districts of Falaba and Karem)

receiving UNICEF WASH support. The system enhanced real-time reporting of data from all WASH activities in the 13 districts. In addition, digital water quality monitoring and reporting using Akvo caddisfly was also undertaken nationally and updated in the national water quality map. Mobile phone-based WASH indicator-monitoring and district-led joint monitoring provided real-time feedback from and to local leadership and concerned communities.

National stakeholders mentioned that while the M&E platform was established, the MWR did not have funding for data collection, even if only on quarterly basis. The district WASH teams, especially the district mappers were not provided with the requisite logistics to collect M&E data. This does not reflect that the national and district stakeholders expect UNICEF funding for all the M&E activities, but only that generally there is a serious problem with resources in WASH Ministries and Districts to cover the recurrent costs. In effect, the M&E platform and data collection was not regularly used for decision-making. Nonetheless, the district team were provided support for monitoring and reporting to UNICEF in addition to UNICEF's and the IPs' own monitoring.

Key findings related to EQ17:

FINDING 17.1: IPs were broadly satisfied with the support provided by the UNICEF staff to facilitate implementation.

FINDING 17.2: The sector M&E tools, such as water point mapping data were not utilized to document the completed facilities and their functionality, although the development of these tools was supported by ASWA-SL. This results in lack of data on the actual achievements.

9.3.6 EQ18 Efficiency – UNICEF hindering internal factors.

What where the main internal factors to UNICEF and its implementing partners that hindered successful attainment of the expected results and how did UNICEF and its partners address these barriers?

Challenges related to UNICEF procurement and pre-financing requirements.

IPs largely reported that the UNICEF processes produced mixed results for closing projects. Procurement processes were identified as bottlenecks for project closure. When supplies were procured through UNICEF processes, delays were sometimes experienced. These are the views of the IPs and the application of proper and well documented procurement procedures by UNICEF can obviously lead to delays in procurement, so these concerns are seen by the evaluation team as an indication that some more communication on the reasons for the delays need to be shared with the IPs by UNICEF.

As described under EQ14, IPs experienced implementation and financial challenges due to late disbursement of funds from UNICEF. It must be recognised that late disbursement can be caused by inadequate or late reporting by the IPs. The necessity of IPs pre-financing program activities was seen by the IPs as well as the District WASH stakeholders as a challenge that affected the timeliness of the delivery of intended results. The administration of the ASWA-SL implementation obviously needs proper documentation and financial reporting, so while detailed investigation or audit of the administrative aspects is beyond the scope of the evaluation, again these concerns expressed by the partners point towards the need for increased transparency and communication between the UNICEF WASH team and the IPs on procurement and financial reporting issues.

District stakeholders found procurement and contract management procedures insufficiently transparent. For example, after defining the quantity and quality of materials required to carry out certain work, the next stages of procurement were not made known to them. UNICEF has clarified that the UNICEF procurement policies and guidelines have been followed, so the opinions expressed by the District stakeholders points towards the need for better communication to the District stakeholders of the UNICEF procedures before and during implementation.

Changes of UNICEF staff in senior positions and lack of clarity on whom the UNICEF focal points were, were other bottlenecks mentioned for project closure. Transitions between new staff taking up posts were unclear – specifically for the WASH Chief – and IPs widely suggested priorities changed with staff and did not ensure continuity of programme decisions.

District stakeholders lamented that there were delays in the payment for the purchase of materials and staff salaries – since ASWA-SL did not cover staff salaries in Districts, this is likely to relate to experiences with delays in providing the funding to Districts for monitoring activities. That this is an issue further highlights the challenges for the Districts to support the WASH activities in the communities through their own budgets without development partner support. They pointed out that the UNICEF's internal bureaucracy in terms of disbursement of funds sometimes delayed implementation.

The IPs reported no challenges with adhering to UNICEF rules and procedures as the IPs agreed to abide by these in the PCA/ToRs.

Support from UNICEF

IPs mentioned financial support to procure construction material including cost of transportation of materials, basic construction tools, computers, and accessories, paid for skilled labour, and provided specialized training of staff to enhance all aspects of implementation and logistical support in the form of motorbikes for staff movement. It was noted that due to increasing number of IPs UNICEF now provides only bikes and fuel. It was also stated that UNICEF provided technical supportive supervision as well as coordination meetings.

Most IPs reported that support was adequate whilst others suggested that UNICEF should waive the 12% partner contribution and consider vehicle support not motorbikes as the terrains in beneficiary communities are difficult to traverse. While this reflects real difficulties for the IPs in carrying out the implementation work in hard to reach communities it naturally needs to be assessed by UNICEF if this would add to the cost efficiency of the project implementation. Again, it points towards improved communication with the IPs to discuss the implementation challenges and how best to improve cost and time for completing the activities.

Additionally, some IPs reported implementation challenges such as disbursement of funds towards the rainy season. It was mentioned that access to communities became difficult, seasonality of water points delayed timely completion and that communities did not provide timely support in the form of unskilled labour. These challenges expressed by IPs might also be related to delays or accuracy in the reporting by the IPs to UNICEF; however it points towards the need for more transparency and communication in the joint planning processes between UNICEF WASH and the IPs.

Key findings related to EQ18:

FINDING 18.1: IPs were largely satisfied with the internal UNICEF processes and support to implementation, although slow disbursement at times hampered timely implementation and construction of facilities. It must be recognised that the delays might have been affected by the timely delivery of report from the IPs.

FINDING 18.2: Opinions from IPs and District WASH stakeholders on issues related to procurement, pre-financing, and timing of funding points to need for more transparency and communication on the UNICEF procedures.

9.4 Sustainability

Criterion	EQ
Sustainability	19. To what extent are communities able and willing to contribute to ensuring the sustainability of the WASH infrastructure provided and continue with hygiene and health practices introduced by the project? 20. To what extent is the government at national and local levels able and willing to ensure the sustainability of the WASH infrastructure provided and continue with the promotion of hygiene and health practices introduced by the project?

9.4.1 EQ19 Sustainability – continuation – community level

To what extent are communities able and willing to contribute to ensuring the sustainability of the WASH infrastructure provided and continue with hygiene and health practices introduced by the project?⁷⁵

Capacity to carry out O&M.

At the community level, clear roles and responsibilities for existing community structures were utilised, and capacities of different responsible community groups were built, contributing to sustainability of behaviour change. However, insufficient capacities remain a challenge. Different community groups were trained based on the assumption that communities would be able to manage WASH facilities and hygiene practices. By addressing barriers and integrating solutions within existing community systems (e.g. community groups) and power structures, longer term operation and maintenance of facilities was integrated. Local private sector entrepreneurs were trained on san-plat development (platforms for sanitation facilities), to build toilets for households, and to repair handpumps.

The sustainability of the sanitation and hygiene activities were enhanced by relying on local capacities in the implementation. This included Chiefs being engaged to provide leadership for CLTS; ‘natural leaders’⁷⁶ appointed at chiefdom level and equipped with bicycles to provide leadership to community members around a common goal of achieving ODF status. The natural leaders remain instrumental in ensuring communities attained ODF status, while the CLTS facilitators provided quality triggering guidance to all communities. Community resource persons were also identified and continuously supported capacity strengthening activities at the community level; the number of community resource persons surpassed the targets for 2018.

However, despite the considerable effort, the responses indicate that the communities remain not fully equipped to sustain ASWA-SL interventions. While ASWA-SL built community capacities for basic O&M, communities remain challenged vis-à-vis contributing to minor repairs, due to lack of knowledge of actual O&M cost implications, resulting in deficient tariff regimes, which in turn undermines the ability to generate requisite funds for some repair demands. Inadequate skills, and limited access to tools and

⁷⁵ **Sources of evidence:** Community based data collection methods, 2017 Sustainability Check, 2019 Sierra Leone Annual Review, KIIs (programme implementation at district level)

⁷⁶ The ‘natural leaders’ refer to the influencers and opinion makers used in the CLTS process to promote sanitation and hygiene. These can be formal leaders like chiefs and elders and also other prominent or respected persons in the community such as teachers.

spare-parts are other barriers. Tools were not provided to trained mechanics and some handpumps were left unattended after breakdown. ASWA-SL reporting indicated that apathy was another key challenge.

There are indications that local NGO partners will continue supporting sustainability in communities and schools, although on a lesser scale. Local partners found that continuous engagement was necessary to ensure sustainability of local committees, such as SHCs and WASH Committees. Committees needed regular visits from local partners to ensure their awareness of ownerships, and refresher trainings had been required. Nonetheless, community leaders in Bonthe affirmed that they would continue monitoring the water points and toilets facilities through the WASH committee. Moreover, the community groups consulted confirmed that they found it important to continue with improved hygiene practices.

Despite these limitations, the ASWA-SL furthered some promising innovations which contribute to sustainability. Some of these initiatives worked towards achieving dual aims of sustainability and contributing to gender equity. For instance, the Village Savings and Loan Association (VSLA) concept was implemented in 177 villages, with a membership of 62% women. While communities reported that the VSLAs had not been able to accumulate any tariffs to contribute to WASH O&M, they did assist in raising the financial capacity of their members, in particular women.

Schools were able to leverage skills from trainings to ensure School Health Clubs remain fully functional, although some IPs suggest that regular sensitization through refresher trainings would be needed to ensure sustainable functioning.

Willingness to pay.

A consistent concern flagged in communities and in schools was that inadequate support had been given to identify recurrent funding to support interventions. Generally, communities confirmed the willingness of households to pay for maintaining water services. Households that failed to pay would not be allowed to use the facilities was used as the main method to encourage contributions by all. The end-line study showed that 70% (60% in Bonthe, 86% in Koinadugu) of the households were willing to contribute financially for access to improved water sources.

On the upkeep, upgrading and replacement of toilets, there were mixed responses. Households were said to be willing to pay, but some did not have the financial capability to replace or build toilets.

Teachers, students, and children are willing and able to continue with school WASH activities, but there are clear limitations vis-à-vis financial capacity to maintain facilities. The sustainability of WASH in schools is a challenge, partly due to the costs of source improvements in remote areas (where groundwater access is technically challenging), as well as the high cost of WASH facilities according to new WASH in Schools (WinS) standards.

Although ASWA-SL contributed to the National WASH in Schools Guidelines (2017), there are scant financial resources to sustain WinS interventions. Teachers suggested that financial support would be needed for maintenance, since the financial resources from District Councils are insufficient. Even replacing soap at school latrines was seen as a challenge. Many school stakeholders believe that funding allocations being made to District Councils, and not to schools, is a hindrance. Some quotes from teachers/ headteacher KIIs:

“Sanitation facilities fully functional, hygienic but not well maintained. No support has been received for maintenance”; “Facility has been broken, it has not been fixed because of no availability of fund” and “I personally paid people to clean up the solar water system for good functioning.”

While SMCs work well, their activities are limited due to these concerns.

Continuation of hygiene and water supply improvements

There was a good degree of success in achieving sustainability one year after implementation. In 2019, the proportion of communities triggered during CLTS activities and externally verified as ODF within one year was 93%. The proportion of externally verified water safe communities that maintained water safe status for at least one year was 84% in 2019. The proportion of schools in which students routinely practiced handwashing with water and soap after visiting the toilet at least one year after implementation was 82% in 2019. In many schools visited, sanitation facilities were fully functional, but not well maintained. However, despite these successes, longer-term sustainability at the community level continues to be a challenge, with particular respect to sustainability of behavioural change and operation and maintenance and challenges described above.

Key findings related to EQ19:

FINDING 19.1: Communities are generally willing to pay for WASH services and pay either on a monthly basis or when there is a need for repairs. Hand pumps are maintained in some communities.

FINDING 19.2: There was some success in achieving sustainability one year after program closure, but in some communities sustainability continues to be a challenge, in particular with respect to the sustainability of behavioural change and maintaining ODF status, and ability to pay for replication of toilets.

FINDING 19.3: In many schools, sanitation facilities are fully functional, but not well maintained. Some School Health Clubs are functional, and IPs expressed that continued support is needed to ensure sustainability.

9.4.2 EQ20 Sustainability – continuation – district and national level

To what extent is the government at national and local levels able and willing to ensure the sustainability of the WASH infrastructure provided and continue with the promotion of hygiene and health practices introduced by the project?

Sustainability strategy

To track ASWA-SL, a robust and coherent system was put in place to oversee operation and maintenance of WASH facilities. Sustainability was at the heart of ASWA-WCA, where the sustainability of WASH facilities and behaviour change was promoted. A key mechanism was the Sustainability Check. A sustainability framework guided ASWA-WCA, see Figure 9-12. The sustainability interventions were highly structured and well-planned.

Figure 9-12: Initiatives that input to sustainability at a strategic level in ASWA-WCA.

The Sustainability Compact was an effort by GoSL to improve the functionality and use of WASH services. UNICEF supported the GoSL in scaling up decentralized, participatory monitoring bringing together local government leaders, technical teams, women, and children in appraising implementation processes as well as verifying the completed work before handover to GoSL.

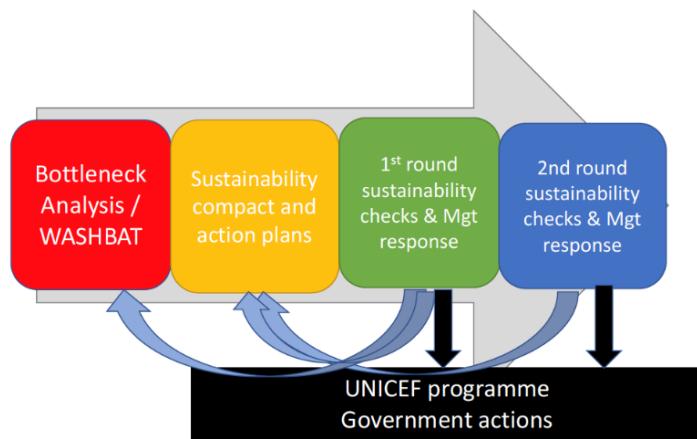
District Councils and IPs were provided with logistic support, transport and vehicles/ motorbikes required to carry out

monitoring. The Sustainability Compact was signed by UNICEF, and that two out of a target of five sustainability compact action plans were developed, annual sustainability checks completed, and management responses developed and signed in 2018. Sustainability checks were intended to be conducted annually or every second year, but in practice the checks were not carried out frequently; there is only evidence of a sustainability check in 2018.

In its initial stages, ASWA-SL identified the key barriers for sustainability, determining that schemes in Sierra Leone were often inoperative due to insufficient funding, inappropriate technology, lack of community involvement, inadequately trained personnel, and insufficient tools and equipment. Many of these barriers were addressed in various programme modalities.

The sustainability framework was well-designed, but there was a “start and stop” approach, with some inputs and initiatives between partners being disjointed. This limited a coherent and well-recognized WASH sustainability framework. For instance, the monitoring of access to WASH (such as water point mapping) was not necessarily joined with other sustainability efforts, such as sustainability checks, studies carried out by third parties to monitor the implementation of the Sustainability Compact. Attempts were made to ensure the framework was operationalized and make the framework more actionable and enhance accountability. Two more components were added: a) Action Plans, technical working documents aimed at operationalizing the Sustainability Compact and b) a joint Management Response to the sustainability check from GoSL and UNICEF.

A key part of ensuring sustainability of WASH improvements is the monitoring of status in the communities. UNICEF and ASWA-SL contributed to improving the sector M&E however the interventions were not fully embedded in the national and district partners to ensure continued use. Some support provided through ASWA-SL could have had wider impact if accompanied with follow-up to ensure upscaling. UNICEF hired third parties, rather than relying on District WASH teams, to carry out monitoring, but only in districts covered by UNICEF and therefore not contributing effectively to the national WASH M&E. Without a sector-wide system in place, the district-wide efforts will have limited impact on overall levels of access to data, and the use of the M&E data to identify where new projects should engage.



ASWA II will continue supporting the of national sustainability frameworks, indicating a continued degree of functionality in coming years. It is less clear whether GoSL would be fully committed to these frameworks in the absence of continued donor funding.

National and district budgets for continuation of support

The support to communities from the Districts appears limited at best. ASWA-SL allocated resources to support a gradual GoSL takeover, however, the extent to which this has taken place is unclear.

A project exit strategy was defined in the 2017 WASH Sustainability Check⁷⁷, which identified potential threats to the sustainability of ASWA, including:

- Concerns about the pace of operationalization of the sector policies and revised legal framework, as a basis for a transition from external assistance to local ownership.
- An unexplained absence of budgetary provisions for ASWA-SL in GoSL plans (national and local), undermining prospects for a smooth transition to GoSL ownership and diminishing post-implementation support.
- Unclarity about the extent to which District level partners would sustain interventions introduced by the programme.⁷⁸

Key findings related to EQ20:

FINDING 20.1: The approaches around the sustainability framework were commendable and appropriate, such as the continued focus on the sustainability framework and WASH Sustainability Checks, but there is only limited support from district authorities to the communities to continue WASH activities.

FINDING 20.2: District budgets for continued investment and recurrent support to WASH activities are inadequate, and all communities reported that visits from District officials were infrequent at best.

⁷⁷ ASWA-SL - Annual WASH Sector – Sustainability Check – 2017 Final Report, Sept. 2018

⁷⁸ 2019 Annual Review Report (Sierra Leone)

9.5 Gender⁷⁹, Equity⁸⁰ and Human Rights

Criterion	EQ
Gender, equity, and human rights	<p>21. To what extent did the program design address gender equity and human rights issues including the particular situation of vulnerable households (elderly persons, persons living with disabilities, very poor household)?</p> <p>22. To what extent were vulnerable/marginalized women, children, people living with disabilities, elderly people, child, and female-headed households as well as vulnerable/marginalized communities reached by the program and their specific barriers of access to the provided services addressed?</p> <p>23. How have identified equity gaps during design changed over the program lifespan? What is the contribution of the program to these changes?</p> <p>24. How strong was the integration of education and child protection with WASH programming and what were the successful integration strategies used?</p> <p>25. How and to what extent did UNICEF and partners' interventions contribute to addressing gender equity and the prevention of sexual exploitation and abuse?</p>

⁷⁹ The UN definition of “gender”: Gender: refers to the social attributes and opportunities associated with being male and female and the relationships between women and men and girls and boys, as well as the relations between women and those between men. These attributes, opportunities and relationships are socially constructed and are learned through socialization processes. They are context/ time-specific and changeable. Gender determines what is expected, allowed and valued in a women or a man in a given context. In most societies there are differences and inequalities between women and men in responsibilities assigned, activities undertaken, access to and control over resources, as well as decision-making opportunities. Gender is part of the broader socio-cultural context. Other important criteria for socio-cultural analysis include class, race, poverty level, ethnic group and age .See UN Women, OSAGI Gender Mainstreaming - Concepts and definitions (un.org)

⁸⁰ Equity refers to minimising differences in access to WASH services geographically and socially including “gender equity” defined as: The process of being fair to men and women, boys and girls, and importantly the equality of outcomes and results. Gender equity may involve the use of temporary special measures to compensate for historical or systemic bias or discrimination. It refers to differential treatment that is fair and positively addresses a bias or disadvantage that is due to gender roles or norms or differences between the sexes. Equity ensures that women and men and girls and boys have an equal chance, not only at the starting point, but also when reaching the finishing line. It is about the fair and just treatment of both sexes that takes into account the different needs of the men and women, cultural barriers and (past) discrimination of the specific group. See UNICEF Glossary of Terms and Concepts, November 2017. Gender equality: GLOSSARY OF TERMS AND CONCEPTS (unicef.org)

9.5.1 EQ21 GEHR – design addressing GEHR.

To what extent did the program design address gender, equity and human rights issues including the particular situation of vulnerable households (elderly persons, persons living with disabilities, very poor households)?

Approaches

ASWA-SL aimed to ensure there was equal representation of men and women in WASH decision-making and management, by using the universally accepted minimums of 30% equal participation⁸¹. For instance, the project implementation guidelines stressed the need for participation of women in all project management committees with a minimum requirement of 30% women participating. WASH committee members were monitored for equal participation.

All IPs clearly followed the minimum standards, by ensuring at least one female member is either a chair or deputy chairperson of WASH Committees. Efforts were made to ensure women were heard during inception and design meetings, with IPs encouraging more women to join to reduce male dominance. Women were also consulted in the site selection for WASH facilities. Trainings were organized and community consultations were carried out to sensitize community-members on the gender parity requirements of ASWA-SL. IPs reported equal representation of men and women in community WASH Committees, 30% women and 70% men in SMCs, and 80% women and 20% men in VSLAs.

It was confirmed by consultations in the communities and districts that efforts were made to include vulnerable groups, including people living with disabilities. District stakeholders expressed that adequate participation of vulnerable groups was pursued through continuous community engagement and encouraging women and people living with disabilities to take leadership positions in the management of WASH facilities. IPs were satisfied with the level of women's involvement in decision-making. IPs stated that representatives of women-headed households, people with physical disabilities, ultra-poor, youths, and children were able to participate during needs assessment, prioritization of committee membership, monitoring of project implementation, awareness raising campaigns, and training. IPs were satisfied with the level of involvement of these vulnerable groups.

All WASH Committees in the consulted communities were made up of both male and female members. Women held different positions in the various WASH Committees, one WASH Committee had a female chairperson, while another Committee had a woman as treasurer. Community leaders in Bonthe expressed that the selection of WASH Committees was done through community participation and willingness to work. However, 10% of the youth groups said that the selection was entirely based on the political influence in the community without their consent. A 35% representation of women and old people was common, while no young persons were involved. WASH Committee chairpersons and secretaries were typically men, whereas women were typically treasurers, deputy chairpersons, or chief whips.

⁸¹ The ECOSOC resolution of January 1990, reinforced by the 1995 Beijing Platform for Action, stated minimum standards of 30% participation of women.

Toilet designs

Separate toilets for girls and boys and menstrual hygiene facilities were constructed at schools. The toilet designs used by ASWA-SL were the MEST (now MBSSE) standards⁸². Drawings for school latrines were used, with the following features to facilitate menstrual hygiene and disability access: a) separate cubicles for menstrual hygiene with internal latches for each drop hole, and b) Access ramps, wide doors, internal latch, extra-large cubicles, and grab rails near drop hole.

Key findings related to EQ21:

FINDING 21.1: There is evidence that ASWA-SL has engaged approaches used to ensure equal representation of men and women in WASH decision-making and management, using very basic and universally accepted minimums of equal participation.

FINDING 21.2: ASWA-SL was successful in ensuring equal participation and representation of women and men in WASH decision-making and management. However, ASWA-SL was not equally successful in ensuring representation of vulnerable groups, such as persons living with disabilities.

FINDING 21.3: The designs of school toilets were according to national standards with separate toilets for boys and girls and appropriate facilities for disabled access and menstrual hygiene.

9.5.2 EQ22 GEHR – reaching vulnerable groups.

To what extent were vulnerable/ marginalized women, children, people living with disabilities, elderly people, child, and female-headed households as well as vulnerable/ marginalized communities reached by the program and their specific barriers of access to the provided services addressed?⁸³

A full picture of the extent to which vulnerable groups mentioned were reached was inhibited by a lack of data disaggregation in monitoring of ASWA-SL. It is recognised that there was a gradual progression with approaches to employing methods of tracking household level data throughout ASWA-SL. Gradually, household level data was gathered through a survey collecting household level data on water quality. However, the programme indicators as per the tracking matrix had few disaggregated indicators available that target children, under any of the results indicators including WASH in Schools. Capacity strengthening targets teachers, head teachers, education supervisors does not include training of school WASH club members. The tracking table did track “new students” using sanitation and water points, which can be assumed to be mainly children.

ASWA-SL reported that 109% of the target for new students using latrines by the programme and 105% of the target for new students using water points were reached. It can therefore be assumed that the water points are child-friendly and being used.

Data collected at the community level suggests that IP’s strategies were inclusive, and interventions were guided by a “leave no one behind” ethos. The community mobilization strategies ensured that all groups

⁸² “Sierra Leone WASH in Schools – Standards and Guidelines” Draft 7

⁸³ The findings are from community level data collection (KII, FGDs and survey)

within the community were targeted and reached. Focus-group discussions with the various vulnerable groups, including women who were marginalised, also helped to ensure that they could express their needs and explain the barriers they faced. VSLA and sanitation marketing activities targeted the ultra-poor households.

Access to separate toilets and menstrual hygiene facilities

Separate facilities for girls and boys were available at six out of seven school latrines visited in Bonthe, and in all four visited in Falaba and Koinadugu. All the latrines inspected had separate cubicles for each drop hole. All latrines were pit or Ventilated Improved Pit (VIP) latrines and some respondents reported that absorbent materials were disposed of in the pit. In Bonthe, one of the seven girls' latrines had a separate changing room and six had internal door latches. All girls' latrines in Falaba and Koinadugu had internal door latches.⁸⁴

Accessibility for people with disabilities

However, inclusion of people living with disabilities was a challenge despite the fact that their needs were assessed, and they were encouraged to be part of project management committees. They still faced multiple barriers of mobility.

The Bonthe District Disable Association (BDSA) for example, included special measures, such as focal points, to engage with vulnerable women to enhance participation. Participatory approaches specifically targeted women living with disabilities, and the group ensured two members of vulnerable groups were able to hold executive positions in the SMC/ school WASH management. Another local partner described how they made special effort for people living with disabilities to participate in activities, despite the challenges they face with mobility.

However, stakeholders had mixed views on the inclusion of people living with disabilities. Some expressed that: “*vulnerable groups such as physically challenged or disabled, ultra-poor and women were not involved or participated at any level. The Bonthe Disabled Union (BDU) could have been a better platform to involve disabled for their participation. One major approach used to ensure adequate participation of vulnerable group is to improve on social inclusion*”.

Among the school latrines visited, adequate provisions for pupils with disability were made in 12 out of 13 latrine blocks in Bonthe and all eight latrine blocks visited Falaba and Koinadugu.⁸⁵

Preferential access for vulnerable groups

Equity was also promoted in the access and use of WASH facilities, with bylaws giving priority to disadvantaged groups in the use of WASH facilities. For example, school children, people living with disabilities and the elderly were allowed to fetch water before boys and men. Some communities did not require that people living with disabilities paid a monthly contribution for water and helped them with fetching water if their disability prevented them from fetching water from the facilities.

⁸⁴ Source: WinS Observation checklists D2. Further details are included in Appendix 7: Facilities Observations Checklist – Technical Narrative.

⁸⁵ Source: Ibid.

Safety of facility locations

All school latrines and water points visited were located close enough to school buildings so that they would be safe to use during school hours, but at many schools there are no resident staff so these facilities would be less safe outside of school hours.

All point water sources and standpipes inspected were located within, or very close to, settled areas and safe to use during daylight hours, but perhaps less safe at night. An example is a young boy in Makosie, Bonthe who was bitten by a snake, when he went to the toilet without a torch. In localities where water supplies are seasonal, not functioning, incomplete or inadequate for the population women, girls and boys will still have to venture further afield for water.

Nonetheless, community leaders and women groups expressed that water points locations are safe for boys, girls and women during both day and night. Toilets were also said to have been constructed not too far away from households and were considered to be in safe locations for women, girls and boys during day and night.

Ease of reach for poor households

All water supply water collection points inspected were within the MWR standard for maximum distance from users of 500 m.⁸⁶ Community respondents confirmed that water point locations were easy to reach for households, including the poorest and even people with disabilities. Toilets were also confirmed to be in locations within easy to reach for all categories of people.

Some inspected facilities did not provide adequate quantity of water as demonstrated by the long queues met at the sites. The MWR standard for adequate water supply⁸⁷ is maximum 250 persons per water point. The proportions of inspected facilities providing an adequate supply was five in ten in Bonthe, one in seven in Falaba, and none of the three in Koinadugu.⁸⁸

Addressing the needs of women and vulnerable groups

The views of survey respondents on whether or not the ASWA-SL addressed their needs, were mixed, with the higher percentage was those being satisfied. With the exception of communities in which the project was not fully implemented, survey respondents found ASWA-SL successful in addressing their needs, especially in providing access to water. However, the number of facilities were considered to be inadequate. In Bonthe, community leaders expressed satisfaction of the implementation of the project. District stakeholders confirmed that the program was successful in achieving the planned results.

Some responses from communities identified the following in relation to addressing the needs of the various groups:

Women: Women are traditionally responsible for fetching water which was reiterated by responses in FGDs. The installed water points were found to reduce the time and energy spent on fetching water. The access to family latrines and potable water supply within safe proximity reduced incidences of gender-based violence (GBV). While the training on GBV for the communities likely contributed to this, the critical factor was the location of the latrines and water access. Women also benefitted from access to finance

⁸⁶ Positions of water points were observed on aerial imagery.

⁸⁷ Definition: water supplied is adequate to meet the needs of those served at all times of the year.

⁸⁸ Source: WinS Observation checklists A1-A5

from VSLAs. Ninety women were trained to become water point caretakers. They were also paid for their unskilled labour, such as cooking for technicians working on the installation of WASH facilities. The women's access to this livelihood was commented by the community level respondents to increase women's wellbeing.

Men: Some men were trained and secured jobs as hand pump or solar pump mechanics or masons for latrine construction. Gender roles and stereotypes were reinforced where it was reported that women were not interested in masonry training "because it was heavy work". There was no attempt by any IPs to actively recruit and train women into these positions. Men were paid for unskilled labour for installation of WASH facilities. In some communities, men were also paid for the provision of local materials.

Girls: Initially, the exploitation of girls was a major problem in communities but the sensitization and training of girls and their mothers on sexual exploitation reportedly minimized this significantly. WASH Committees specified periods for getting water and those allowed to fetch water are guided by certain bylaws to protect girls from harassment and sexual exploitation. Like women, girls benefitted from reduced distance and travel time for fetching water, and access to clean water and latrines in safe locations. Girls were also provided with access to separate toilets, menstrual hygiene facilities and free menstrual pads at schools, which was seen by respondents to reduce their absence rates as well as stigma during menstruation, although the evaluation did not have access to data on school attendance and absenteeism to verify this. AWSA-SL also improved the confidence of pupils through their participation in training and in clubs.

Boys: Like girls, boys benefitted from reduced distance and travel time for fetching water, and access to clean water and latrines in safe locations.

People living with disabilities: WASH facilities and toilet facilities at schools were built with ramps for ease of use by people living with disabilities. The reduced distance to water points also facilitated their access to water, although it was reported that most people with disabilities rarely fetch water from water points themselves. The standard of the most affordable household latrines continues to pose an access challenge for persons with disabilities, since these typically are without a firm floor, which would allow for wheelchair access.

Elderly: The elderly also benefitted from the proximity and ease of access to water points and household toilets. However, it was reported that most elderly rarely fetch water from water points themselves.

Ultra-poor households: Ultra-poor households were prioritized for VSLA membership and financial support. IPs states in their comment to ultra-poor households' involvement and accessing WASH facilities in their 'no-one-left-behind' approach has in addition emphasised, that they also ensure special attention is given in the facilitation of VSLA to enable them to be active participant in these schemes.

Key findings related to EQ22:

FINDING 22.1 : Data collected at the community level suggests that IP's strategies were inclusive, and interventions were guided by a "leave no one behind" ethos, however a lack of tracking of disaggregated data inhibits this finding.

FINDING 22.2: A full picture of the extent to which vulnerable groups were reached was not possible to establish due to limited disaggregated data in reporting on achievements in relation to different groups.

FINDING 22.3: The school latrines and water points are located sufficiently close to school buildings to be safe to use during school hours. All community water points are located within or very close to settled areas and safe to use, especially during daylight.

9.5.3 EQ23 GEHR – equity gaps

How have identified equity gaps during design changed over the program lifespan? What is the contribution of the program to these changes?

Changes in equity gaps

As shown in Figure 9-13, access to water and sanitation services as well as handwashing facilities in the ASWA-SL target districts is approaching national averages, with coverage improvements from 2010 to 2017 being significantly larger in the two districts than the national averages for rural areas, indicating a contribution from ASWA-SL to narrowing equity gaps. However, the national equity gap between urban and rural areas remains and has even grown on some parameters.

While the focus of ASWA-SL was in rural areas, WASH was also addressed in communities with more than 2,000 persons, which can be considered as both rural and urban, depending on the sectoral definition applied⁸⁹. Table 9-7 shows the ASWA water in communities project areas, based on the communities listed in the data available from UNICEF on the ASWA-SL target communities in relation to the categories of settlements used in the water sector. So while the focus of the ASWA-SL is in rural areas, 60% of the population appears to be in settlements falling in urban areas according to the SSL definition of rural areas. The ASWA-SL achievements on improved WASH services would therefore not reflect on closing the rural/urban equity gap.

Table 9-7: ASWA Projects and MWR Settlement Categories

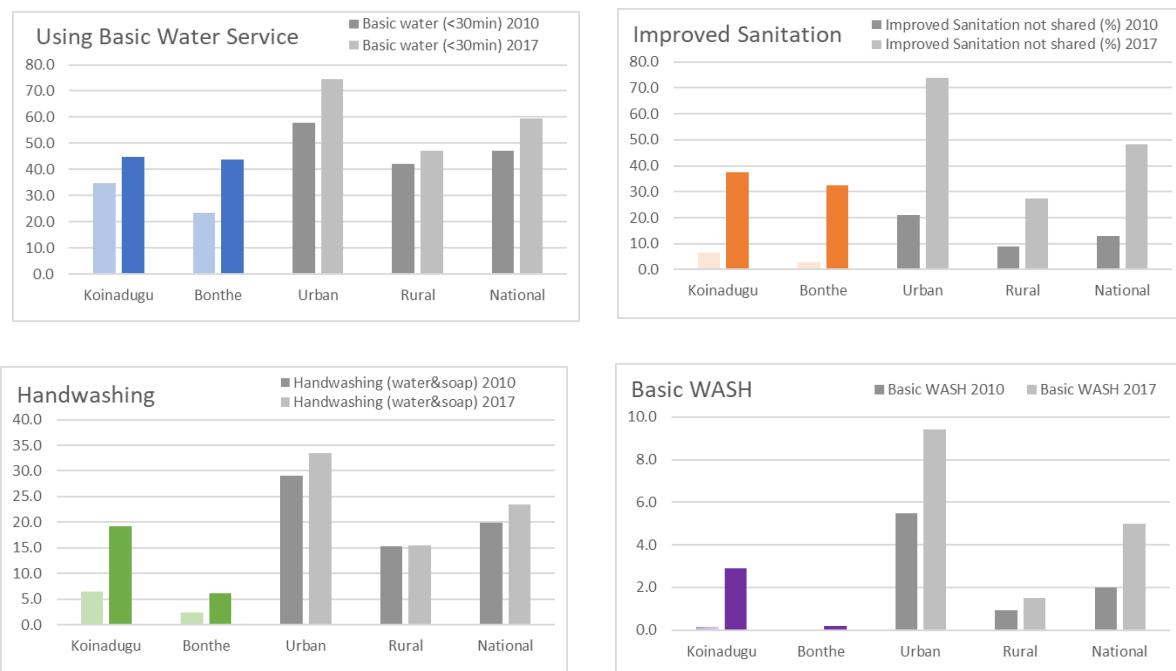
Analysis of WINC Projects in Relation to MWR Settlement Categories										
Population	<150*		150 - 2,000		2,001 - 5,000		5,001 - 20,000		Total projects (excl. urban)	
	No.	Popn.	No.	Popn.	No.	Popn.	No.	Popn.		
Bonthe	8	645	17	6,597	1	4,478	0	0	26	11,720
Falaba	4	292	11	6,080	0	0	1	7,047	16	13,419
Koinadugu	0	0	16	8,179	0	0	2	21,224	18	29,403
ASWA overall	12	937	44	20,856	1	4,478	3	28,271	60	54,542
ASWA overall (%)	20%	2%	73%	38%	2%	8%	5%	52%		

*Settlements of less than 150 people not entitled to receive direct assistance under MoWR guidelines.

**Urban projects (2 in Mattru and 1 in Moriba Town) not included in this analysis. For Bonthe only CEDA and WVI solar BH PWS seen during field work are included here. In total there are 10 CEDA systems of this type in Bonthe and an unknown number built by WVI.

⁸⁹ SSL statistics on socio-economic conditions in Sierra Leone define rural areas as settlements with population of less than 2,000 persons while the water sector considers rural areas as settlements with a population up to 5,000 persons.

Figure 9-13: Access to WASH services in 2010 and 2017⁹⁰



Key findings related to EQ23:

FINDING 23.1 : WASH access in the ASWA-SL target districts is approaching national averages for districts, thereby reducing the equity gap between districts in Sierra Leone.

FINDING 23.2: Stakeholders find that ASWA-SL by using the ‘reaching all’ approaches succeeded in reducing community-level equity gaps in terms of women’s and other vulnerable groups’ access to WASH services.

9.5.4 EQ24 GEHR – integration of education and child protection

How strong was the integration of education and child protection with WASH programming and what were the successful integration strategies used?⁹¹

Integration of education and child protection

The integration of education and child protection strategies with WASH programming was informal at the strategic level, although there is evidence that IPs used their own expertise to apply child protection strategies. For example, one IPs indicated using sensitization messages to promote the importance of

⁹⁰ Based on data from the SSL Multi-Indicator Cluster Surveys. MICS5 is the first time that comprehensive data have been collected on combined WASH services, so the 2010 figures shown in the graph are determined from the access to combined water and sanitation combined with data on practicing handwashing.

⁹¹ The findings for this EQ were largely from KIIs conducted, supported by survey data.

school attendance to parents and positive messages around gender-based violence, child exploitation, forced labour, and child protection. The responses from communities and IPs indicate that the IPs ensured that no child labour was used in the implementation of the programme.

Appropriate vehicles for disseminating messages were used, e.g. pair-to-pair support in SHCs or direct mediation with parents to promote school attendance. A complaints mechanism system was established for sexual and gender-based violence . IPs were guided through UNICEF's policies and code of conduct on safeguarding and child protection. Most IPs reported internal child protection policies consistent with UNICEF's and international standards and requirements when dealing with children. Some excerpts from communities:

- *"We ensure that we call for children who are minors; we ensure that we got their consent through the parent or guardians. For example, if we want to take pictures; they sign consent when it comes to sanitation expose. We also ensure the child protection is also fundamental, safe guiding issues are considered. All the people we are working with, be it suppliers, need to sign code of conduct, safe guiding, and child protection policy for OXFAM. Part of the intervention that we do, we normally conduct DO NO HARM to communities to ensure that they are also enlightened."*
- *"CEDA has internal child protection policies. We have a gender, child protection and safeguard policy, staff code of conduct and compulsory reporting policy based on sexual exploitation and misuse of funds. These policies safeguard children and other vulnerable groups CEDA employees work with. CEDA Staff are orientated on these policies and required to sign the staff code of conduct before implementation."*

Information on GBV and menstrual hygiene was reportedly mainstreamed in all programme activities (e.g. training for SMC, Water Committees, SHCs, VSLAs) and was emphasized in all community meetings and engagements, to highlight the seriousness and prevention of sexual exploitation of girls, boys, women, and other vulnerable groups in the community. Some of the responses from District stakeholders and communities on education and child protection in general included the following:

- District stakeholders reported that meetings were held to sensitise the communities about sexual exploitation of girls, boys, and women.
- The DHMTs conducted trainings on prevention of sexual exploitation for women and children, especially girls.
- The enforcement of community bylaws in the use of WASH facilities also helped to protect children and women from abuse. These measures were reported to be effective in reducing the incidence of GBV in the community.
- Community leaders were aware of laws designed to ensure that women and children are protected.
- Community leaders/youth groups said that youth were being advised on the danger associated with sex at an early age, as well as awareness on the need to refrain from going to the streams alone or fetching water at night.
- Community members, especially women and children, are reportedly outspoken on sexual exploitation and GBV. However the fact that some IPs believed that establishing community dress codes would help in preventing sexual exploitation illustrates that their lack of understanding of GBV and reinforces gender norms and stereotypes.
- Community leaders recommended that awareness raising on sexual and GBV should be ongoing, and they recommended that a GBV coordination team should be established at community and chiefdom levels. They wanted improved IEC materials on sexual exploitation to be widely rolled out.

Key findings related to EQ24:

FINDING 24.1: The integration of education and child protection strategies with WASH programming was informal at the strategic level, but local implementing partners used their own expertise to contribute to child protection strategies. Examples include advocacy for setting-up of child complain committees at community levels.

FINDING 24.2: Responses from community and district stakeholders indicate that awareness has been raised concerning the importance of addressing GBV with evidence of high level of awareness across groups including chiefs and elders, women, and youth.

9.5.5 EQ25 GEHR addressing gender equity and sexual exploitation.

How and to what extent did UNICEF and partners' interventions contribute to addressing gender equity issues and the prevention of sexual exploitation and abuse?⁹²

Women groups and IPs mentioned that the provision of WASH services within the communities and schools in itself was a measure for protecting children, since they no longer had to risk going to distant places to fetch water or the bush to go to the toilet. The water collection points were located centrally, thereby reducing the risk of sexual advances on children and women. Construction of more facilities and the continual maintenance of facilities to ensure uninterrupted water access would thus further ensure child protection.

Change in workloads.

The community respondents indicate that it was traditionally and continue to be women and girls who are mainly responsible for fetching water in the households. In the schools however, fetching water and cleaning of the toilets is a shared responsibility between the boys and girls.

⁹² Sources of evidence: KIIs, ASWA Progress and Final Reports

Figure 9-14: Water collection time

The time spent on fetching water in Bonthe district was reduced from 19.2 minutes in 2016 according to the district level baseline data to 16.5 minutes in 2020 as indicated by the end-line survey data or a 14% reduction. The corresponding data from Koinadugu/ Falaba show a 20% reduction from 23.9 minutes to 19.2 minutes. Overall the collection time was reduced from 21.5 minutes in 2016 to 17.5 minutes in 2020.

Data on distance to water sources are not available from the baseline data, but the end-line survey data indicate that 50.4% of users in Bonthe and 63.1% of the users in Koinadugu/ Falaba are within 500 m distance of the water sources. The end-line data also show that 86% of the households in Bonthe and 77% of the households in Koinadugu/ Falaba (82% of all households in ASWA-SL target communities) access water within 30-minutes of walking and queuing.

These figures indicate that the time spent on collecting water was reduced by approximately 18%.

Control over finances

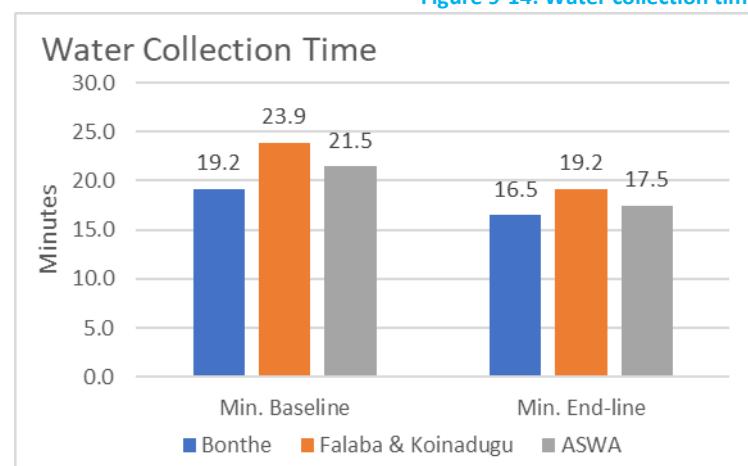
As also described under EQ10, women reported that their participation with the village savings and loans associations (VSLA) improved their access to and control over financing, incomes, and assets, and provided them with income-generation opportunities. This, in turn, enhanced women's influence on decision-making at community and household levels, including resource mobilisation decisions. 62% of the VSLA members were women. At the programme conclusion, 90 community groups (25 persons per group) were trained on community-based resource mobilisation for WASH O&M through VSLAs, with resources generated to pay for minor repairs.

Women's participation in decision-making

ASWA-SL promoted women's participation in community and decision-making, but the extent to which the participation led to influence is less clear. The programme used traditional approaches to address women's participation – for instance, in CLTS, the two "natural leaders" identified in each community ensured equal gender representation, and similarly, women's representation was ensured in WASH Committees. The programme aimed at ensuring that WASH Committees had at least one-third representation of women. In practice, 55% of the WASH Committee members were women. 54% of the School Management Committee members were women. Moreover, female water point caretakers were trained (90 women and 136 men were trained), challenging gender stereotypes. However, Chiefs provided overall leadership, particularly with sanitation and hygiene activities, and within traditional structures women are seldomly represented as leaders.

Voice of children

Women confirmed that children's awareness of hygiene had improved, as had their ability to voice their needs thereby influencing parents' WASH decision. It was confirmed that children share hygiene knowledge gained in schools with parents both in general and at the home..



Roles of boys and girls

Ninety% of the community leaders, who are mainly elderly and male, responded that women and girls are mainly responsible for fetching water and cleaning in the homes. However, some youth groups said that both the girls and boys are responsible, indicating that there is some generational change in the perception of roles in the households.

The overall responses have indicated that some change in gender roles have occurred. The change can be seen to be generational as the perception is that it is the youth who change attitudes. However, it is still seen to be the primary responsibility of girls to fetch water, with only one member our of 49 saying that boys and girls both fetch water.

"At home, the girls are responsible to fetch water and clean the home". "The girls fetch water. But if you have a brother, sometimes they will help you". "Girls fetch water more compared to boys". Only one member of the seven groups of about 49 members states that: "We all fetch water at home, boys and girls before we come to school and after school as well".

Risk of sexual exploitation and abuse

UNICEF assessed IPs for potential risks in the context of Protection from Sexual Exploitation and Abuse (PSEA) and there were compliance measures for IPs. UNICEF ensured that IPs complied with PSEA codes of conduct. IPs were trained by UNICEF staff to ensure that WASH facilities were provided in a way that did not exploit girls and women, reduced their vulnerability to PSEA and communities were consulted to identify safe locations for latrines. IPs were trained on community sensitization (e.g. on not fetching water at night) and were made aware of UNICEF's PSEA guidelines. IPs were supported in ensuring that WASH facilities were located in open and accessible places and with segregated male and female facilities.

Community/ school sensitisation and awareness raising addressed PSEA, and IPs reported high awareness of PSEA in target communities. There was no report of sex-for-access to WASH from any IP. The locations of water points were agreed by target beneficiaries. Observations showed that the water points were openly and centrally located to prevent sexual exploitation of the vulnerable.

The extent to which ASWA-SL led to a change in the risk of sexual exploitation abuse is not possible to determine, due to the sensitivity of the topic and difficulty in collecting data. Nonetheless, responses from stakeholders indicate that the provision of water points and toilet facilities in safe locations contributed to reduced risk of sexual exploitation and abuse, by the provision of water facilities in schools and communities.

"poor assess to water, sanitation, has put girls and women at risk of sexual harassment in this our Jahun community. There have been cases of harassment reported to the chief and local authority by some school children and their parents. ASWA contributed significantly to the protection of children (girls and boys) and women, against sexual exploitation and abuse by providing water facilities in some schools and communities. Vulnerable groups like women, girl's child no longer going to secluded places more far and hard to reach areas to fetch water".

National framework and disadvantaged groups

National WASH stakeholders commented that the ASWA supported the revision of the WASH guidelines, which now recommend at least 40% participation of women in WASH Committees and that either the

chair or vice chair should be a woman. In addition, Persons Living with Disabilities (PLwD) are now required to participate in WASH planning and WASH facilities should be disability friendly.

District stakeholders commented that the policies, regulations, and guidelines contained clearly defined objectives through continuous community engagement with various groups like the youth, women's groups and people living with disabilities. Their needs were included as part of the objectives in the management of WASH facilities. They also address some of the sanitation challenges at community levels, awareness of community roles and responsibilities, taking over ownership of sanitation services. The needs of women and vulnerable groups were also specifically addressed in WASH policies in terms of access to WASH facilities.

Some IPs found that national WASH guidelines previously were below standard and ASWA-SL's contribution led to improved guidelines for WASH in schools. However, the majority of IPs were unaware of ASWA-SL's support to the development of WASH policies, regulations, and guidelines. Some IPs stated that it was not the responsibility for ASWA-SL to revise national WASH policies as this was the responsibility of GoSL.

Key findings related to EQ25:

FINDING 25.1: Stakeholders appreciated of the awareness raising and the knowledge they have gained on the issues of sexual exploitation at community, chiefdom, and district levels.

FINDING 25.2: Positive results were achieved in terms of reducing the work-load for collection of water, women's control of finances through the VSLAs, female representation and participation in decision-making, as well as the perception of the roles of girls and boys.

FINDING 25.3: UNICEF and ASWA-SL had a positive impact on the inclusion of gender equity, child protection and the participation of vulnerable groups in the sector guidelines and policy documents.

9.6 Impact

Criterion	EQ
Impact	26. What are the lasting changes in the lives and wellbeing of women, children, families, and communities targeted by the program? 27. To what extent has the program contributed to improving the provision of WASH by the government at national and district levels?

9.6.1 EQ26 Impact – lasting change in well-being

What are the lasting changes in the lives and wellbeing of women, children, families, and communities targeted by the program?

The underlying rationale for ASWA-SL's was that a) improved access to WASH would lead to decreased child mortality and morbidity, and b) improved access to WASH in schools would lead to better education outcomes due to reduced absenteeism and improved enrolment. However, it is difficult to attribute the impact of ASWA-SL on health and education as there were several factors external to ASWA-SL influencing the health and school attendance in the target areas; some were obstacles, such as the Ebola epidemic, whereas others were enablers, such as education sector reforms aiming at universal access to primary education.

Achievement of health targets

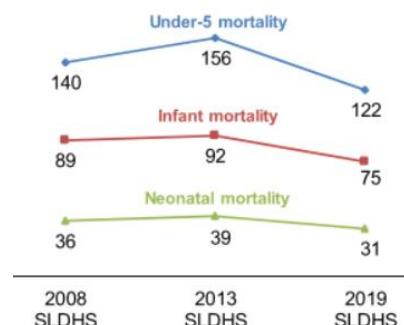
No statistical/ quantitative data is available on the prevalence of diarrhoea and other hygiene-related diseases or under-five mortality in ASWA-SL target communities. Nonetheless, there is a widespread perception in the communities that the improved access to water, discontinuation of open defecation, and improved hygiene practices brought about by ASWA-SL contributed significantly to a decrease in cholera, diarrhoea and other waterborne and hygiene-related diseases and deaths and improved wellbeing among under-five as well as community-members. However, community members found that deaths amongst children due to diarrhoea, which they believe is due to poor water quality, still persist.

The national under-five mortality rate in Sierra Leone has decreased over the years as shown in Figure 2-1 and Figure 9-15.

DHMT in Koinadugu reported that the weekly data obtained from the integrated Disease Surveillance System confirmed the national trend also applied to Koinadugu. Prior to 2012, there were outbreaks of childhood diseases, and after 2012 there was a reduction in the incidence of waterborne diseases, which DHMT found was probably due to increased access to WASH facilities. In Bonthe, there is no data available for under-five and general diarrhoea and other waterborne and hygiene related diseases morbidity and mortality. Stakeholders also mentioned that the cause of death is often difficult to ascertain, and it is thus difficult to assert that the presence of WASH facilities resulted in the reduction of under-five deaths in Bonthe.

Figure 9-15: Under-5 mortality rates⁹³

Deaths per 1,000 live births in the 5-year period before the survey



Reduction in time spent on collecting water.

ASWA-SL has had a positive impact on the time for collecting water by users in the target districts. The average collection time was reduced with approximately 18%. Baseline data is not available on the distance to water points, but the end-line data indicate that the proportion of users within 500m from the water sources are approximately 50% in Bonthe and 63% in Koinadugu/ Falaba.

Change in school absenteeism and attendance.

Data on school absence and attendance rates for ASWA-SL target schools were not made available to the evaluation team. Typical responses from stakeholders were that attendance rates increased in recent years due to reforms in the education sector⁹⁴, rather than due to ASWA-SL.

Stakeholders have the impression that the school absenteeism was reduced due to better access to WASH facilities. Some teachers found that prior to ASWA-SL, the time spent by pupils to fetch water affected school attendance, and that the WASH facilities had reduced absence: “*We used to send school pupils to fetch water from far distances, but the situation is better now with implementation of WASH program in the school!*”.

Sustainability of CLTS achievements

While IP confirmed that they achieved their target ODF communities they are concerned that the time available to upgrade open defecation to ODF is not sufficient to sustain this holistic behavioural change.

In effect, CLTS interventions like most other rural WASH project should ideally include a stabilisation phase to empower communities to fully own, manage and derive sufficient benefits from the results of the interventions. In most cases, central and/ or local governments are expected to fill in this gap but for all intent and purposes, the limited resources at the local level do not permit such aftercare on interventions. There is thus a risk of communities reverting to open defecation and/ or limit households to move up the

⁹³ Statistics Sierra Leone Demographic and Health Survey 2019

⁹⁴ Data from the Education MIS from 2018 and 2019 show an increase in primary school enrolment in the three ASWA-SL target districts of more than 40% while the pupil teacher ratio increased from 28 to 37. There was no difference in the ratio between boys and girls in primary schools.

sanitation ladder over and above their first unimproved condition, which is necessary but not sufficient to achieve safe-sanitation and the desired target of the SDGs.

Key findings related to EQ26:

FINDING 26.1 : While it is difficult to quantify changes in health and living standards, stakeholders agree that health conditions, in particular related to water borne diseases and living standards in terms of reduced workload for collecting water were affected positively by ASWA-SL.

FINDING 26.2: Communities and health personnel observed substantial reductions in hygiene-related illnesses and mortality in general and for under-five children in particular.

FINDING 26.3: ASWA-SL reduced the time used for fetching water by 18%.

FINDING 26.4: Stakeholders find that school absenteeism has reduced due to better access to WASH facilities, but this cannot be quantified.

9.6.2 EQ27 Impact – improving national and district WASH.

To what extent has the program contributed to improving the provision of WASH by the government at national and district levels?⁹⁵

Contribution to improving the WASH Sector Governance Framework

Stakeholders report the following contributions from UNICEF and ASWA-SL to improvements in the WASH Sector Governance Framework:

- The guidelines developed with ASWA-SL support for WASH in schools and WASH in health facilities considered the needs of persons living with disabilities.
- The National Protocol on CLTS and the WASH Sustainability Compact developed with ASWA-SL support defined participation and clear roles for women.
- The National Strategy on Sanitation and Hygiene outlined strategies for promoting menstrual hygiene management. UNICEF supported/ funded MoHS to develop the strategy.
- The flexibility allowed ASWA-SL to engage in innovative experimentation in the support to GoSL, such as digital monitoring. This helped GoSL developing a new policy on digital monitoring. Moreover, the National Plan Strategy for Water Safety Planning (November 2020) was in part development based on ASW-SL's digital monitoring experience, all the issues brought out from the monitoring; policy guidelines on iron removal on some of the water facilities and many documents.
- Some stakeholders suggested that the national level capacity building activities under ASWA-SL led to the launch of policies outside the confines of the programme. ASWA-SL also contributed to the development of the urban WASH policy (although stakeholders indicate that the contribution was modest), and the ongoing review of the WASH sector policy. The capacity development provided by ASWA-SL helped strengthening SWA engagement.

⁹⁵ Sources of evidence: KIs (Sector partners, UNICEF WASH, National Government)

At the district level, stakeholders reported that capacities improved in the three districts targeted as a result of ASWA-SL involving District Councils in monitoring and implementation. Bonthe and Koinadugu districts received direct funding on annual basis, so they could work hand in hand with the IPs. However, the communities remarked that there were very few or no visits from the district officials to the communities. The lack of water point mapping data on the ASWA-SL completed facilities also indicate less than optimal involvement of the district WASH teams in monitoring and implementation.

Stakeholders and one IP reported that the national WASH governance and coordination was much more effective during emergencies such as the Ebola but less effective and useful for normal implementation of programmes such as ASWA-SL. Some IPs mentioned that governance amongst WASH MDAs at district level has changed as there is now active coordination and collaboration in project implementation. However, the IPs mentioned that they are unaware of ASWA-SL significantly contributing to any changes/improvements in WASH sector governance nationally or at district level.

Government WASH funding

An impact of ASWA-SL on the level of WASH funding at national or district level cannot be established. The WASH sector remains dominated by external funding. Like other developing countries, GoSL's own resources are inadequate, and the presence of external funding is likely to result in allocating own funding to other underfunded sectors. Nonetheless, one MDA representative said: "*ASWA contribution to change in Government WASH funding – I think so, although I don't have much evidence to substantiate it. I am aware UNICEF and other donors have been putting pressure for Government to contribute more on the WASH services in country*".

District stakeholders noted the inadequate funding for follow-up and monitoring activities. For example, there is no budget at district level to support CLTS and hygiene promotion. At the national level there is only the 'Expanded Sanitary Inspection & Compliance' (ESICOME) programme, which filters down to the district level for CLTS.

Changes in mandates and roles

The national WASH stakeholders responded that the WASH sector governance framework is generally based on the WASH Policy (2010), and the 2004 Local Government Act. This governance framework is distinct and clear with the roles of MDAs and decentralised activities. MDAs at national level provide strategic guidance and oversight of rural WASH, with no direct implementation responsibilities. The local councils are directly responsible for managing and coordinating implementation and O&M of rural WASH, in collaboration with the District MDA such DHMT, MWR Engineers, and MBESS. This governance framework has not changed.

National MDAs expressed concern about not being involved in the oversight and quality control, and not being fully informed by district stakeholders about what goes on and what should be done to improve the situation.

Some of the responses from national stakeholders point to that the ASWA-SL did not have impact on the mandates, roles, and responsibilities in the WASH sector as such, but that the programme and UNICEF has contributed substantially to developing the details of the mandates in particular in relation to CLTS implementation and ensuring focus on gender, children, and vulnerable groups.

Key findings related to EQ27:

FINDING 27.1: Stakeholders found the ASWA-SL had contributed to improving national WASH governance in particular through the support to WASH M&E and the National Strategy on Sanitation and Hygiene.

FINDING 27.2: Government funding for WASH from internal sources remains low and stakeholders responses indicate that ASWA-SL did not influence Government funding allocations to rural WASH significantly.

FINDING 27.3: The mandates in the WASH sector have not changed over the last decade years as these are outlined in the NWSP. However, stakeholders found that ASWA-SL supported the operationalization of the mandates, in particular vis-à-vis sanitation and coordination at district level.

10 Lessons Learned

Lesson 1. It is important to understand behavioural changes to ensure that the participatory and inclusive approaches lead to programme sustainability. Without incremental changes in behavioural change being monitored and analysed with intent, it can be difficult to plan evidence based sustainability strategies.

Related observations: ASWA-SL's reporting in part captured incremental behavioural change, for instance in narrative of annual reports. However, the reporting did not clearly reflect the milestones that lead up to changes on the ground when it comes to behaviour change. This could lead to result indicators that are clearly captured in the monitoring framework (e.g. number of ODF communities, handwashing practices etc.). Also, the IPs made great efforts to include vulnerable groups, with continuous re-orientation to keep up momentum, but these efforts were not fully captured in reporting. Analysis could be clearer on how different interrelated factors have influenced behaviour change, which in turn will inform sustainability.

This lesson is drawn from KIIs and discussions with partners and UNICEF staff, and supported by analysis from EQs REL 2, REL 3, GEHR 21, GEHR 22 and GEHR 23.

Lesson 2. The insights of communities are essential for understanding the needs and barriers of the most vulnerable and how they can be reached and should therefore be integrated in program monitoring and systematically be taped into.

Related observations: At the community level, there are specific insights on the vulnerability of different segment of the local population, which segments are the most vulnerable, and how they can be reached. Community voices and actors in schools have shed light on their ability to pay for services, and to fund running costs (O&M) in the communities and schools reached. These views appear to be more nuanced than views at the national level. More insightful and intensive strategies are needed to improve outcomes for extremely vulnerable people.

This lesson is drawn from the assessment of REL 2 and 3 GEHR EQs.

Lesson 3. Access to information and data is essential for effective and evidence-based decision-making and coordination – a complete, systematic, and GEHR sensitive monitoring, analysis and record keeping of activities and completed facilities are essential for identifying areas requiring improvement and enabling results-based program management.

Related observations: Monitoring provides managers with an understanding of problems as they occur and allows adjustments and corrections to be made to procedures. Record keeping, including accurate location data for facilities, also provides evidence for accountability to donors and provides a resource for future implementation by all actors. Although UNICEF and the ASWA-SL spearheaded development of WASH M&E tools, such as the Akvo mobile phone data collection tools, these seem not to have been used as management tools to ensure accurate data on ASWA-SL achievements. Despite funding provided to District WASH teams for monitoring, no data on the facilities that were constructed under ASWA-SL is available on the national data platforms. UNICEF did not have a complete list of the localities where the ASWA-SL activities were implemented. This makes follow-up difficult for UNICEF and the District WASH Teams and generally does not facilitate coordination and planning at district level when data on the WASH situation in the communities is not available.

This lesson is drawn from general problems experienced to access data on the ASWA-SL target communities and facilities.

Lesson 4. Careful attention to ensuring the quality of surveys and designs for each individual water system is essential for ensuing fully functional and sustainable water systems.

Related observations: The field observations of ASWA-SL supported water systems indicated that the capacity was insufficient for i) siting of hand-dug wells and boreholes to reduce the serious problems with seasonality of water facilities using shallow groundwater; and ii) survey and design of piped systems. The issues related to the technical quality of water facilities experienced in the ASWA-SL implementation are well known in the sector in Sierra Leone, and more attention to these issues is needed to reverse the trend of not using the limited available funding effectively to develop perennial and sustainable access to water. It would be preferable if the capacity and role of the IPs used by UNICEF focused on systematic building of the private sector's capacity to provide quality services as outlined in the NRWSSP.

The technological advances in the accuracy of satellite navigations systems provide an opportunity for UNICEF, the IPs, and the water sector generally to further develop easy and accurate survey tools for piped systems as already applied by other implementers in Sierra Leone.

These lessons are based on the experiences from the visit to the ASWA-SL target communities as presented in detail in Appendix 7 Facilities Observations Checklist – Technical Narrative.

Lesson 5. Achieving sustained benefits in terms of improved health and living standards require combined access to water and sanitation and good hygiene practices/ behavioural changes.

Related observations: It seems obvious at a theoretical level that only when a household have sustained access to water, and proper sanitation facilities and practice good hygiene will the improvements have the desired impacts on health and living standards. However, implementing this in practice can be challenging. The national statistics as well as the results of the end-line survey carried out in ASWA-SL target communities indicate that a very small proportion of the households in Sierra Leone have combined access to all three WASH components.

The approach to selecting communities for investments in water facilities seems to have favoured spreading the benefits to as many communities as possible. While this is commendable, in particular as an emergency response, the ASWA-SL experiences seem to indicate that this can result in the few installations being over-used and therefore difficult to maintain as they are serving a large population.

In light of the logistic challenges also experienced by ASWA-SL, it could be considered if a more comprehensive approach could be implemented in target communities in order to move towards achieving the WASH SDGs. This would imply that a community is fully covered with perennial and sustainable access to the three WASH components before moving on to the next community. The area wide approach of intervention planned to be introduced by UNICEF that consider an entire Chiefdom as one unit for sanitation and hygiene promotion supports this but would need to also consider planning for water services.

ASWA-SL achieved good results in reducing open defecation in the target communities using the CLTS approach, where households invest in facilities they can afford. The ASWA-SL data shows that this is predominantly in the lower steps of the sanitation ladder and to move forward towards achieving the

SDGs for sanitation, a more sustained effort is needed. Whether this can be achieved through continued support to VLSAs or subsidy for the poorest households could be something UNICEF with the national stakeholders could investigate.

11 Final Conclusions

11.1 Relevance

Conclusion 1.1: ASWA-SL fitted well in national policy framework and goals and UNICEF's global approach.

In terms of programme scope and approach, ASWA-SL is an exemplar of integrated rural WASH programming. The programme fitted clearly within Sierra Leone's national policy framework and goals, as well as within UNICEF's global approach to WASH. ASWA-SL clearly contributed toward achieving the sustainable development agenda and highlighted very strong arguments for the inclusion of WASH into overarching strategies. In part, the high degree of alignment was supported by the programme models promoted including CLTS, WinS approaches (including the Child Friendly Schools approach) and Village Level Operation and Maintenance (VLOM). These approaches were refined and promoted by UNICEF WASH programme globally, and the design of ASWA-SL took into account the global lessons learned.
Reference: REL EQ1

Conclusion 1.2: ASWA responded to the needs of vulnerable groups however with opportunities for improvement.

ASWA-SL design responded to specific needs of different groups such as women, men, children, and vulnerable groups such as people living with disabilities and the elderly as well as targeting needy communities. ASWA-SL responded well to the needs of women and children e.g. in the provision of WASH facilities in safe locations and reducing workload for collecting water.

Specific attention to people living with disabilities at community/ household level could have been paid to the strategies required to reach vulnerable groups which are often the most difficult to reach and require different strategies. One example is the attention paid to the needs of adolescent girls in planning stages, which was rectified at later stages of the programme by the inclusion of menstrual hygiene approaches. This later rectification could have been avoided if earlier planning had paid closer attention to specific needs of sub-groups. Nonetheless, the programme models implemented to promote inclusion are widely known for including vulnerable groups (i.e. CLTS with its "whole of community" approach)..
Reference: REL EQ2, EQ3, EQ4

Conclusion 1.3: Lack of clarity of in Theory of Change and indicator definitions.

The intervention strategy's link to outcomes and impact was weak, and more could have been done to link the intended results to programme activities in the specific context. Clarity of the strategy and framework linking activities and outputs to the intended results (outcomes and impact) in the ToC and results framework was lacking, and programme assumptions were not clearly identified. There was a lack of clarity on the indicator definitions for measuring achievements and different wordings were used in programme document and progress reports. *Reference: REL EQ5*

11.2 Effectiveness

Conclusion 2.1 ASWA-SL achieved good results in a challenging environment.

Broadly, the targets were reported to be reached or even exceeded; however, lack of clarity of the indicator definitions and findings from the field indicate that the achievements could in reality be less than reported. The reported achievements went beyond targets, although the evaluation team finds that the targets were originally set low. ASWA-SL was successful in raising awareness on hygiene and reducing

open defecation in the communities, as well as improving WASH facilities and hygiene in schools. However, findings from field indicate issues with the sustainability of the water facilities, with some facilities not functioning or being seasonal. The combined access to all three WASH components remains low, though this is not one of the indicators under the project. *Reference: EFFE EQ7 and QEQ8, EQ9*

Conclusion 2.2: The extent to which ASWA-SL contributed to creating enabling environment for the WASH sector in Sierra Leone is less clear.

ASWA-SL's contribution to the national WASH governance framework and capacities is appreciated by stakeholders, in particular in relation to the sector M&E and the sanitation and hygiene strategies. However the attribution of ASWA-SL to national sector building activities is not clear and reporting does not indicate the level of collaboration with sector partners. ASWA-SL made a tangible contribution to improving monitoring and district level coordination of the rural WASH sector in Sierra Leone. *Reference: EFFE EQ8.*

Conclusion 2.3: Functional systems for O&M of community and school facilities have generally been put in place; however field observations identify challenges with functionality of water points.

National systems to promote sustainability were built, yet challenges persist at the community and school level in capacities to sustain systems, despite a willingness to maintain WASH facilities. Many of these challenges relate to the limited ability to generate required revenues for operation and maintenance and limited support from Districts. Similarly, while awareness was greatly enhanced in target communities, sustained behavioural change remains a concern. *Reference EFFE EQ10*

11.3 Efficiency

Conclusion 3.1: ASWA-SL implemented efficiently with reasonable unit costs.

Overall, ASWA-SL was implemented efficiently with the reported unit costs within reasonable limits; although the per capita unit costs cannot be firmly established due uncertainty about the number of people served. *Reference EFFE EQ13*

Conclusion 3.2: The resources available for the ASWA-SL implementation were adequate but challenges with resources for effective support at the district level.

The resources available for the ASWA-SL implementation were generally adequate, although some interventions such as piped systems and wells in difficult hydrogeological areas were poorly costed, which led to implementation challenges. The quality of the facilities construction was generally fair to good, but there were some areas of gap related to siting of hand-dug wells and design of piped systems. Coordination at district level generally worked well, with good collaboration with District Councils, deconcentrated staff from WASH MDAs and other partners active in the districts, however the support provided by the Districts to the communities and regular monitoring is a challenge. *Reference EFFE EQ14 and EQ15.*

Conclusion 3.3: ASWA-SL modalities for coordination functioned and satisfaction with UNICEF support generally expressed by implementers.

Coordination at the national level was working with some coordination between WASH MDAs and implementing partners although irregular. Despite the irregular formal consultations there appear to be no overlaps in the target areas for ASWA-SL and other implementing partners or Development Partner programmes. Implementers broadly expressed satisfaction with the support provided by the UNICEF staff

to facilitate implementation. However, UNICEF procurement procedures and late disbursement were seen by IPs and District stakeholders to cause implementation delays. Opinions from IPs and District WASH stakeholders on issues related to procurement, pre-financing and timing of funding, points to need for more transparency and communication on the UNICEF procedures. *Reference EFFI EQ17 and EQ18*

Conclusion 3.1: Challenges with consistent use of monitoring tools and data on achievements and completed facilities.

Programme monitoring was not fully satisfactory, the numbers reported were not always fully reliable due to weaknesses in indicator definitions, and most data was not disaggregated by gender or vulnerable groups. Accurate data on the targeted communities and completed facilities was not fully available, despite the fact that UNICEF through ASWA-SL supported the development of national and district WASH monitoring tools used for water point mapping and also the water quality monitoring tools using mobile phone technology. *Reference EFFI EQ13-17.*

11.4 Sustainability

Conclusion 4.1: Overall some success in achieving sustainability of WASH services.

Overall, ASWA-SL had some success in terms of achieving sustainability, as communities are generally willing to pay for WASH services and pay either on a monthly basis or when there is a need for repairs. There is evidence that hand pumps are maintained in some communities, although difficulties in accessing skilled mechanics and spare-parts exists. The ability to pay at the community and school level for O&M remains insufficient, in particular the ability to pay for replicating household toilets. *Reference SUST EQ 19*

Conclusion 4.2: Challenges in sustaining gains in sanitation.

The sustainability at the community level, in particular with respect to the sustainability of behavioural change and maintaining ODF status continues to be a challenge. Also in schools, sanitation facilities are generally functional, but not well maintained and some School Health Clubs are functional with participation of both girls and boys. . *Reference SUST EQ 19*

Conclusion 4.3: Resources in Districts for effective support to WASH remains a challenge.

The approaches around the sustainability framework were commendable and appropriate, but there is only limited support from district authorities to the communities to continue WASH activities and limited resources for the Districts to carry out the WASH monitoring and support activities. *Reference SUST EQ20.*

11.5 Gender, Equity and Human Rights

Conclusion 5.1: ASWA-SL successful in improving balanced gender participation but less so in participation of persons living with disabilities.

ASWA-SL was successful in ensuring equal participation and representation of women and men in WASH decision-making and management. However, ASWA-SL was not equally successful in ensuring representation of vulnerable groups, such as persons living with disabilities. Due to lack of disaggregated monitoring data, it is however not possible to establish clearly, the extent to which vulnerable groups were reached by the ASWA-SL activities and achieved improvements in access to WASH services. *Reference GEHR EQ21 and EQ22.*

Conclusion 5.2: Positive achievements on safety for women and children.

Positive responses were made on the achievements on safety for women and children and awareness of the importance of addressing GBV. The safety for access to the WASH facilities has improved as the school latrines and water points are located sufficiently close to school buildings to be safe to use during school hours and all community water points are located within or very close to settled areas and safe to use, especially during daylight. However, in localities where water supplies are seasonal, not functioning, incomplete or inadequate, women, girls and boys still have venture further afield for water.

The integration of education and child protection strategies with WASH programming was informal at the strategic level, but local implementing partners used their own expertise to contribute to child protection strategies. Stakeholders also expressed appreciation of the awareness raising on sexual exploitation and GBV. *Reference GEHR EQ22-24.*

Conclusion 5.3: Appropriate design of latrines.

The sanitation facilities implemented in schools were appropriate and according to the national standards with separate toilets for boys and girls and appropriate facilities for disabled access and menstrual hygiene. *Reference GEHR EQ21.*

Conclusion 5.4: Equity in WASH access.

In terms of equity in WASH access, the ASWA-SL target districts are approaching national averages for districts, thereby reducing the equity gap. However, equity gaps in terms of rural/ urban access at national level are generally widening during the implementation period. Stakeholders find that ASWA-SL succeeded in reducing community-level equity gaps in terms of women's and other vulnerable groups' access to WASH services. *Reference GEHR EQ23.*

Conclusion 5.5: Reducing workload for collecting of water and gender roles.

Positive results were achieved in terms of reducing the work-load for collection of water, women's control of finances through the VSLAs, female representation and participation in decision-making, as well as the perception of the roles of girls and boys. *Reference GEHR EQ25.*

Conclusion 5.6: UNICEF's contribution to inclusion and equity appreciated by stakeholders.

At the national level, stakeholders were of the opinion that UNICEF and ASWA-SL had a positive impact on the inclusion of gender equity, child protection and the participation of vulnerable groups in the national sector guidelines and policy documents and in awareness generally at national, district and community levels. *Reference GEHR 24 and 25*

11.6 Impact

Conclusion 6.1: Difficult to attribute change in health and living standards to ASWA-SL.

It is not possible clearly to attribute improvements or changes in health conditions to ASWA-SL since major external factor such as the Ebola pandemic have affected the communities during the implementation, however the stakeholders generally agree that health conditions and living standards were affected positively by ASWA-SL. Similarly, the general reforms and improvements in the education sector makes it difficult to attribute any changes in absenteeism and attendance in schools to the ASWA-SL, however the stakeholders find that school absenteeism has reduced due to better access to WASH facilities. *Reference IMP EQ26.*

Conclusion 6.2: Contribution to national WASH governance appreciated but not clearly documented.

Stakeholders commented that ASWA-SL had contributed to improving national WASH governance vis-à-vis WASH M&E and the National Strategy on Sanitation and Hygiene amongst others while the UNICEF contribution generally was not well documented. The GoSL funding for WASH from internal sources remains low and stakeholders expressed that ASWA-SL did not influence funding allocations significantly. The mandates in the WASH sector have not changed over the last decade years as these are outlined in the NWSP. However, stakeholders found that ASWA-SL supported the operationalization of the mandates, in particular vis-à-vis sanitation and coordination at district level. *Reference IMP EQ27.*

11.7 Summary – ASWA strengths and weaknesses

Strengths: ASWA-SL made a significant direct contribution to improving the access to WASH services in the districts covered, and indirectly broadly in rural Sierra Leone through its contribution to improving national capacities. Thereby, ASWA-SL supported the achievement of GoSL's objectives and SDG targets of improving WASH coverage and reducing the equity gap. Despite the challenging environment with poor accessibility and disruption by an Ebola outbreak, ASWA-SL appears to have been able to reach or even exceed its targets, although there are some sustainability issues. Several of the communities covered reached ODF status. The WASH infrastructure installed was mostly appropriate, of adequate quality, and at reasonable costs. UNICEF provided good technical support to the IPs, but cumbersome procurement procedures and late disbursements created implementation delays.

The beneficiaries were reached through a combination of WASH infrastructure, hygiene awareness raising, and access to micro-finance through VSLAs. Through its integrated approach, ASWA-SL was able to reach and address the WASH needs of different segments of the population in the target districts, including women, girls, boys, and people living with disabilities, reduce the workload of women and children, and improve the safety of women and children. In particular, appropriate school WASH facilities for menstrual hygiene was a prominent contribution. ASWA-SL was also successful in ensuring the participation of women in WASH decision-making and management. ASWA-SL also ensured a sense of ownership of the WASH facilities, with communities generally being willing to pay for O&M.

At the national level, ASWA-SL made a moderate contribution to policy improvements (e.g. vis-à-vis inclusion and child protection in the National Strategy on Sanitation and Hygiene), and a more substantial contribution to improved WASH sector monitoring and district level coordination.

Weaknesses: The programme strategy did not contain a sufficiently strong results chain linking activities and outputs to outcomes and impact, and the underlying assumptions of required conditions to achieve the intended results were not properly identified. A major weakness was the definition of indicators and the monitoring of progress, which did not obtain sufficiently detailed or clear data on the beneficiaries reached and achievement of targets, despite ASWA-SL's support for WASH sector monitoring.

Some of the infrastructure visited by the evaluation team had design or construction weaknesses, and do not function satisfactorily, or in some cases not at all.

The approach to reach and address the particular needs of vulnerable groups was not sufficiently comprehensive. While women, children and people living with disabilities were reached, ASWA-SL was less successful in ensuring the representation of e.g. people living with disabilities in WASH decision-making.

Overall, the ASWA-SL contribution to creating enabling environment for the WASH sector in Sierra Leone was appreciated by stakeholders but found to be modest and difficult to document.

12 Recommendations

Drawing on the findings and conclusions generated in the course of the evaluation, the evaluation team developed a series of strategic and operational recommendations. The recommendations were developed in a participatory manner with UNICEF and other in-country partners. Key evaluation users had several opportunities – once the draft report was submitted for review – to discuss with the evaluation team on how to make the recommendations relevant, actionable, precise and suitable to the specific context.

STRATEGIC RECOMMENDATIONS

SR1. Address the barriers preventing the hardest to reach from accessing and using WASH services

Conclusions	Actions for Consideration	Responsibility	Level of priority
Relevance C1.2 and Gender, equity, and human rights C5.1	<p>SR 1.1. Develop the TOR and conduct data collection for a study on barriers in consultation with WASH Stakeholders.</p> <ul style="list-style-type: none"> The study, which is expected to provide a better understanding of the barriers that prevent the hardest to reach from accessing and using WASH services and which should build on the upcoming Bottleneck analysis exercise commissioned by UNICEF Sierra Leone, should be framed in accordance with the Human Rights to Water and Sanitation Normative Framework. To this end, barriers and needs should be studied against the five key human rights dimensions (access, availability, quality, acceptability, and affordability). The study should focus on issues such as affordability of water, access to latrines, and hygiene behaviour. In drafting the ToR, ensure that the study brings clarity on who the “hard to reach” population groups are (for instance, young girls and people living with disabilities among others). The study should also enable a better understanding of the public policies and funding mechanisms (i.e. public budgets and their flow to decentralized levels), which may allow for a progressive realization of these rights. The study should build on the lessons learned (both globally and regionally) on barriers and strategies to address them and its focus should be on applying such strategies in the Sierra Leonean WASH sector context. 	UNICEF Sierra Leone Country Office in consultation with the Ministry of Water Resources, Ministry of Health and Sanitation, Ministry of Basic and Senior Secondary Education; Statistics Sierra Leone; and other in-country WASH stakeholders	High

	<ul style="list-style-type: none"> The development of the ToR should be participatory and key stakeholders should get involved since the beginning of the process 		
	<p>SR 1.2. Develop the ToR of a meta-synthesis of existing WASH studies covering barriers and ensure that such meta-synthesis include the results of the study on barriers recommended under SR 1)</p>	UNICEF and Government Partners within the WASH Steering Committee	High
	<p>SR 1.3. Adjust the implementation of future UNICEF WASH (and other in-country partners' WASH interventions as feasible) Programmes based on the results of the meta-synthesis to address the barriers to different vulnerable groups' access to WASH in ASWA-SL communities</p>	UNICEF WASH	Medium
	<p>SR 1.4. Disseminate the Barriers study and the meta-analysis findings amongst in-country key WASH stakeholders</p> <p>This would involve the dissemination of the study results (under SR 1.1) as well as of the meta-analysis findings so that other development partners within and outside of Sierra Leone (including governmental entities, international agencies, NGOs, CSOs, WASH consortium) could also have additional strategically and operationally relevant knowledge available to them so as to inform their future WASH programmes.</p>	UNICEF in collaboration with the Government of Sierra Leone and other key WASH stakeholders	Medium

SR 2: Ensure that future UNICEF WASH programmes be underpinned by a strong ToC, results framework, and indicators

Conclusions	Actions for Consideration	Responsibility	Level of priority
Relevance C1.3, Effectiveness C2.1 and Efficiency C3.1	<p>SR 2.1 Enhance the existing UNICEF-Sierra Leone Country Programme Document Theory of Change so as to make it more coherent and ensure to have a clear results framework to underpin future WASH programs.</p> <p>Ensure that both tools (ToC and Results Framework) include the following:</p> <ul style="list-style-type: none"> a) a clear causal pathway from outputs to outcomes and impact; b) a strong risk analysis and risk management strategy; c) mapping of assumptions at the different levels of the ToC; d) well-defined and unambiguous, SMART, and disaggregated indicators at outcome and impacts levels with clearly identified means of verification. <ul style="list-style-type: none"> • Make a specific effort to include Key Sector Indicators (KSI), which are defined in the national M&E Framework, in future programming and reporting. <ul style="list-style-type: none"> a) Should any gaps in relation to these KSI be identified, review and improve them to ensure that they be gender- and equity-sensitive. b) Include Impact related SDGs indicators e.g. SDGs on Poverty (1), Health (3), Gender equity (5), reduced inequalities (10). 	UNICEF/Government	Medium
	<p>SR 2.2 Ensure that ongoing and future contracts with Implementing Partners (IPs) and Service Level Agreements with Districts include obligations to report using the national monitoring and reporting tools</p>	UNICEF CO WASH WASH Steering Committee Ministry of Planning and Economic Development	Medium

SR3. Focus on achieving SDG 6 through a more concentrated engagement in target districts and communities

Conclusions	Actions for Consideration	Responsibility	Level of priority
Effectiveness C2.1 and Impact C6.1	<p>3.1. To facilitate improved WASH planning in target districts and monitor achievements using the SDG WASH indicator definitions.</p> <ul style="list-style-type: none"> This is all the more necessary as the ASWA-SL strategy of ensuring a wide breadth of WASH investments did not always result in facilities contributing systematically to the achievement of the Medium-Term National Development Plan WASH related goals and targets (as linked to the SDG 6) in particular, to the combined access to all 3 WASH components for maximum health benefits. 	UNICEF WASH in consultation with MLGRD and WASH MDAs	Medium
	<p>3.2. Promote the effective use of the limited resources towards a more focused targeting of investments in order to accelerate the achievement of the Mid-Term National Plan's targets and goals related to SDG 6</p> <ul style="list-style-type: none"> This could be done by ensuring that: <ul style="list-style-type: none"> (a) the water facilities are established and maintained according to basic water service standards; (b) the CLTS approach is improved to facilitate investment in basic sanitation services by the poorest/ vulnerable households. (c) the collaboration with VSLAs is enhanced to be instrumental in assisting poorer households in financing latrines and hand washing facilities. 	UNICEF WASH in consultation with MLGRD and WASH MDAs and VSLAs	Medium

SR4. Develop a realistic strategy for covering O&M recurrent costs in ASWA-SL communities.

Conclusions	Actions for Consideration	Responsibility	Level of priority
Sustainability C4.1 and C4.3	<p>4.1. Develop strategy for O&M cost recovery.</p> <ul style="list-style-type: none"> Such strategy is all the more needed as the barriers, which prevent the coverage of O&M costs at community level and school level, needs a realistic assessment in the context of rural Sierra Leone, where communities perceive water to be free. Ensure that the strategy address both: <ol style="list-style-type: none"> the revenue and human and logistic resources at the district level to support community and school WASH services; and The community capacity to sustain WASH services and the willingness and ability to pay for O&M costs. Explore the opportunities for linking WASH to programs and partners focusing on income-generation, in particular, to benefit from the VSLA schemes to support community services such as WASH O&M. 	UNICEF WASH in consultation with WASH stakeholders, in particular MBSSE and MLGRD	Medium
	<p>4.2. Present the proposed strategy to stakeholders at the upcoming WASH Sector Review for discussion and validation</p>	Ministry of Water Resources and Ministry of Health and Sanitation with support from UNICEF SLCO	Medium

SR5. Enhance the understanding of, and focus on, equity

Conclusions	Actions for Consideration	Responsibility	Level of priority
Efficiency, Gender, equity, and human rights C5.1 and C5.4	<p>5.1. Hold consultations with in-country partners and provide support as needed on how to enhance the gender and equity dimensions of the interventions on the ground</p> <ul style="list-style-type: none"> • This should contribute to: <ul style="list-style-type: none"> i) analysing current practices in the ASWA-SL implementation and identifying opportunities for better addressing equity beyond traditional measures (i.e. % of committee members who are women) and contribute to transforming gender roles; and ii) Identifying ways of integrating the identified opportunities into ongoing implementation and reporting. iii) addressing underlying social norms that prevent women and other marginalized groups (e.g. persons living with disabilities) from assuming more leadership roles. 	UNICEF WASH, gender focal point within UNICEF and implementing partners	
	<p>5.2. Include globally accepted (SDG 5) indicators that go beyond quantitative tracking of women vs. men in community groups (e.g. by looking at ratio of decisions adopted from women's perspectives, or the influence of women on economic allocations).</p>	UNICEF WASH, gender focal point within UNICEF and implementing partners	Medium

SR6. Engage in enhancing the technical capacity of the private sector and IPs vis-à-vis quality WASH service provision.

Conclusions	Actions for Consideration	Responsibility	Level of priority
Effectiveness C2.1, Efficiency C3.2	<p>6.1. Support the MWR to hold consultative meetings with sector MDAs and IPs to identify specific actions/capacity building activities.</p> <ul style="list-style-type: none"> • This would also i) address the challenges associated with the seasonality of water sources; and ii) develop guidelines for cost effective methods for improved survey and design of piped systems. • UNICEF should contribute to improving the technical capacity of the national private sector and IPs for siting of wells and borehole as well as survey and design of piped systems. • The WASH MDAs and UNICEF should utilise the guidance provided in the NRWSSP to improve national standards, capacity building and planning of activities at district level, and the adherence to national standards and focus on water quality in all new WASH engagements. 	UNICEF WASH SLCO and Ministry of Water Resources	Medium

OPERATIONAL RECOMMENDATIONS

OR1. Collect and update dynamic WASH data in ASWA-SL communities

Conclusions	Text of the Recommendation	Responsibility	Level of priority
Effectiveness C2.1 and C2.3, Efficiency C3.1 and C3.2, Sustainability C4.1.	<p>Engage with Akvo or similar expertise to facilitate and expand the use of the Digital WASH Platform for data collection on sanitation through the district WASH Teams and IPs.</p> <p>a) UNICEF WASH has supported MWR in the development of tools for monitoring water services such as the water point mapping; however, the monitoring of sanitation uptake and effectiveness of the CLTS approaches and maintaining the ODF status has not yet been addressed at scale.</p> <p>b) UNICEF should support MoHS in operationalising monitoring system for tracking sanitation uptake and sustainability and enforce the use of these tools by target Districts and the IPs engaged in UNICEF programmes.</p>	UNICEF WASH Ministry of Water Resources Ministry of Health and Sanitation	Medium

OR2. Operationalise tools for monitoring sanitation uptake.

Conclusions	Text of the Recommendation	Responsibility	Level of priority
	OR 2.1 Utilise the monitoring results to improve strategies and planning for sanitation upscale and sustainability.	Ministry of Health and Sanitation	Medium
	OR 2.2 Lead the mobilization of the District team and monitoring compliance with the reporting protocol.	Ministry of Health and Sanitation	Medium

OR3. Collect and use data on unit costs systematically.			
Conclusions	Text of the Recommendation	Responsibility	Level of priority
Efficiency C3.1	<p>OR 3.1 improve the existing systems for tracking of implementation results including costs to provide data and full transparency on the actual cost of implementation and reporting on unit costs.</p> <ul style="list-style-type: none"> Address any changes during program implementation in actual unit costs and setting of targets to ensure that targets correspond to budgets, and implementation is adjusted according to the most appropriate technical options. A good overview and more distinct attributes are needed to understand unit costs and should clearly link to definition of indicators used for measuring outputs to limit misinterpretation during the design scoping or under-targeting. 	UNICEF WASH	Medium
	<p>OR 3.2 Make Programme costs per beneficiary available</p> <ul style="list-style-type: none"> Organize a consultation with HQ Evaluation Office and Programme Division to discuss how to better report programme cost that could be used in future evaluations when assessing the cost effectiveness and VfM of future interventions. Include average cost per beneficiary in all future WASH proposals 	UNICEF CO UNICEF RO	Medium
	<p>OR 3.3. Document any result-level changes made to targets during implementation so as to enhance the transparency of the M&E system when targets are changed.</p>	UNICEF SL CO (WASH Section and P&M)	

OR4. Document and verify the programme contribution to policy changes.

Conclusions	Text of the Recommendation	Responsibility	Level of priority
Effectiveness, C2.2, Gender, equity, and human rights C5.6, Impact C6.2.	<p>OR4.1 Improve the existing systems for tracking the implementation results to include reporting on policy change</p> <ul style="list-style-type: none"> • Hold a consultation with the RO to identify the conceptual framework and related variables to assess the contribution of some country office programme (involving WASH) to policy change • Establish a clear road map for policy engagement and policy change and ensure that the reporting on influence on policy change be less anecdotal. Policy change is a highly complex process, with external influencing factors, and many stakeholders involved; this needs to be better monitored and documented so contributions can be adequately attributed to UNICEF and other partners • This should include tracking actions related to the enabling framework, the costs involved and other contributions such as expertise and support to networking. • Ensure that current monitoring formats (i.e., the tracking table), which only look at outcomes and do not clearly describe specific inputs from ASWA-SL, be adapted so as to include an additional table that could: <ul style="list-style-type: none"> a) clearly identify the UNICEF contributions (financial, expertise, networking etc) to the enabling environment and policy change vis-à-vis other contributions and b) chart these incremental actions. 	UNICEF RO (Eval. and WASH), UNICEF SLCO WASH Section	Medium

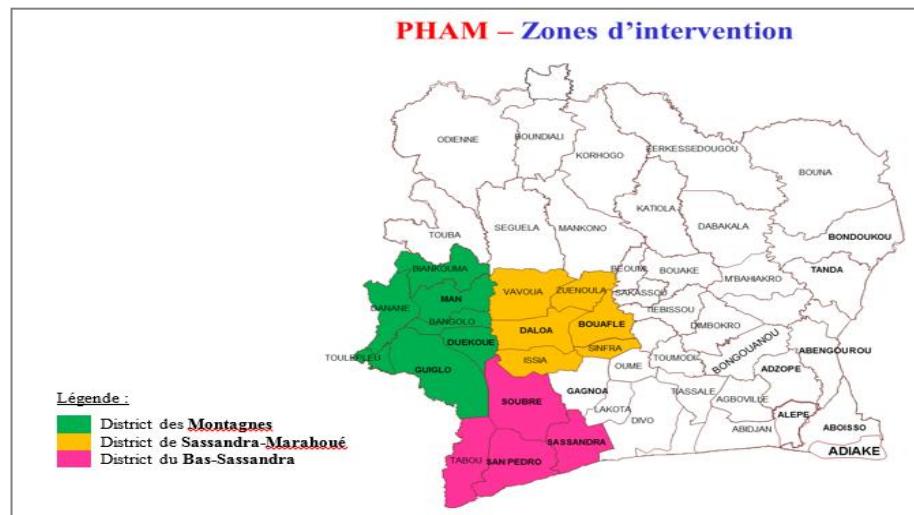
13 APPENDICES

Appendix 1: Terms of Reference

Côte d'Ivoire and Sierra Leone Terms of Reference

1. Object of Evaluation

Within the scope of the new UNICEF regional evaluation strategy for West and Central Africa, which aims to maximize collaboration and learning across CO in the region as well as to reduce transaction costs associated with the commissioning of evaluations, this summative evaluation will focus on two programmes implemented in two different countries: the Sanitation component of the “Hydraulic and Sanitation Programme for the Millennium” (PHAM) in Côte d'Ivoire and the “Accelerating Sanitation and Water for All (ASWA)” in Sierra Leone. More details on the two programmes can be found below.



Programme 1: “Hydraulic and Sanitation Programme for the Millennium” (PHAM) in Côte d'Ivoire

Figure 25: Map of sites targeted by PHAM

The sanitation component of the Hydraulic and Sanitation Programme for the Millennium (PHAM) in Côte d'Ivoire, which is the object of this evaluation, is an integral part of the interventions of the cooperation programmes (2012-2016 and 2017-2020) between the Government of Côte d'Ivoire and UNICEF in the area of Water, Sanitation and Hygiene (WASH). The overall goal of the PHAM's sanitation component was to contribute to equitable and sustainable access of women and children to sanitation and hygiene services in stability and emergency situation. It was implemented from June 2013 to August 2018 including a no-cost extension period from June 2017 to August 2018. It targeted 750,000 persons from 1,650 villages in 8 regions of West and Central West identified based on their high practice of open defecation. The results of the 2012 DHS-MICS show that more than half of the rural population (56.5%) practiced open defecation against 5.8% of the urban population. The programme covered localities in the following

regions: Cavally, Gbokle, Guemon, Upper Sassandra, Nawa, Marahoué, San Pedro and Tonpki (see Figure 1).

The programme aimed to contribute to the following main results: (i) the elimination of open defecation in the targeted localities; (ii) the adoption of good hygienic practices such as hand washing and (iii) the use of improved latrines. It was supporting the government's efforts to reach the contextualized targets of the Millennium Development Goals (MDG 7). In the sanitation sub-sector, the goal was to increase the percentage of people with access to improved sanitation to 60%. The project also aimed to contribute in the longer term to: (i) a better fulfilment of the right of children to a healthy environment; (ii) reducing inequalities between urban and rural areas regarding sanitation and; (iii) improving the conditions of child survival and development.

PHAM's interventions are based on the Community-Led Total Sanitation (CLTS) approach implemented in three main stages: (i) identification and pre-triggering, (ii) triggering and (iii) post-trigger monitoring. The main strategies for implementing the programme included: behaviour change communication to generate sanitation demand and promote adoption of appropriate hygiene and sanitation practices; capacity building of local actors (bricklayers and youth associations) for the construction of sanitation facilities; and the strengthening of community dynamics to ensure the involvement of different stakeholders in the implementation, monitoring and sustainability of the programme's achievements.

It was co-financed by the European Union and UNICEF. Its implementation was carried out by the Technical Ministries in charge of sanitation and hygiene and in collaboration with Non-Governmental Organizations (NGOs), namely International Rescue Committee (IRC), Red Cross Côte d'Ivoire (CRCI), French Red Cross (CRF) and Panafrican Intergovernmental Water and Sanitation Agency for Africa (EAA). The PHAM collaborated also with the local leaders who were in charge of community social mobilization for hygiene behaviour change, the youth associations and bricklayers who contributed to the construction of latrines, and departmental and village CLTS committees that supported and monitored the process of eliminating open defecation. The departmental committees included the territorial administration (prefectures, sub-prefectures), the decentralized bodies of the ministries in charge of sanitation, health and education and community leaders.

For more details, please look at the PHAM logical framework (Annex 1).

Programme 2: The “Accelerating Sanitation and Water for All” Programme in Sierra Leone

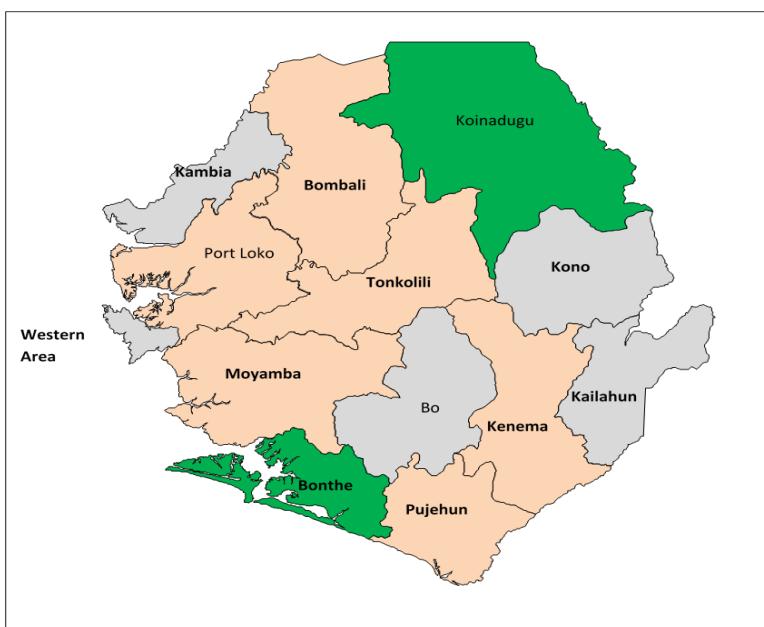


Figure 26: Map of sites targeted by ASWA (by District)

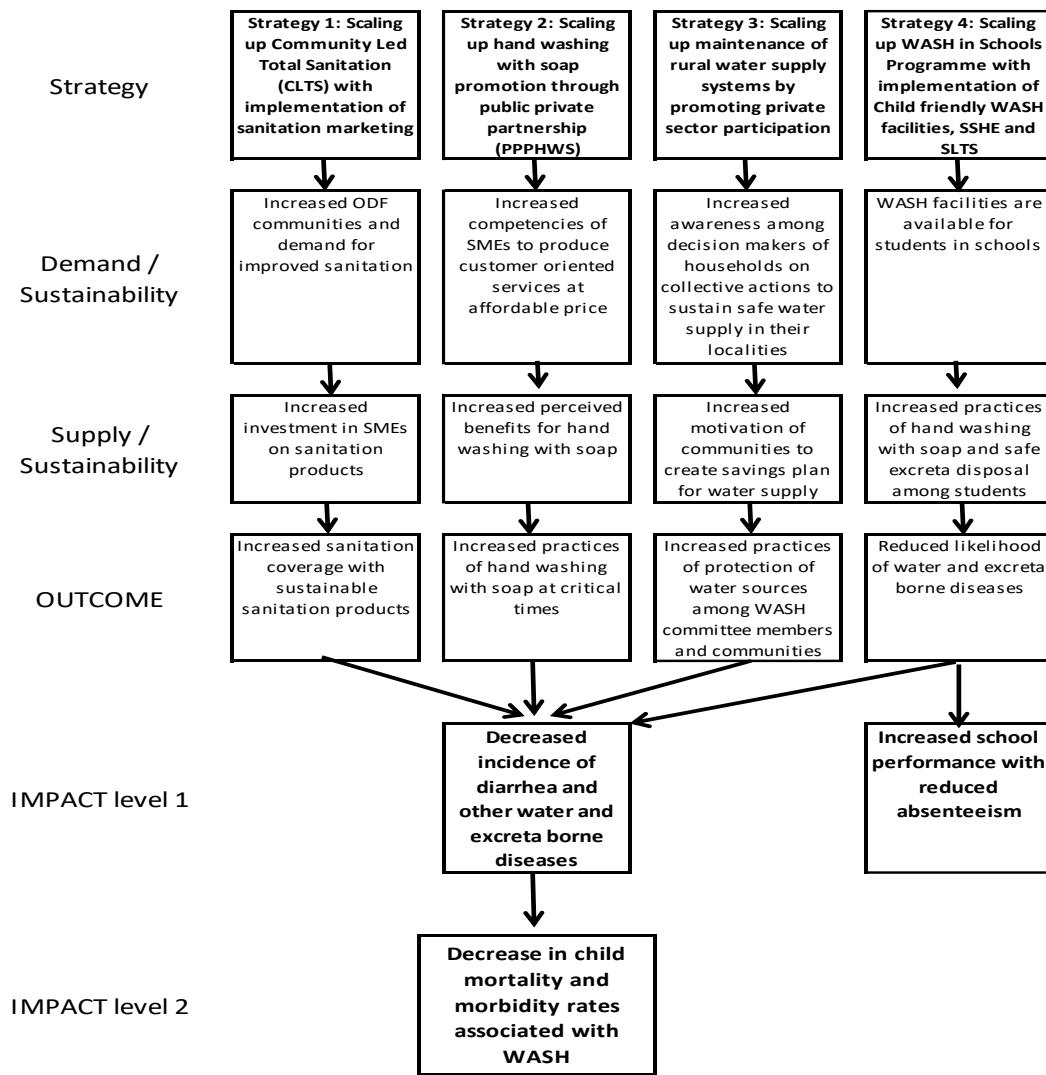
In 2010, data from the WHO/UNICEF Joint Monitoring Programme (JMP) indicated that Sierra Leone’s progress towards achieving key 2015 Millennium Development Goal (MDG) Water and Sanitation targets was slow and that the country was at risk of not meeting the targets. The Sierra Leone National Water and Sanitation Policy (NWSP, 2010) had set national targets for sanitation (66%) and water supply access (74%) applicable to both rural and urban areas. The JMP study indicated there was a wide disparity between urban and rural access to improved sources of drinking water. In rural areas, access to safe water needed to increase by 28 percentage

points (from 35% to 63%), whilst the access in urban areas was already above the set target. Progress on sanitation was also off-track. According to the JMP study, to meet the 2015 target, sanitation coverage needed to increase from 23% to 61% in urban areas and from 6% to 53% in rural areas.

THEORY OF CHANGE

The outcome mapping below illustrates the most likely steps on the pathway to community change and consequently desired health benefits having an impact on lives of children (Figure 1).

Figure 1: ASWA Theory of Change (Sierra Leone)



Assumptions about change resulting in a desired outcome are derived from assessments of prior interventions on similar strategic approaches in Sierra Leone. These evidence-based assumptions include:

Scaling up CLTS and sanitation marketing (evidence based on CLTS evaluation and Sanitation marketing study)

1. That community are motivated to commit funds towards sanitation and move up sanitation ladder.
2. That the local councils' authority on sanitation (DHMT) commit to the process of implementing sanitation options and creating enabling environment to market sanitation products.
3. That the national government leads the process in revising and implementing the public health ordinance.

Scaling up hand washing with soap through public private partnership (evidence based on KAP and baseline survey PPPHWS)

1. That national government commits to improving business environment on soap industries (i.e. tax reduction)
2. That small-scale enterprises access capital at affordable rate and markets are accessible.
3. That stakeholders in hygiene and sanitation coordinate closely under the guidance of MOHS

Maintenance of rural water supply systems with increased participation of the private sector (evidence from hand pumps spares supply chain study)

1. That stake holders will identify appropriate maintenance technology that is socially acceptable and affordable.
2. That Communities will be assisted by Local Councils to establish mechanisms to meet the costs of O&M with the willingness and ability of the community to operate, maintain and manage the chosen option.
3. That the Government will provide sufficient support to institutions that train pump mechanics, operators and managers of community systems.

SSHE and water supply (evidence from PPPHWS study and CFS)

1. That SMC and SHC ability to maintain sanitation and water facilities is sustained.
2. That stake holders will identify appropriate maintenance technology that is socially acceptable and affordable.
3. That catchment community have access to water and sanitation facilities to ensure the sequence of behaviour change of pupils both in school and at home.
4. That soap is available in schools.

In 2012, UNICEF Sierra Leone in partnership with the government of Sierra Leone (GoSL) commenced support for the implementation of the “Accelerating Sanitation and Water for All in Sierra Leone Programme” (ASWA) in a bid to support the country to achieve the WASH-related targets of the MDGs and the then active Government Poverty Reduction Strategy Paper II (PRSP II). The goal of the programme is to achieve improved child health, survival rates and well-being and contribute to a reduction of diarrhoea incidence among children under age of five by accelerating the achievement of MDG 7⁹⁶. The programme purpose is to accelerate water and sanitation coverage through four major areas of focus, namely:

- Accelerating sanitation and water coverage to meet MDG targets;
- Strengthening national sector development;
- Institutional strengthening and capacity building; and
- Ensuring the sustainability of systems and behaviours.

⁹⁶ MDG7: Ensure environmental sustainability (specific target: to halve the proportion of the universal population without sustainable access to clean and safe drinking water and basic sanitation by 2015)

The programme outputs⁹⁷ are to achieve:

- Improved coverage in sustainable rural sanitation and water supply, including both domestic and institutional (schools and health centres);
- Improved drinking water quality;
- Improved hand washing and sanitation practices;
- Improved hygiene practices amongst students and teachers in rural schools;
- Enhanced WASH sector service delivery capacities

Specific interventions at the community level include support towards Community Led Total Sanitation (CLTS), hand washing with water and soap, access to improved water source and household water treatment, and WASH in Schools. It used the CLTS approach which was aligned to UNICEF Sierra Leone's community engagement strategy for delivering community-based services.

In Sierra Leone, the DGIS WASH program is being implemented in the districts of Bonthe and Koinadugu (later split into Koinadugu and Falaba). As of April 2019, 150 water points had been rehabilitated, 411,674 households reached with water treatment services using approved techniques (chlorine, filter, boiling, SODIS), 900 communities supported to become open defecation free (ODF), 428 latrines and 214 water points constructed/rehabilitated in 214 schools.

The programme supports the construction/rehabilitation of individual hand dug wells to improve access to safe water. However in the course of the programme implementation, the method to achieve this objective was slightly modified to include the drilling of deeper and motorized boreholes with reticulation systems and capabilities as well as gravity flow schemes to serve surrounding schools, health care facilities and communities from shared source. The programme ensures the sustainability requirements of WASH facilities and behaviour change are addressed as outlined in the sustainability compact. It is currently being implemented by UNICEF, in collaboration with the GoSL, through non-governmental organizations, local WASH partners and the private sector in the Bonthe, Koinadugu⁹⁸ and Falaba districts.

The project is scheduled to close in December 2019. UNICEF now seeks the services of an external evaluation team to carry out the evaluation of the programme.

⁹⁷ The specific outputs with indicator values are outlined in annex two.

⁹⁸ Please see map in Annex III

The evaluation will focus on interventions supported by UNICEF and implemented by its implementing partners in the three districts (Koinadugu, Falaba and Bonthe). The evaluation team will be provided with a real time mapping of all interventions carried out by the UNICEF implementing partners and the program direct beneficiaries. The team will also be provided with all relevant contractual and programme documentation including copies of agreements, certificates of completions, training reports, field monitoring visit reports, quarterly program reports and real-time analysis data from the digital monitoring platform.

The evaluation will take into consideration the current total population and population groups of interest to UNICEF in the three districts. The 2015 National Census population projections indicate that in 2019, Koinadugu (before it was split) will have an estimated total population of 456,140 (226,832 female and 229,308 male); and number of children under age five of 52,214 (25,964 female and 26,250 male). Other estimates based on the census put children under age one at 18,246, pregnant women at 18,702 and women of child bearing age at 101,263. The National Census population projections put the 2019 total population of Bonthe at 219,218 (110,164 female and 109,054 male); and number of children under age five at 30,344 (15,243 female and 15,101 male). Other estimates based on the Census put children under age one at 8,329, pregnant women at 8,537 and women of child bearing age of 46,224.

Although the evaluation will attempt to gauge the impact of the program on the entire target population, it will place emphasis on the impact of the program on children (girls and boys) under age five, adolescent girls and boys, and women. Given this, it will assure the optimal participation of children under age five, adolescent girls and boys and women by ensuring that their opinions on their priorities needs, and on the program design, results and challenges are fully captured. The evaluation will also ensure the participation of other stakeholders including male household heads, out-of-school children, local community leaders, members of WASH management committees, teachers, school management committee members, community health workers, health facility staffs, and religious leaders.

2. Evaluation purpose

This summative evaluation has two main goals that are accountability and organizational learning in the field of sanitation and hygiene for PHAM and water, sanitation and hygiene for ASWA.

- In terms of **accountability**, the evaluation will allow for reporting on the results achieved by the two programmes vis-à-vis not only the two donors (European Union for PHAM and **DGIS** for ASWA) but also the populations that are supposed to benefit from their implementation.
- In terms of **organizational learning**, the purpose of this evaluation is to document good practices and lessons learned from the implementation of the two programmes to inform decision-making on scaling up the different approaches adopted during implementation and to formulate new strategies (or improve existing strategies).

The evaluation will meet the information needs of its intended users as indicated in the Table 1 below.

Table 8: Overview of evaluation Users and Uses

Users	Uses Côte d'Ivoire	Uses Sierra Leone
Water, Hygiene and Sanitation Programmes of UNICEF Country Offices in Côte d'Ivoire and Sierra Leone	Develop the programme strategy note for the next programming cycle (2021-2025).	Document lessons from and best practices that can inform future WASH program & replication
Child Survival & Development (CSD), Communication For Development (C4D) Programmes and Planning, Monitoring & evaluation (PME) Section of UNICEF Côte d'Ivoire	Incorporate best practice and draw on lessons learned to improve the performance of future interventions in the field of sanitation.	To incorporate best practice and draw on lessons learned to improve future interventions in sanitation &hygiene related behaviour change
National level sanitation authorities	Take decisions and develop strategic orientations for the elimination of open defecation (OD) practice, including the allocation of human, material and financial resources based on the evidence generated by the evaluation.	Use lessons learnt from the innovative approaches employed in the two districts to inform development of national OD roadmap. Use best practice lessons to accelerate CLTS implementation country wide towards national SDG targets Use the finding to adjust national CLTS strategy if necessary
Territorial authorities	Adjust and optimize the monitoring mechanism of the national OD elimination programme based on the lessons learned from the evaluation.	Adjust district lead monitoring approaches to enhance quality program delivery and development of district lead sustainability plans
Donors and other Development partners (European Union for PHAM and DGIS for ASWA)	Influence the future design and scale-up of CLTS Programmes. Inform the allocation of financial resources for CLTS in the near future.	Influence the future DGIS design and scale-up of WASH Programmes Inform DGIS future allocation of financial resources in the

	This evaluation is going to complement the WASH evaluation (more global in focus) commissioned by the European	WASH domain in the near future
Partner NGOs and other Civil Society Organisations	Build on the evidence generated by the evaluation to improve performance in the implementation of sanitation projects / interventions.	Strengthen capacity where it is lacking – especially in on inculcation of community-based sustainability of installed WASH facilities

3. Evaluation Objectives

This evaluation aims to achieve the following specific objectives:

- Document the achievements and challenges of the sanitation component of the PHAM programme not only in the two countries where country visits will be conducted (Cote d'Ivoire and Sierra Leone) but also among the remaining 8 countries targeted by the DGIS-funded regional programme (these will be the object of a desk review);
- Identify lessons learned at strategic and operational level;
- Document good practices in eliminating open defecation;
- Formulate recommendations for the consolidation of the gains of the CLTS approach as well as in respect to scaling up the best practice;
- Contribute to the strengthening of national evaluation capacities.

The ASWA evaluation will also pursue the following specific objectives

- Assess the extent of coverage of the programme interventions in relation to WASH programme related needs both in terms of geographic coverage, and numbers of children and women supported as against numbers of children and women in need.
- Assess the quality of the services provided, in relation to relevant national and international standards, giving special attention to humanitarian and gender quality benchmarks.
- Assess the effectiveness of programme partnerships and coordination, particularly between UNICEF and its implementing partners and all partners working in WASH programming at local, district and national levels.
- Assess the relevance and effectiveness of the various strategies and approaches employed by UNICEF partners during each stage of the programme life-cycle.
- Assess the social appropriateness and acceptability of the programme design and approaches and explain related beneficiary and stakeholder perceptions in this regard and in terms of the overall programme.
- Assess the extent of programme compliance to the UNICEF policy and guidelines on the prevention of sexual exploitation and abuse (PSEA).

4. Evaluation Scope

4.1. Thematic scope

a. PHAM (Côte d'Ivoire)

The evaluation will focus on the sanitation component of the PHAM programme in Côte d'Ivoire, paying particular attention to the interventions implemented to eliminate open defecation and to improve individual and collective hygiene conditions.

b. ASWA (Sierra Leone)

Evaluation will focus on the whole WASH package delivered by implementing partners in the targeted communities in the three districts.

4.2. Geographical scope

a. PHAM (Côte d'Ivoire)

The evaluation of the sanitation component of the PHAM will focus on the analysis of the implementation of the programme across its 1,650 intervention villages located in the regions of Cavally, Gbokle, Guemon, Haut-Sassandra, Nawa, Marahoué, San Pedro and Tonkpi.

b. ASWA (Sierra Leone)

In Sierra Leone, the DGIS WASH program is being implemented in the districts of Bonthe and Koinadugu (later split into Koinadugu and Falaba). As of April 2019, 150 water points had been rehabilitated, 411,674 households reached with water treatment services using approved techniques (chlorine, filter, boiling, SODIS), 900 communities supported to become open defecation free (ODF), 428 latrines and 214 water points constructed/rehabilitated in 214 schools.

The evaluation will focus on interventions supported by UNICEF and implemented by its partners in these three districts. (.. The evaluation team will be provided with a real time mapping of all interventions carried out by the UNICEF implementing partners and the programme direct beneficiaries. The team will also be provided with all relevant contractual and programme documentation including copies of agreements, certificates of completions, training reports, field monitoring visit reports, and quarterly programme reports. In addition to the two districts benefiting from the programme, the evaluation will identify other districts with similar characteristics that have been exposed to WASH interventions coordinated by other development partners. The specific criteria for selection of the comparison districts will be discussed and agreed on at a later stage.

4.3 Chronological scope

a. *PHAM (Côte d'Ivoire)*

The evaluation will cover programme activities implemented between June 2013 and August 2018 in the targeted villages.

b. *ASWA (Sierra Leone)*

The evaluation will cover the period between 2012 (year when the UNICEF Sierra Leone Country Office started supporting the GoSL in the implementation of the Programme) to December 2019 (end date of the Programme).

5. Evaluation Context

a. *PHAM (Côte d'Ivoire)*

Improving hygiene and sanitation conditions is one of Côte d'Ivoire national priorities as well as one of the development goals pursued both at the regional level (ex. with such initiatives as AfricaSan) and global level (MDG7 and SDG6). Access to a healthy environment is also one of the widely established and internationally recognised children's rights. As part of the initial report on the implementation of the African Charter on the Rights and Welfare of the Child (ACERWC, 2014), a recommendation was also made to the Government of Côte d'Ivoire to facilitate access to sanitation for a better realization of children's rights to health and adequate housing conditions.

A Sanitation sectoral policy was made available in June 2015 and a rural sanitation sub-sector development strategy is currently being finalized. CLTS is considered as one of the strategies for generating sanitation demand and the end of open defecation as an indicator of improved rural sanitation.

According to latest available national data (MICS, 2016), open defecation is still practiced by 21.8% of population. In rural areas the OD rate is fifteen times higher (39%) compared to urban settings (2.6%). The initial report on the implementation of the ACRWC, as well as the evaluations and studies carried out in Côte d'Ivoire attest to a slow progress and low level of public investment in the field of sanitation in general and in rural areas in particular. In addition, a series of socio-anthropological studies carried out on sanitation in Côte d'Ivoire highlight the importance of age-group relationships, gender relations and socio-economic factors in the implementation of projects aimed at improving hygiene and sanitation conditions (Brou et al., 2018).

The programme has a monitoring system based on a database of households benefiting from project interventions established in 2015 by NGO partners as a prelude to its implementation. In addition, a survey was conducted in 2018 among beneficiary households to measure the results of the program. It should also be noted that two sustainability checks of the achievements of the Support Program for Accelerated Access to Water, Hygiene and Sanitation (PADEHA) in other regions of the country, as well as a review of CLTS were conducted. The results of these studies, reviews and surveys will be provided to the evaluation team to inform the analysis of the context and results of CLTS implementation in the programme target areas.

b. ASWA (Sierra Leone):

An estimated 46,000 deaths, 60% being children <5 are recorded every year due to illness relating to access to safe clean water, poor sanitation and hygiene practices in Sierra Leone . In the two districts, the situation is exaggerated by the high levels of illiteracy, repugnant traditional influences, and rural poverty and reflective in the low levels of investments in sanitation infrastructures at HH levels, in public facilities, and the community in general. Open defecation (OD) is still widely practiced, and resultant effect is the occurrence of both vector and water borne related disease i.e. dysentery, diarrhea, and malaria commonly recorded in PHU attendance data.

The DGIS programme is critical in addressing above gaps. Its outputs will directly contribute to the achievements of both country and global WASH key result areas of water, sanitation, hygiene, WASH in the institutions and WASH in emergencies. The program shall also fulfil the vision of realization of the human rights to water and sanitation. The proposed project interventions are aligned to Sierra Leone country office and government 2018/2019 signed rolling work plan. The thrust of the programme is to contribute to the reduction of services inequality between the urban and rural areas; for example, national access to improved water sources is 85% and 48% for urban and rural respectively and WASH gender related issues.

Besides addressing the WASH gap, this programme will also focus on addressing WASH gender issues related to women, boys and girls within the rural communities. The programme will therefore prioritize and work towards reducing the negative consequences attributed to lack and /or inadequate provision of gender sensitive WASH services. Undoubtedly, lack of safe water supply makes women and girls walk long distances to collect water which in turn takes physical toll on them, especially pregnant women. A lack of access to suitable sanitation facilities results in women going for long periods without relieving themselves, damaging their health, and exposing them to the risk of assault as they search for privacy. Lack of WASH in schools causes girls to miss school days; makes students more vulnerable to harassment; and hinders children from gaining the knowledge, attitudes and skills they need for good personal hygiene and health. In addition, lack of adequate water in health care facilities, particularly for hand washing has been associated with high risk mortality among new-borns where mothers or birth attendants do not WASH their hand properly. The programme therefore prioritized the identification of gender information gaps as well as to ensure data is disaggregated. Women, men, girls and boys were also fully involved in the design, implementation and maintenance of WASH infrastructure and services.

The sustainability of the programme activities is anchored on the Sierra Leone sustainability compact which is an effort by the government to improve the functionality and use of WASH services in the country, including the strengthening of private sector and fostering Public-Private partnership and part of UNICEF efforts to improve sustainability in all its programme. UNICEF is also supporting the government in scaling up decentralized, participatory monitoring which brings together the devolved government leaders,

technical teams, women and children in appraising the implementation processes as well as verification of the completed work before hand over to the government.

The project will contribute directly towards the achievement of SDGs 4 and 6 by enhancing access to safe water, safe learning environment through promotion of improved hygiene and sanitation practices. When achieved, it will contribute towards the government's post Ebola recovery strategy under health, water and education pillars.

6. Evaluation Criteria

The evaluation of the sanitation component of the PHAM project will be guided by 5 criteria and that of the Sierra Leone Program will be guided by 6 (the 5 from Côte d'Ivoire plus 1 additional).

Table 9: Evaluation Criteria

PHAM Côte d'Ivoire	ASWA (Sierra Leone)
1. Relevance 2. Effectiveness 3. Efficiency 4. Sustainability 5. <i>Gender, Equity and Human Rights (not a criterion per se but rather a cross-cutting dimension)</i>	1. Relevance 2. Effectiveness 3. Efficiency 4. Sustainability 5. Gender, Equity and Human Rights 6. Impact

While the evaluation in Sierra Leone will be guided, among others, by the impact and gender, equity and human rights criteria, the evaluation in Côte d'Ivoire will not include the impact criterion due to the lack of data on the long-term effects of the programme. In addition, the evaluation in Côte d'Ivoire will not include the gender, equity and human rights as a criterion per se but it will consider this to be a cross-cutting dimension of the data collection and analysis underlying all the other criteria.

7. Evaluation Questions

In order to achieve the goals of the evaluation, the evaluation team should address the following questions (grouped by criteria). Some of the questions will be common to both evaluations (this will be clearly indicated by the boxes at the top of each criterion).

I. Relevance

Questions on both PHAM and ASWA

- 1.1. To what extent were the different needs of men and women and the specific needs of children (girls and boys, persons with disabilities, elderly people, marginalised households) identified during the design of the two programmes? What were these needs?
- 1.2. To what extent did the PHAM programme (Sanitation component) and the ASWA Programme respond to these identified needs prior to the start of activities in the field?
- 1.3. To what extent was the capacity of communities to support latrine construction (PHAM) and implementation of the WASH package (ASWA) taken into account in the design of the project?
- 1.4. To what extent were the programme intervention strategies appropriate to promote a collective awareness of the need to end OD (PHAM) and improve WASH practices (ASWA)?
- 1.5. Was the program design adequate to bring about the intended results – outputs, outcomes and impact?
- 1.6. Was the programme logical framework and processes adequate to measure its outputs, outcomes, and impact? Were expected results clearly stated and measurable through identifiable indicators?
- 1.7. To what extent was the distribution of roles and responsibilities among key implementation stakeholders appropriate for the achievement of expected results?
- 1.8. To what extent were the programme interventions age and gender appropriate?
- 1.9. To what degree were the programme interventions culturally and socially appropriate?

Question on ASWA (SL) only

- 1.10. Were the programme management arrangements and institutional framework adequate to bring about the desired change?
- 1.11. How appropriate and aligned are the programme interventions to the needs as expressed in relevant UNICEF Sierra Leone Country Programme Documents, Government national and sub-national plans, International policy and standards?
- 1.12. Were the programme purpose and overall objectives consistent with and supportive of the UNICEF Sierra Leone Country Programme Documents (2010 – 2014; 2015 -2019); National WASH Sector Strategic Plan (2010); Government Poverty Reduction Strategy Papers (2008-2012; 2013-2017); Sanitation and Water for All commitments; National Decentralisation Policy (2004); District Development Plans; DGIS policy priorities?
- 1.13. To what extent were beneficiaries involved in the development of the programme?
- 1.14. To what extent did the programme reach all the targeted geographical areas and population groups?

II. Effectiveness

Questions on both PHAM and ASWA

- 2.1. To what extent have the expected results of the two programmes been achieved?

- 2.2. How do key sanitation indicators change in the targeted districts compare with the baseline?
- 2.3. What are the intended and unintended results in terms of improving the health and WASH status (ASWA) and of sanitation (PHAM) among the targeted women, children and communities?
- 2.4. What internal factors to UNICEF (including the programme monitoring and evaluation mechanisms, the level of key actors' participation and ownership, the quality of service delivery and demand for services with consideration of equity and gender) contributed to or hindered the successful attainment of the expected results? Which factors were the most important?
- 2.5. What external factors to UNICEF (e.g. political, emergency or socio-cultural barriers) contributed to or hindered the successful attainment of the expected results? Which factors were the most important?

Questions on ASWA (SL) only

- 2.6. How do changes in key WASH and health-related indicators in the targeted districts compare with those in the control districts, over the programme timeframe?
- 2.7. How has the programme contributed to improvement in the skills and knowledge of beneficiaries and platforms?
- 2.8. How extensive, effective, and efficient was the transfer of knowledge and skills?
- 2.9. How effective was partner collaboration with local, district and community structures and how did this contribute to the results achieved?
- 2.10. What affected the approach adopted by UNICEF and its implementing partners and how did UNICEF and its partners address these barriers?

Questions on PHAM only

- 2.10 To what extent has the programme improved access to sanitation and individual and collective hygiene conditions in the intervention areas?
- 2.11 To what extent has the programme contributed to behavioural change in sanitation and personal and collective hygiene in the targeted communities?
- 2.12 What are the strengths and weaknesses in the implementation of the CLTS approach, particularly with regard to: (i) the specific context of the targeted villages (socio-cultural, economic, physical environment, etc.); (ii) programme coordination and monitoring mechanisms as well as participation of key stakeholders; (iii) demand for and appropriate use of toilets; (iv) the provision of sanitation services within the targeted communities; (iv) taking into account the varied needs of men and women, the specific needs of children and the special situation of vulnerable groups (poor families, the elderly, people with disabilities)?
- 2.13 What are the induced (expected and unexpected) effects of the implementation of CLTS, in particular with regard to: (i) the transfer of skills in the area of construction; (ii) strengthening community dynamics in favour of improving living conditions; (iii) contribution to national results in reducing the practice of open defecation?

III. Efficiency

Questions on both PHAM and ASWA

- 3.1 To what extent have human, financial and material resources been:
 - adequate (in quantity)
 - sufficient (in quality) and
 - distributed / deployed in a timely manner for the implementation of the programme?
- 3.2 What is the programme cost per beneficiary?
- 3.3 To what extent did programme interventions overlap with or duplicate similar interventions funded by other agencies?

Question on ASWA (SL) only

- 3.4 How strong was partnership with the private sector and what were the efficiency gains?
- 3.5 How appropriate were the technologies used and to what extent did they result in efficiency gains?

Question on PHAM only

- 3.6 What are the main differences between the open defecation elimination strategies adopted by implementing partners (NGOs) and which one of them has been the most efficient in terms of cost-effectiveness?
- 3.7 To what extent have programme management and coordination mechanisms streamlined the use of resources for the elimination of open defecation?

IV. Sustainability

Questions on both PHAM and ASWA

- 4.1 To what extent did the programme identify and build on existing national and local, civil society and government capacities, structures and mechanisms?
- 4.2 To what extent were the programme achievements sustained and for the most recent ones how will they be sustained when external support ends?
- 4.3 How can stakeholders ensure programme achievements are sustained?
- 4.4 What new capacities or mechanisms were established or restored at national, district or community levels?
- 4.5 To what extent are these capacities and skills being actively used and what are the indications of sustainability?
- 4.6 What are the main strengths and challenges in respect to the sustainability of the programme achievements at the community and institutional levels?

Question on ASWA (SL) only

- 4.7 What new governance instruments were established or updated (e.g. sector policies, strategy, plans, standards and guidelines) and to what extent are they being used and producing results?
- 4.8 To what extent have UNICEF and its implementing partners ensured government, district and community ownership of the programme?
- 4.9 To what extent have the capacities of national and local government (district and town councils), relevant line ministries, agencies, departments, structures (e.g. sector working groups) been built and positioned to effectively implement similar programmes. To what extent have systems been strengthened?
- 4.10 To what extent do partners, especially government have the financial capacity and resources to sustain the programme benefits?

Question on PHAM only

- 4.11 To what extent were functional mechanisms in place that aimed (i) to maintain the open defecation free status in the targeted localities and (ii) to sustain the achievements of the programme?
- 4.12 To what extent has CLTS approach adopted within the PHAM programme enabled men, women, youth, and communities in targeted villages to internalise the recommended behavioural changes in the areas of health, hygiene and sanitation?
- 4.13 What are the preconditions for scaling up the approach to end open defecation and enhance access to improved sanitation?

V. Gender, Equity and Human Rights

Questions on ASWA

- 5.1 To what extent did the design of the two programmes address gender, equity and human rights issues including the particular situation of vulnerable households (elderly persons, persons living with disabilities, very poor household)?
- 5.2 To what extent were vulnerable/marginalized women, children, people living with disabilities, elderly people, child and female headed households as well as vulnerable/marginalized communities reached by the programmes and their specific barriers of access to the provided services addressed?
- 5.3 To what extent did the programme interventions respond to issues of gender, age and socio-economic differentials between and within population groups in the target areas?
- 5.4 How has various equity gaps, changed over the programme lifespan? What is the contribution of the programme to these changes? To what extent have disparities in urban and rural access to improved sources of drinking water and access to sanitation been impacted?

Although these questions (5.1-5.4) will not be specifically addressed in a “gender questions” chapter by the Cote d’Ivoire report (PHAM), the evaluators will need to take them into account during their overall gender, equity and human rights analysis of the issues discussed in all the other evaluation questions.

Question on ASWA (SL) only

- 5.5 To what extent did the programme interventions target specific vulnerable and underserved areas of the country for significant acceleration of water and sanitation coverage and improved hygiene and sanitation practices?
- 5.6 How strong was the integration of gender, child protection and education with WASH programming and what were the successful integration strategies used?
- 5.7 To what extent have instruments and platforms (e.g. institutional, legal, regulatory frameworks and policy etc.) supported by the programme helped address the specific needs of the disadvantaged groups?
- 5.8 To what extent did the programme contribute to protecting children, boys and girls of different ages?
- 5.9 How and to what extent did UNICEF and partners' interventions contribute to addressing gender issues and the prevention of sexual exploitation and abuse?

VI. Impact

Question on ASWA (SL) only

- 6.1. Is there any lasting change that could be identified in the lives and wellbeing of women, children, families, communities and government targeted by the Programme?
- 6.2. To what extent have the programme contributed to changes in mortality attributable to WASH among children under age of five in the target communities?
- 6.3. To what extent have the programme contributed to changes in the diarrhoea morbidity among children under age of five in the target communities?
- 6.4. To what extent have the programme contributed to changes in absenteeism rates in target schools?
- 6.5. What is the programme contribution to the decentralisation of WASH functions at local government level?
- 6.6. To what extent and in what ways have programme interventions contributed to changes in direct and targeted government funding allocations for water, sanitation and hygiene?
- 6.7. To what extent have the programme contributed to improvements in WASH management and maintenance systems at community, district and national levels.

8. Methodology

The evaluation will be conducted using a participatory and inclusive approach to provide relevant answers to key evaluation questions. It will be conducted according to [UNEG Norms and Standards for Evaluation](#). It will integrate human rights, gender and equity in accordance with the [relevant UNEG guidelines](#) and will be conducted in accordance with the UNEG [Code of Conduct](#) and [Ethical Guidelines](#) for Evaluation.

The evaluation will be based on mixed methods of data collection and analysis. Relevant data should be collected from programme beneficiaries and key implementation stakeholders and partners (implementing NGOs, Rural Sanitation Directorate, Directorate of public and environmental health, partners from decentralised technical bodies, the territorial administration, the water, hygiene and sanitation sector group, UNICEF, etc.).

The Secondary data collection/desk review will include a review of programme reports; surveys and monitoring reports; reports of similar evaluations, research and studies; and databases. The Desk Review should include other 8 countries that form part of DGIS funded ASWA Programme (Benin, CAR, Côte d'Ivoire, Ghana, Guinea, Liberia, Mali and Mauritania). The documentation in question, which will be made available by the Regional Office, would consist of 18 reports: the evaluation team would need to consult two reports for each one of the 8 countries. The two documents, which will make the object of a comparison, would be the original program proposal developed by each country in 2013 and the consolidated report published in 2018 which cover the last five years of implementation. For Sierra Leone, the most recent Sustainability Check will also be made available to the evaluation team.

Primary data collection will involve qualitative and quantitative data collected through key informant interviews, focus group discussions, community meetings, and observation. The evaluation of the ASWA programme will also include the administration of a survey. On the other hand, the PHAM evaluation will include the analysis of the secondary data collected through the beneficiary survey carried out in 2018. The evaluation team is expected to engage relevant stakeholders including staffs of the Ministry of Water Resources, District and Local Councils, and the Ministry of Health and Sanitation.

The triangulation of data from the different sources will be performed to guide the elaboration of evaluation findings. The iterative process of dialogue with the main implementation stakeholders that will be initiated during the evaluative process will allow to reconstitute the theory of change of the sanitation component of the PHAM program.

The evaluation team is expected to propose a detailed evaluation methodology that uses mixed methods and rests on the collection of quantitative and qualitative data designed to provide quality data that adequately respond to the evaluation purpose and objectives. The evaluation team will develop, design and compile appropriate research indicators and questions and data collection tools. The evaluation team will provide detailed sampling strategy/criteria for the selection of sample communities, households and individuals. Where relevant, the sampling technique should involve representative sampling adequate to detect changes using appropriate descriptive statistics. The Evaluation Reference Group (ERG) consisting of UNICEF, Statistics Sierra Leone (the country's Central Statistics Office), Ministry of Planning and Economic Development, Ministry of Water Resources and Ministry of Health and Sanitation officials will review and approve the sampling strategy and if necessary propose modifications or changes. The evaluation team will describe and finalise the evaluation methodology in an inception report comprising a detailed work plan with time frame and milestones.

The evaluation team must obtain ethical clearance from the Sierra Leone Ministry of Health and Sanitation and respect the ethics of research while working with diverse population groups. The team must respect the right of institutions and individuals to provide information in confidence and ensure that sensitive data are not traced to their source

Building on the Terms of Reference, the desk review and preliminary interviews, the evaluation team will produce **an inception report** for each one of the countries which will present the detailed evaluation methodology. The report will be structured as follows:

- Introduction presenting the object of the evaluation, its purpose, scope and objectives;
- Preliminary results of the documentary review summarized in the evaluation context section;
- Evaluation criteria and questions refined through the desk review and preliminary interviews;
- Detailed description of the evaluation methodology, including relevant data collection methods that will allow answering evaluation questions and sampling strategy;
- Evaluation matrix presenting for each evaluation criterion and each evaluation question planned data collection methods and data sources.
- Methods of data analysis;
- Limitations of the evaluation and section on ethics and ethical considerations
- Work Plan
- Annex: List of the main documents reviewed; Proposed data collection tools; Initial list of key informants.

The evaluation team is expected to produce **two reports**. The evaluation report shall not exceed **50 pages** (without Annexes) for the PHAM evaluation, and **150 pages** (without Annexes) of the ASWA evaluation and shall include an **executive summary** of maximum 5 pages. All paragraphs shall be numbered, and every conclusion and recommendation will need to make explicit reference to the paragraph number which they are based on. The evaluation team will make sure to follow the UNICEF [Evaluation Reports Standards](#), as well as the [checklist](#) used for the independent assessment of the quality of UNICEF evaluation reports (meta-evaluation) through GEROS.

The main conclusions and recommendations of the evaluation will be disseminated in the form of "**policy brief**" of no more than 5 pages.

The evaluation report **validation workshop** will serve as an opportunity for the development of the action plan for the implementation of the main recommendations of the evaluation or "management response".

In addition, a **session to share lessons learned** from the management and conduct of the evaluation with the "Emerging Evaluators" and members of the National Monitoring and Evaluation Network (the RISE in Côte d'Ivoire and SLEMEA in Sierra Leone Overall, this workshop will be organized to contribute to strengthening national evaluation capacities.

9. Practical aspects of the evaluation

9.1 Evaluation team profile

The evaluation will be carried out by a team of evaluation consultants with extensive experience both at national and international level. In order to ensure that the results of the evaluation are available as soon as possible (the Côte d'Ivoire Country Office will need preliminary results in August 2019), it is envisaged that there will be two evaluation teams proposed by the same firm, each one going to one of the countries (Sierra Leone and Côte d'Ivoire) for more or less the same period. Should the same evaluation team conduct the evaluation, it is understood that data collection in Côte d'Ivoire will need to take place before the Sierra Leone country mission.

The team should also have a good knowledge of the country specific context of Sierra Leone and Côte d'Ivoire as well as of the WASH sector (and in the case of Côte d'Ivoire, of Sanitation more specifically). The team will work closely together to develop and implement an appropriate methodology and approach to address the evaluation questions and achieve the expected results of the evaluation. It will undertake necessary steps to make the evaluation of the sanitation component of the PHAM programme and the ASWA Program a learning exercise for "emerging evaluators".

9.1.1 Team leader

She/He will coordinate the evaluation team (as already indicated, it may be that the team leader coordinates two mini-teams) and accompany them in two different times and will ensure the design of the evaluation, the management of the evaluation process, the quality assurance and the delivery of the expected products in close collaboration with the other members of the team. She/He shall conduct the evaluation applying an approach that is conducive to the transfer of competencies to the national members of the evaluation team. She/He should have the following profile:

- Have at least Master's degree in social sciences (sociology, anthropology, social sciences, statistics or a related field);
- Have proven international expertise in multi-country evaluation and experience as a team leader;
- Preferably have also experience from multi-country evaluations;
- Have at least 10 years of international experience in evaluating programmes and projects in general and community-based interventions in particular. Evaluation experience in the field of WASH (including hygiene and sanitation) and related areas such as health, nutrition, communication for behavioural change and education would be an asset.
- Have a perfect command of quantitative and qualitative methods of research and evaluation methods based on equity, human rights and gender;
- Have excellent oral and written communication skills in French and English as well as skills in facilitation of participatory processes;
- Have work experience in West Africa and Ivory Coast and/or Sierra Leone preferably.

9.1.2 Evaluation team members

They will participate in all stages of the evaluation process and will be primarily responsible for collecting and analysing the data that will be used to establish the evaluative judgment. They will also contribute to the analysis of the national context and the hygiene and sanitation sector to contextualize the results of the evaluation. This will involve both secondary data analysis and qualitative interviews with beneficiary communities and key stakeholders involved in the implementation of the programme. This team of consultants should consist of at least three experts, including a Water (especially for the Sierra Leone part of the evaluation), and hygiene and sanitation specialist and an evaluation specialist. The Sierra Leone part of the evaluation will also require the employment of local enumerators (for the sake of enhancing the timely submission of deliverables, the proposal will need to indicate whether the same team or two different teams will be sent to the two countries for the field work). Overall, the evaluation team members should have the following profile:

- Have at least Master's degree in social sciences;
- Have at least 5 years of experience in evaluating development programmes and projects and WASH interventions in particular;
- Have a perfect knowledge of the WASH sector and the country specific context;
- Have a perfect command of quantitative and qualitative data collection and analysis methods;
- Have experience in the use of participatory appraisal techniques in data collection, sensitive to gender issues;
- Be familiar with the international literature and issues related to WASH and WASH in schools programming (for ASWA);
- Have excellent oral and written communication skills in French (Côte d'Ivoire) and English (Sierra Leone);
- Have excellent analytical, synthesis and writing skills
- Must have completed at least two high quality programme evaluations over the past 5 years, with both related to WASH programming in developing country contexts. (Provision of sample work is required). Experience of working in West Africa, specifically Côte d'Ivoire and Sierra Leone is desirable.
- The professionals with all the required competencies who also happen to be residents or citizens of Côte d'Ivoire and Sierra Leone will be given priority during the selection.

All international agencies applying would need to partner with a local organization and develop the capacity of the local agency to conduct this type of work. Joint teams of national and international consultants integrating women are strongly encouraged. The applying institution/consortium will be responsible for all local recruitments and logistical arrangements for field work. UNICEF will not provide any transportation or logistical support for field travel.

9.2 Evaluation Management

The evaluation will be jointly managed by the Planning, Monitoring and Evaluation Section of the UNICEF Côte d'Ivoire and Sierra Leone Country Offices, which will interact with the evaluation team and provide technical review and validation of intermediary deliverables as well as of the evaluation report (however, the contracting will be managed directly by the UNICEF Côte d'Ivoire Country Office). Both Country Office will work in collaboration with the WASH Section and the relevant Ministries in Côte d'Ivoire and, through the Sierra Leone Office, with stakeholders in Sierra Leone.

The Evaluation Reference Group will ensure the quality of the evaluation process, evaluation reports and policy briefs. It will also ensure the respect of UNEG and UNICEF ethical principles and evaluation standards. An "Emerging Evaluator" representative will be associated with the work of the Evaluation Reference Group in each country to gain hands-on experience in managing and conducting evaluations. The Regional Evaluation Advisor of the UNICEF Office for West and Central Africa and the Regional Adviser for WASH, as well as their national counterparts of the two countries concerned will contribute to the validation of the inception report and quality assurance of all other products of the evaluation.

a) Responsibilities of the Evaluation Manager (Chief M&E of the Côte d'Ivoire)

- Lead the management of the evaluation process (design, implementation, dissemination and coordination);
- Convene evaluation reference group (ERG) meetings;
- Provide quality assurance of the evaluation ToR, inception report, and draft and final evaluation reports and policy briefs;
- Coordinate participation in the evaluation design;
- Safeguard the independence of the exercise and coordinate the selection and recruitment of the external evaluator ensuring compliance to UNICEF technical and procurement processes and contractual arrangements and ensure a fully inclusive and transparent approach to the evaluation;
- Oversee the evaluation and ensure the evaluation process and the products meet quality standards and benchmarks;
- Connect the external evaluator with the wider programme unit, senior management and key evaluation stakeholders;
- Facilitate external evaluator access to all available data, information and documentation relevant to the evaluation;
- Provide the external evaluator with overall guidance and administrative support;
- In consultation with the Evaluation Reference Group (ERG) approve the deliverables, evaluate the external evaluators' work, and process payments based on quality delivery;
- Lead the dissemination of learning, results and findings within UNICEF and externally.

b) Responsibilities of the Evaluation Reference Group (ERG):

UNICEF will facilitate the set-up of an evaluation reference group to form strategic links between the evaluation team, UNICEF, and partner and government stakeholders. The ERG will comprise of the Evaluation Manager, the WASH Manager, Chief of SPPME, Deputy Representative (or OIC), Regional WASH Advisor, Regional Evaluation Advisor, Ministry of Water Resources, Sanitation Division of the Ministry of Health and Sanitation, Ministry of Planning and Economic Development, Statistics Sierra Leone and two representatives of programme implementing partners. The ERG will:

- Provide guidance on the evaluation approach and methodology;
- Link the evaluation team to secondary information sources and relevant organisations involved in similar programming;
- Provide technical and operational advice to the evaluation manager and the evaluation team;
- Review the evaluation ToR, inception report and draft and final evaluation reports to ensure compliance with the UNICEF-Adapted UNEG Evaluation Reports Standards;
- Review and provide comments on the quality of the evaluation process and products;

- Assist in the development of strategies and methods to translate results from evaluation efforts into policy and practice;
- Assist in dissemination of evaluation findings and recommendations.

c) Responsibilities of the evaluation team:

The responsibilities of the evaluation team will be imbedded in their contractual agreement with UNICEF and are expected to include the following:

- Design the detailed evaluation methodology, including the sampling strategy;
- Collect and analyse preliminary secondary data;
- Develop and propose the evaluation indicators and questions;
- Design the evaluation tools ensuring alignment to the evaluation questions through comprehensive evaluation matrix;
- Recruit and train the numerators (likely to be more numerous in the Sierra Leone portion of the evaluation) and other evaluation team members on the implementation of the evaluation, including the evaluation protocol, ethics and tools;
- Plan and coordinate logistics for data collection in accordance with the selected methodology;
- Pilot test and finalise the evaluation strategy and tools;
- Collect and analyse primary data to measure relevant evaluation indicators;
- Develop the data entry template and ensure the training of data entry clerks and quality data entry as necessary;
- Collect and analyse additional secondary data to measure relevant evaluation indicators and obtain explanation to quantitative data results;
- Analyse, triangulate and interpret data and develop a comprehensive evaluation report;
- Share key findings and insights from the evaluation as agreed with the ERG.

9.3 Indicative Evaluation Work Plan

The evaluation is planned for a period of 160 working days (60 + 100) during the period from July to December 2019. This period includes the desk review, field work, elaboration of evaluation reports and policy briefs, as well as all required workshops. The Table 3 below presents the indicative work plan for the evaluation.

Table 10: Indicative Evaluation Work Plan

Expected outcome	Person in charge	Timeline
ToRs are published	Evaluation Manager (Côte d'Ivoire and Sierra Leone CO)	June 2019
Technical and financial proposals are produced	Evaluation team (firm or consortium of consultants)	July 2019
Selection process of retained evaluation team is conducted	Evaluation Manager	July 2019
Evaluation contract is signed	Evaluation Manager	July 2019
Inception meeting is held	Evaluation manager	July 2019

Detailed evaluation methodology is produced (Inception report)	Evaluation team leader supported by national consultants	July 2019
Evaluation methodology is reviewed and amended	ERG	July 2019
The inception report is finalised based on the review of the ERG	Evaluation team leader supported by national consultants	August 2019
Data is collected and analysed	Evaluation team leader supported by national consultants	August-September 2019
Preliminary results of the evaluation are shared	Evaluation team leader supported by national consultants	October 2019
Draft evaluation report + PowerPoint Presentation are produced	Evaluation team leader supported by national consultants	October 2019 (Côte d'Ivoire) November 2019 (Sierra Leone)
Draft report is presented and approved Evaluation Management Response Plan is produced	ERG	November 2019 (Côte d'Ivoire) December 2019 (Sierra Leone)
Final evaluation report, executive summary and policy brief are produced (for each country separately)	Evaluation team leader supported by national consultants	December 2019 (Côte d'Ivoire) December 2019 (Sierra Leone)
Lessons learnt from the implementation and management of the evaluation are shared with the national evaluation network	Evaluation team leader supported by national consultants	January 2020(Côte d'Ivoire) January 2020 (Sierra Leone)

9.4 Deliverables

1. **Inception report:** The Team Leader will submit an inception report with a detailed narrative of how the evaluation will be carried out. The detailed requirements for the inception report are specified in section 8. Methodology.
2. **PPT on preliminary findings during the debriefings held with stakeholders in Sierra Leone and Côte d'Ivoire after the fieldwork (validation session)**
3. **Evaluation Reports:**

- a) **Two draft evaluation reports** (more details provided below) integrating the stakeholders' observations during the debriefings (this deliverable will be shared with the EGR members for comments).
- b) **Two full final evaluation reports integrating all comments provided by the ERG members** (max. 50 pages for Côte d'Ivoire and max. 100 pages for Sierra Leone excluding annexes).
 - o For the Sierra Leone report: Three coloured hard copies and an electronic copy of the full evaluation report in English will be produced and delivered/sent to the ERG.

The full final report shall be structured as follows:

- o Table of Contents including List of Tables and List of Figures
- o Executive Summary (covering all main sections of the report: background, methodology and process, main findings and recommendations, lessons learnt)
- o Acknowledgements (all who supported the evaluation and provided strong cooperation and collaboration during the process)
- o List of abbreviations and acronyms
- o Introduction (object of the evaluation, evaluation purpose, objective, scope, intended uses and users)
- o Evaluation context
- o Methodology, including sampling strategy and data analysis methods
- o Key findings (by criterion – each individual question will need to be answered) + Preliminary Conclusions
- o Final conclusions
- o Lessons Learnt
- o Recommendations (strategic and operational, maximum 5 priority recommendations)
- o Annexes (ToRs; List of persons interviewed and sites visited; List of documents consulted; More details on methodology, such as data collection instruments, including details of their reliability and validity; Evaluators biodata and/or justification of team composition; Evaluation matrix; Results framework)

- c) **Two Policy briefs** (max. 5 pages). The policy brief will include the main findings of the evaluation. One electronic copy of the final summary report shall be produced and delivered/sent via email in English.
- d) **Two PowerPoint presentations:** The Team Leader will produce and deliver two PowerPoint presentations of the main evaluation findings (from the summary reports); both presentations will be shared with the ERG members.

4. **Workshop on lessons learned in each one of the two countries (Sierra Leone and Côte d'Ivoire):**
The Team Leader will organise one/two lessons learnt workshop that will contribute to strengthening national evaluation capacities.
5. **Raw data:** All raw data and complete transcripts from primary data collection will be delivered to UNICEF. All original research instruments with their recorded field data, transcripts and where applicable copies of all excel files/databases used for data analysis will be delivered to UNICEF to validate the analyses. UNICEF shall be entitled to all property rights, including but not limited to patents, copyrights, trademarks, and materials that bear a direct relation to, or made in consequence of, the services provided. At the request of UNICEF, the consultant shall assist in securing such property rights and transferring them to UNICEF in compliance with the requirement as is applicable.

Below is the indicative list of evaluation activities for which an estimation of the level of effort for each country will need to be included in the technical proposal. completion is presented here:

Activity	Côte d'Ivoire		Sierra Leone	
	Team Leader	Rest of the Team <i>(provide more details for each member of the team)</i>	Team Leader	Rest of the Team <i>(provide more details for each member of the team)</i>
Signing the contract				
Discussions with UNICEF and the Evaluation Reference Group (ERG) on the programme approach, theories and activities				
Preliminary literature review				
Design of tools for quantitative and qualitative data collection				
Submission of detailed inception report to UNICEF and the ERG				

Discussions and finalization of evaluation methodology, and data collection tools with UNICEF and the ERG				
Comprehensive literature review				
Comprehensive field work involving qualitative and quantitative data collection				
Initial data analysis and identification of findings				
Residual field work involving qualitative data collection for explanations to findings from quantitative data collection				
Comprehensive data analysis and writing of first draft of report				
Comments and feed-back on the first draft report by UNICEF and ERG				
Incorporation of comments and production of second draft report				
Comments and feedback on the second draft report				
Preparation of third draft of report for validation				
Validation session of the third draft report, incorporation of validation comments				
Preparation of Policy brief and Full Final Report and PowerPoint Presentation				
Submission of Policy brief and Full Final Report and PowerPoint Presentation to UNICEF and ERG				

The activities and timeframes listed are indicative. Applying institutions/consortia should propose their respective activities and timeline for completion of the key deliverables in their proposals. Evaluation team should ensure adequate time is provided for UNICEF and the ERG to review key deliverables.

9.5 Contract modalities

The selection of the Evaluation firm/Consortium of evaluators will be made on the basis of the technical and financial offers that shall be submitted according to the UNICEF procedures. The technical and financial offers will be scored using 100 points scale, including 30 points for the financial offer and 70 points for the technical proposal.

The technical proposal should cover the following aspects:

- Understanding of the terms of reference (including the multi-country nature of this evaluation)
- Evaluation methodology
 - Methodological reference framework to address evaluation questions
 - Data collection and analysis methods in both countries (Côte d'Ivoire and Sierra Leone)
- Organizational capacity of the evaluation team to execute the mandate:
 - Evaluation work plan
 - Roles and responsibilities of evaluation team members
- Expertise and Experience of the proposed evaluation team (CV of no more than 3 pages per person)
 - Expertise and experience of the Team Leader (including ability to manage multiple teams at the same time)
 - Expertise and experience of other team members

A copy of an/two evaluation reports produced by the Team Leader during the last 3/5 years should be attached to the application.

The Technical Proposal shall be submitted in a separate file or envelop, clearly named/marked: "Technical Proposal." No financial information should be included in the Technical Proposal. The technical offers will be noted according to the assessment grid provided in Table 4.

Table 11: Technical offer assessment grid

Number	Assessment criteria	Sub-criteria	Score	Total score
1	Understanding of ToRs	Understanding of ToRs (<i>according to the value added of the technical proposal</i>)	10	10
2	Methodology	Methodological reference framework to address evaluation questions (<i>according to the relevance of the methodological framework for answering evaluation questions</i>)	10	25

		Data collection methods (<i>according to the relevance and consistency of the proposed data collection methods for answering the evaluation questions</i>)	8	
		Data analysis methods (<i>according to the relevance and consistency of the proposal for answering the evaluation questions</i>)	7	
3	Organizational capacity of the evaluation team to execute the mandate	Evaluation Work Plan (<i>according to the relevance of the the proposed timeline for the delivery of expected outputs</i>)	5	10
		Roles and Responsibilities of the Evaluation Team members (<i>according to the appropriateness of the distribution of roles and responsibilities for the achievement of expected results within the required time</i>)	5	
4	Expertise and experience of the Team Leader	Expertise of the Team Leader (<i>according to the conformity with the required profile and the expertise evaluation in general and in equity-focused and gender and human rights-based evaluations</i>)	7	13
		Experience of the Team Leader (<i>according to the quality of the evaluation report submitted as part of the proposal, and the consultant's experience in evaluation in general and in the targeted thematic area in particular and as an evaluation team leader</i>)	6	
5	Expertise and experience of the Evaluation team members	Expertise of the team members (<i>according to the conformity with the required profile, the expertise in the targeted thematic area, knowledge of the national context and evaluation and research methods</i>)	6	12
		Experience of the team members (<i>according to the experience in evaluation in general and in the thematic targeted area</i>)	6	

Total Score attributed to the technical proposal	70 points
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The **financial proposal** shall contain the Offer with cost breakdown and must cover all expenses related to the evaluation including the desired remuneration, accommodation costs, travel costs (economy class), travel insurance and others. The IT and communication equipment necessary for the proper implementation of the evaluation will be the responsibility of the Evaluation firm/Consortium of consultants. It should be noted that the costs of organizing meetings or technical workshops will be borne by UNICEF. The financial offer will be presented separately from the technical offer and clearly named/marketed Financial Proposal. It will only be examined for candidates whose technical offer is considered technically valid (minimum score of 50 points).

The service fees will be paid in three instalments as follows:

- 30% upon the submission of the inception report of two evaluations;
- 30% upon the submission of the preliminary reports of two evaluations;
- 40% after validation of the final report, executive summary and policy brief for both evaluations

Payments will be made only for work completed satisfactory manner and accepted by UNICEF.

Alternatively

- 15% upon the submission of inception report Country 1;
- 15% upon the submission of inception report Country 2;
- 15% upon the submission of draft report Country 1;
- 15% upon the submission of draft report Country 2;
- 15% after validation of the final report, executive summary and policy brief for Country 1;
- 15% after validation of the final report, executive summary and policy brief for Country 2.
- 10% after validation of the final synthesis note

The evaluation team can propose a different payment schedule in their proposal. This will be considered during the assessment of the proposal.

All proposals should be sent to UNICEF Cote d'Ivoire Country Office (please provide more details):

Annex 1

PROGRAMME D'HYDRAULIQUE ET D'ASSAINISSEMENT

POUR LE MILLENAIRE (PHAM)

COMPOSANTE ASSAINISSEMENT - FED/2012/308-723

Cadre logique avec les résultats atteints

	Logique d'intervention	Indicateurs objectivement vérifiables	Résultats atteints	Sources et moyens de vérification
Objectif général	Contribuer à la réduction de la pauvreté, de la mortalité et de la morbidité des populations dans les Régions du Nawa, du Gbôklé, de San Pedro, du Cavally, du Guémon, du Tonkpi, du Haut Sassandra et de la Marahoué.	Taux de mortalité des enfants de moins de 5 ans (réduction de 123 à 120 pour 1000 naissances vivantes)	Le taux de mortalité des enfants de moins de 5 ans est de 96 pour 1000 naissances vivantes en 2016 (MICS 2016)	DIPE (Ministère de la Santé et de la lutte contre le SIDA)
		Taux d'incidence des diarrhées chez les enfants de moins de 5 ans (Réduction de 17,9% à 16%)	Les incidences enregistrées des diarrhées chez les enfants de moins de 5 ans de 8,85% ⁹⁹	Rapport Annuel sur la Situation Sanitaire 2016 (RASS 2016)
Objectifs spécifiques	Améliorer durablement l'accès à l'assainissement et à l'hygiène des populations dans les Régions du Nawa, du Gbôklé, de San Pedro, du Cavally, du	Nombre de personnes utilisant les latrines améliorées (Au moins 330.000 personnes)	473.871 personnes utilisent des latrines améliorées selon le JMP ¹⁰⁰ (143,6%)	Rapports d'enquêtes CAP/JMP/ Rapports d'évaluation externe/Rapport narrative final du projet

⁹⁹ L'enquête MICS (ou EDS) n'a pas encore lieu et la donnée récente pour l'indicateur « Taux de mortalité des enfants de moins de 5 ans » n'est pas disponible. Un indicateur de proxy permettant d'apprécier la situation est présenté à la place ; c'est l'incidence enregistrée de la diarrhée chez les enfants de moins de 5ans. C'est un indicateur mesuré à partir des données routines et intégré dans le système d'information sanitaire. La dernière donnée validée est relative à l'année 2016.

¹⁰⁰ Latrine améliorée selon le JMP : La latrine à fosse avec dalle est une latrine à fosse sèche entièrement recouverte par une dalle ou plate-forme montée d'une cuvette. La dalle doit être solide et peut être fabriquée avec tout type de matériaux (béton, bois avec de la terre ou de la boue, ciment, etc.) tant qu'il couvre intégralement la fosse sans exposer le contenu de la fosse autrement que par le trou nécessaire à la défécation.

	Logique d'intervention	Indicateurs objectivement vérifiables	Résultats atteints	Sources et moyens de vérification
	Guémon, du Tonkpi, du Haut Sassandra et de la Marahoué.		204.926 personnes utilisent des latrines améliorées selon la définition du PHAM ¹⁰¹ (62%)	
		Nombre de ménages disposant de dispositifs de lavage des mains avec du savon (Au moins 38.000 ménages)	37.903 ménages cibles ont accès aux dispositifs de lavage des mains avec du savon (99.7%)	MICS/JMP/Rapports d'enquêtes CAP/Rapports annuels/ DAD et DHES
Résultat 1	La pratique de la défécation à l'air libre est éliminée dans au moins 800 villages cibles trois ans après le démarrage du Projet	Nombre de villages cibles FDAL (0 village au démarrage du projet, 170 villages 1 an après le démarrage du projet, 550 villages 2 ans après le démarrage du projet, 800 villages 3 ans après le démarrage du projet et 850 villages FDAL dans les régions du projet 1 an après la fin du projet	559 villages FDAL 1 an après le démarrage 704 villages FDAL, 2 ans après le démarrage 823 villages ont été déclarés FDAL ,3 ans après le démarrage du projet	Rapport d'enquêtes CAP/Rapport narratifs trimestriels, annuels et final du projet/Rapports annuels DAD et DHES/ Rapport d'évaluation externe (mi-parcours, final)/Rapport d'évaluation nationale FDAL

101 Latrine améliorée selon le PHAM : Latrine à fosse recouverte d'une dalle étanche composée d'un(e) : assemblage de branches/planches recouvert de terre stabilisée, ou ; véritable dalle en ciment/béton, et d'une superstructure couverte (toit et murs) permettant l'intimité des utilisateurs.

	Logique d'intervention	Indicateurs objectivement vérifiables	Résultats atteints	Sources et moyens de vérification
Résultat 2	Au moins 330.000 personnes des villages cibles adoptent des bonnes pratiques d'hygiène (notamment le lavage des mains à l'eau et au savon / cendre) trois ans après le démarrage du programme	Nombre de ménages des villages cibles connaissant au moins 2 moments clés pour le lavage des mains à l'eau et au savon (Au moins 38.000 ménages)	38 376 ménages des villages cibles connaissent au moins 2 moments clés pour le lavage des mains à l'eau et au savon	Rapports d'enquêtes CAP/EDS/Rapports narratifs du projet/Rapports annuels DHES
		Nombre de ménages cibles disposant de dispositif de lavage des mains avec du savon (Au moins 38.000 ménages)	37 903 ménages cibles ont accès aux dispositifs de lavage des mains avec du savon	Rapports d'enquêtes CAP/EDS/Rapports narratifs du projet/Rapports annuels DHES/Rapport narrative du projet
		Nombre de comités ATPC formés sur la MVE (Au moins 375 comités dans le cadre du PHAM)	375 comités ATPC déclenchés ont été formés sur la MVE dans le cadre du PHAM	Rapports d'enquêtes CAP/ Rapports narratifs du projet/Rapports annuels DHES/Rapport narrative du projet
Résultat 3	Au moins 330.000 personnes des villages cibles utilisent des latrines améliorées trois ans après le démarrage du projet	Nombre de latrines améliorées construites (Au moins 22.000 latrines, 2 ans après le démarrage du projet, au moins 38.000 latrines 3 ans après le démarrage du projet, au moins 40.000 latrines 1	57 575 latrines améliorées selon le JMP construites, dont 18 339 latrines améliorées selon le PHAM construites, 2 ans après le projet 62.337 latrines améliorées selon	Rapports d'enquêtes CAP/Rapports narratifs du projet/Rapports d'évaluations nationales FDAL/Rapport d'évaluation externe

	Logique d'intervention	Indicateurs objectivement vérifiables	Résultats atteints	Sources et moyens de vérification
		<p>an après la fin du projet)</p> <p>Nombre de personnes dans les villages cibles (FDAL et non FDAL) utilisant une latrine améliorée (190.000 personnes 2 ans après le démarrage du projet ; 330.000 personnes 3 ans après le démarrage du projet ; 350.000 personnes 1 an après la fin du projet</p>	<p>le JMP ont été construites 3 ans après le démarrage du projet ; 25.609 latrines améliorées selon le critères PHAM</p> <p>150 000 personnes utilisent des latrines améliorées selon la définition du PHAM, 2 ans après le démarrage du projet</p> <p>3 ans après le démarrage du projet, 204.926 personnes des villages cibles utilisent des latrines améliorées selon la définition du PHAM contre 473.871 personnes selon la définition de JMP</p>	
Résultat 4	Au moins 1.000 paysans utilisent les sous-produits d'assainissement comme fertilisants agronomiques	<p>Nombre de ménages et paysans bénéficiant de micro-crédit (0 bénéficiaire au démarrage du projet ; 400</p>	<p>574 ménages et paysans ont bénéficié de micro-crédit, 2 ans après le démarrage du projet</p>	<p>Rapports d'enquêtes CAP/Rapports narratifs du projet/ Rapport d'évaluation externe</p>

	Logique d'intervention	Indicateurs objectivement vérifiables	Résultats atteints	Sources et moyens de vérification
		bénéficiaires 2 ans après le démarrage du projet ; 1000 bénéficiaires à la fin du projet).	A la fin du projet, 660 paysans ont adhéré et bénéficié de micro-crédit contre 1000 prévus	
		Nombre de paysans encadrés (0 paysan au démarrage du projet ; 400 paysans 2 ans après le démarrage du projet ; 1000 paysans à la fin du projet	A la fin du projet, 1.119 paysans ont été encadrés sur 1000 prévus	Rapports d'enquêtes CAP/Rapports narratifs du projet/ Rapport d'évaluation externe
		Superficies emblavées avec les fertilisants bio (0 ha au démarrage du projet ; 10 ha 2 ans après le démarrage du projet ; 30 ha à la fin du projet	242,5 ha ont été emblavés avec les fertilisants bio, 2 ans après le démarrage du projet A la fin du projet, 262,58 ha ont été emblavés avec les fertilisants bio.	Rapports d'enquêtes CAP/Rapports narratifs du projet
		Quantité d'urine collectée (0 m ³ au démarrage du projet ; 400 m ³ 2 ans après le démarrage du projet ; 900 m ³ à la fin du projet	230 m ³ d'urine ont été collectées 2 ans après le démarrage du projet	Rapports d'enquêtes CAP/Rapports narratifs du projet

	Logique d'intervention	Indicateurs objectivement vérifiables	Résultats atteints	Sources et moyens de vérification
			A la fin du projet, 346,3 m ³ d'urine ont été collectées	
		Quantité de fèces hygiénisés produite (0 T au démarrage du projet ; 200 T 2 ans après le démarrage du projet ; 600 T à la fin du projet.	48.8 T de fèces ont été hygiénisés, 2 ans après le démarrage du projet A la fin du projet, 132,6 T de fèces ont été hygiénisés	Rapports d'enquêtes CAP/Rapports narratifs du projet
Résultats 5	Coordination, suivi, supervision, évaluation et visibilité du projet sont assurés	Nombre d'enquête CAP réalisée (1 enquête)	1 enquête CAP réalisée	Rapports d'enquêtes CAP
		Nombre d'enquête de base (baseline) réalisée (1 enquête)	1 enquête de base réalisée	Rapport d'enquête de base (Baseline)
		Nombre d'études spécifiques d'évaluation conduits 2 (1 évaluation de la phase pilote du Sanmark et 1 évaluation de documentation des résultats du projet)	2 études spécifiques (1 étude de documentation de l'expérience pilote du SANMARK et une enquête finale du programme) ont été réalisées	Rapports d'étude
		Nombre de mission de suivi et de supervision des activités du projet organisées	Plus de 16 000 missions réalisées par les agents de la DAR, les animateurs, superviseurs,	Rapports de missions/Rapports narratifs du projet

	Logique d'intervention	Indicateurs objectivement vérifiables	Résultats atteints	Sources et moyens de vérification
		sur le terrain (16.000 missions)	coordonnateurs des ONG et les administrateurs et spécialistes WASH de l'UNICEF	

Appendix 2: Evaluation Matrix

Evaluation Matrix

DAC	EQ	Indicators	Data Collection Methods	Data Sources						Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist		
Relevance	1. How aligned are the program interventions to the needs as expressed in relevant UNICEF Sierra Leone Country program documents, Government national and sub-national plans, and international policy and standards? (Old EQ 11)	1.1 Degree of alignment with and contribution to, relevant UNICEF Country program objectives and outcomes?	Document Review	PD, UNICEF Country Docs						Document review comparing PD and UNICEF Country Docs
		1.2 Degree of alignment with and contribution to, relevant Government national plans	Document Review, KII	PD, National Planning Docs	NWASH					Document review comparing PD and national WASH Plans combined with information from NWASH KIIs
		1.3 Degree of alignment with and contribution to, relevant sub-national (district) plans	Document Review, KII	PD, District Plans	DWASH					Document review comparing PD and Koinadugu and Bonthe District WASH Plans combined with information from DWASH KIIs
		1.4 Degree of alignment with principles expressed in relevant international WASH policy and standards	Document Review	PD, International WASH Docs						Document review comparing PD and key international WASH good practice Docs (including

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
	2. To what extent were the different needs and capacities of women and men and the specific needs of children (girls and boys), persons living with disabilities, elderly people, marginalized households) identified during the design of the program? (Old EQ 1, 3, 12)	2.1 Nature, types, and gender of participants in stakeholder consultations during program development and planning of activities	Document Review, KII, FGD	PD, inception phase report/ first progress report	UNICEF; NWASH, DWASH, Implementers	Community Leadershi p; women groups; youth groups, vulnerable groups, schools			treaties/conventions signed by Sierra Leone)
				PD, inception phase report/ first progress report	UNICEF; NWASH; DWASH				Document review analysing consultations reflected in PD triangulated with the responses from KIIs and FGDs on the respondents recollection of consultations
		2.3 Capacities of communities were assessed when defining the respective roles and responsibilities in the of communities in the program document, and outputs and activities to fill the identified gaps were	Document Review, KII, FGD	PD	UNICEF; NWASH; DWASH	Community leadership			Document review identifying and analysing the types of needs of different groups in PD triangulated with responses from KIIs on rationale

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
		included in the results framework							responses from KIIs and FGD on the adequacy of the capacity building
	3.	To what extent did the ASWA program components, outcomes, outputs, activities respond to the identified needs of the different groups (men, women, girls, boys, persons with disabilities, elderly people, marginalized households) in an inclusive manner in its design and planning? (Old EQ 2, 3, 8, 9)	3.1 Number and type of specific activities, outputs, indicators, and targets addressing the identified needs of different groups listed in the theory of change (ToC) and results framework (RF)	Document Review	PD; KII	UNICEF; NWASH; DWASH; Implementers			Document review analysing the ToC and RF in relation to the needs for different groups triangulated with KII responses
			3.2 Inclusion of needs of different groups in implementation arrangements, such as ToRs/ proposal docs/ contracts with implementing partners (by type of needs and type of groups)	Document Review, KII	PD, Contracts	Impl	UNICEF; Implementers		Document review analysing the implementation arrangements in relation to the needs for different groups triangulated with responses from KIIs on focus of implementation contracts
	4.	To what extent did the program interventions target specific vulnerable and underserved areas of the country for significant	4.1 Proportion of program target locations with low access to safe water, sanitation, and health services	Document Review, KII	PD, SSL Stats	DWASH			Document review and analysis of SSL data on WASH and health access in target locations compared with control areas

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
5. To what extent were the program intervention strategy for achieving the desired WASH outcomes and impact outlined in the program document logical and coherent? (Old EQ 4, 5, 6)	acceleration of water and sanitation coverage and improved hygiene and sanitation practices? (Old EQ 40)	4.2 Proportion of program target locations with high rates of water borne diseases (e.g. cholera) and diarrhoea	Document Review, KII	PD, SSL stats, MoHS Stats	DWASH				Document review and analysis of SSL and MoHS data on WASH and diseases in target locations compared with control areas
		4.3 Proportion of program target locations with high levels of poverty	Document Review, KII	PD, SSL Stats	DWASH				Document review and analysis of SSL data on poverty in ASWA target districts compared with control districts
	(Old EQ 4, 5, 6)	5.1 Type of use of context and needs analysis findings in the intervention strategy	Document Review, KII	PD					Document review combined with KII respondents views on the intervention strategy and the needs analysis
		5.2 The clarity of the strategy and framework linking activities and outputs to the intended results (outcomes and impact) in the ToC and RF	Document Review, KII	PD					Document review combined with KII respondents views on the intervention strategy and the ToC and RF
		5.3 Proportion of indicators at outcome and impact level being SMART	Document Review, KII	PD	UNICEF; NWASH; DWASH; Implementers				Document review combined with responses from KIIs involved in M&E and reporting and

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		5.4 Correlation and coverage of indicators vis-à-vis the intended outcomes and impact 6. To what extent was program management arrangements and the distribution of roles and responsibilities among implementing partners clear, and aligned with their mandates and capacities? (Old EQ 7, 10)	Document Review, KII 6.1 Nature and type of roles assigned to involved implementing partners and the consistency with their mandates, objectives, priorities, and capacities 6.2 Level/ degree of shared understanding between IPs, DWASH, communities and schools on their respective roles and responsibilities	PD Document Review, KII, FGD KII, FGD	UNICEF; NWASH; Implementers UNICEF; NWASH; DWASH; Implementers NWASH; DWASH; Schools; Implementers	Community leadership; Schools Community leadership; Schools			their views on the definition of indicators Document review combined with responses from KIIs involved in M&E and reporting and their views on the indicators Analysis of implementation roles assigned in PD as compared to WASH Sector Docs combined information from Impl Records and triangulation with the views of KII and FGD respondents to assess consistency and capacity issues Analysis of the perceptions of the KII and FGD respondents understanding of roles as compared to the roles

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
									assigned in the Program and the mandates in the sector framework
		6.3 Representation of main stakeholders at technical and decision-making levels in national and district project steering committees (by type of stakeholders)	Document Review, KII	PD, Impl Records	UNICEF; NWASH; DWASH; Implementers				Analysis of representation in technical and decision making prescribed in the PD and in Practice as revealed in 'Impl Records' and as revealed by KII respondents
Effectiveness	7. To what extent did the program reach all the targeted geographical areas and population groups? (Old EQ 13)	7.1 Number, location and proportion of communities reached compared to targets	Document Review, KII	PD, Impl Records	UNICEF; Implementers			x	Analysis of achievements according to 'Impl Records' versus targets in PD and cross checked with KIIs with UNICEF and Implementers
		7.2 Number of people reached compared to targets	Document Review, KII	PD, Impl Records	UNICEF; Implementers				Analysis of achievements according to 'Impl Records' versus targets in PD and cross checked with KIIs with UNICEF and Implementers

DAC	EQ	Indicators	Data Collection Methods	Data Sources						Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist		
		7.3 Number of vulnerable people reached compared to targets disaggregated by categories (incl. women, youth, elderly, people with disabilities, poor)	Document Review, KII, FGD	PD, Impl Records	UNICEF; Implementers	Community leadership ; Vulnerable Groups			x	Analysis of achievements according to 'Impl Records' versus targets in PD and cross checked with KIIs with UNICEF and Implementers and responses from FGDs with community leaders and vulnerable groups
		8. To what extent have the expected results of the program been achieved? (Old EQ 14, 15, 16, 19, 32, 39)	8.1 Proportion/percentage of achievement of set targets in number of women, girls, boys, and communities for each output	Document Review, KII, FGD, end line survey	PD, Impl Records	UNICEF; Implementers	Community leadership ; Women groups; Youth groups and Schools	no of persons/ communities reached by capacity building activities	x	Analysis of achievements according to 'Impl Records' versus targets for women, girls, boys and communities in PD and cross checked with KIIs with UNICEF and Implementers and responses from FGDs with community leaders, women groups, and schools

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
		8.2 Difference in key WASH indicators in the program area and control districts (rural and urban) at baseline and program completion in terms of:	Document Review, End line Survey, Facilities checklist	PD, Impl Records, SSL Stats,			WASH Indicators	Check of implemented facilities	Analysis of WASH Indicators at baseline (as revealed in PD, baseline records, SSL Stats) compared with end line (as revealed in 'End line Survey', 'Impl Records', recent SSL Stats and observations from Facilities Checklist) in program area compared to control areas
		- Percentage of people with access to safely managed water points	Document Review, End line Survey, Facilities checklist	PD, Impl Records, SSL Stats,			WASH Indicators	Check of water points	
		- Percentage of people with access to a safely managed toilet facility	Document Review, End line Survey, Facilities checklist	PD, Impl Records, SSL Stats,			WASH Indicators	Check of sanitation facilities	
		- Percentage of people with access to a handwashing facility on premises with soap and water	Document Review, End line Survey, Facilities checklist	PD, Impl Records, SSL Stats,			WASH Indicators	Check of sanitation/handwashing facilities	
		- Percentage of people washing their hands with soap after defecation	Document Review, End line Survey, Facilities checklist	PD, Impl Records, SSL Stats,			WASH Indicators	Observations on use of handwashing facilities	
		- Percentage of people reporting safe disposal of children's stools	Document Review, End line Survey, Facilities checklist	PD, Impl Records, SSL Stats,			WASH Indicators		
		- Number of communities declared Open Defecation Free (ODF)	Document Review, End line Survey	PD, Impl Records, SSL Stats, MoHS Stats			WASH Indicators		
		8.3 Beneficiary views on the quality and utility of the program outputs in their community	KII, FGD		Schools	Community leadership ; Women, Youth,			Analysis of responses from KIIs and FGD respondents on the

DAC	EQ	Indicators	Data Collection Methods See legend below	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
		8.4 Number and types of policies, plans, strategies, and guidelines that have been established, updated, or revised with support from ASWA – and stakeholder views on their quality and utility	Document Review, KII	PD, WASH Sector Docs	NWASH; DWASH				quality and utility of the outputs
		9. To what extent have WASH awareness and practices improved? (Old EQ 20, 21, 29, 30)	9.1 Proportion of beneficiaries who adopted safe hygiene practices including handwashing at critical times and use and upkeep of toilets compared to baseline at the following	Document Review, End line Survey, Facilities checklist	PD, Impl Records, SSL Stats,	DWASH; Implementers; Health Centres; Schools	Women groups; Youth; Schools	Hygiene indicators in Communities and Schools	Observations on hand washing and upkeep of toilets in Schools and Communities
									Analysis of data on handwashing at baseline and end line as revealed by SSL Stats and End line survey combined with

DAC	EQ	Indicators	Data Methods Collection	Data Sources						Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist		
		levels: - households - schools								responses from KIIs with District WASH, Implementers and personnel in Health Centres as well as responses from FGD with women and children
		- health clinics			Health Centres					
		9.2 Beneficiary views on changes in hygiene practices in their household, community, and school	KII, FGD		Schools	Community leadership; Women, Youth, Vulnerable Groups; Schools				Analysis of responses from KIIs and FGD respondents on their views on changes in hygiene practices
		9.3 Proportion of female students' using menstrual hygiene practices at schools and elsewhere and associated level of knowledge and likelihood of attending school	Document Review, KII, FGD, End line Survey, Facilities checklist	PD, Impl Records	DWASH; Implementers, Schools	Schools, Youth groups	use of menstrual hygiene	check of menstrual hygiene facilities	of menstrual hygiene facilities	Analysis of data on menstrual hygiene from SSL Stats and Impl Records compared with responses from KIIs with Districts, Implementers and Schools and FGD respondents from female teachers and pupils on awareness and use

DAC	EQ	Indicators	Data Collection Methods	Data Sources						Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist		
		10. To what extent has functional systems for operation and management of WASH facilities been put in place? (Old EQ 20, 21, 29, 30)	10.1 Proportion of water points that are functional	Document Review, End line Survey, Facilities checklist	PR, Impl Records, Stats	NWASH; DWASH; Schools	Community leadership	functionality of water points	check of water point functionality	of menstrual hygiene practices
				Document Review, End line Survey, Facilities checklist	PR, Impl Records	NWASH; DWASH; Schools	Community leadership; Schools	functionality of sanitation	check of sanitation functionality	Analysis of changes in functionality, use and upkeep of sanitation facilities in communities and schools in program areas as revealed by End line Survey and facilities inspections and responses from FGDs with WASH Committees and Caretakers as compared to general statistics on functionality of water points as revealed in MWR Stats/WPM data

DAC	EQ	Indicators	Data Methods Collection	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
									inspections and responses from School KIIs and FGDs with Schools and WASH Committees compared to general statistics/document review on sanitation facilities and responses from National, District KIIs
				10.3 Number and proportion of functional school management committees (SMC) vis-à-vis WASH	Document Review, KII, FGD, End line Survey	PR, Impl Records	DWASH; Implementers; Schools	Schools	SMC functionality

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
		10.4 Number and proportion of functional school health clubs (SHC) in targeted communities	Document Review, KII, FGD, End line Survey	PR, Impl Records	DWASH; Implementers; Schools	Schools	SHC functionality		and District School officials
									analysis of information on the functioning of SHCs in the program areas as revealed by Implementers and School management and FGDs with selected Schools and compared to information on functioning of SHCs generally as revealed by document review and District School officials
		10.5 Number and proportion of functional community WASH committees in targeted communities	Document Review, FGD, End line Survey	PR, Impl Records	DWASH; Implementers	Community leadership ; Women and Youth groups	WASH Committees functionality		analysis of information on the functioning of WASH Committees in communities in the program areas as revealed by Implementers and FGDs with communities and compared to

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
					Document Review, FGD	PR, Impl Records	Implementers	Community leadership ; Women and Youth groups			information on functioning of WASH Committees generally as revealed by document review and District WASH stakeholders
											analysis of information on savings and loan groups in communities in the program areas as revealed by Implementers and FGDs with communities and compared to information on savings and loan groups generally as revealed by document review and District WASH stakeholders
											analysis of information on water and sanitation cost in

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
											communities and schools in the program areas as revealed by Implementers, school management and FGDs with communities and compared to information on cost recovery generally as revealed by document review and District WASH stakeholders
					10.8 Number and proportion of operational spare parts shops accessible to targeted communities	Document Review, KII, FGD	PR, Impl Records	DWASH; Implementers	Community leadership		Analysis of information on spare parts availability from KIIs with District stakeholders, selected hardware stores and hand pump mechanics combined with information from FGD with WASH Committees and water point caretakers and compared to

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		10.9 Number of trained and certified pump mechanics in targeted communities	Document Review, KII, FGD	Impl Records	DWASH; Implementers	Community leadership			general availability of parts as revealed by District WASH stakeholders
									Analysis of information on hand pump mechanics from document review and KIIs with mechanics combined with information from FGD with WASH Committees and water point caretakers and compared to general information on hand pump mechanics as revealed by District WASH stakeholders and documents
		10.10 Frequency of monitoring/inspection visits by district and ward officers, including to remote locations in targeted communities at	Document Review, KII, FGD	Impl Records	DWASH; Implementers	Community leadership			Analysis of information on District WASH monitoring activities in

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		program start and completion							program areas (with identification of remote locations) from Implementation Records combined with responses from KIIs with Implementers and District stakeholders and information from FGD with WASH Committees
		10.11 Size of maintenance budgets of targeted districts and wards compared to requirements at baseline and program completion	Document Review, KII	PD, Impl Records, WASH Sector Docs	NWASH; DWASH				Analysis of information on annual District WASH budgets (and annual expenditures) over the ASWA implementation period as revealed by review of district financial reports combined with responses from KIIs with District stakeholders and Decentralisation Secretariat

DAC	EQ	Indicators	Data Collection Methods	Data Sources						Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist		
	11. What are the unintended results (if any) in terms of WASH status among the targeted women, children, and communities? (Old EQ 16)	11.1 Number, type and significance of unintended results as identified by implementers and communities	Document Review, KII, FGD	Impl Records	DWASH, Implementers; Schools	Community leadership; Women, Youth, Vulnerable Groups; Schools				Identification and analysis of unintended results as revealed by implementation records such as steering committee meetings and KII with District stakeholders, implementers and school management combined with information from FGD with community groups in particular women and children
	12. What where the main external factors to UNICEF (e.g. political, emergency, or socio-cultural barriers) that hindered successful attainment of the expected results and how did UNICEF	12.1 Proportion of assumptions and risks identified at design and planning level that have been monitored	Document Review, KII	PD, Impl Records	UNICEF, Implementers					Analysis of assumptions and risks as identified in PD and monitoring of these as revealed in Implementation Records and responses from KIIs

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
and its partners address these barriers? (Old EQ 5, 18, 23)											with UNICEF and Implementers
					12.2 Type of measures that have been applied to remove barriers, mitigate risks, and respond to major events (e.g. EVD) experienced during implementation	Document Review, KII	PD, Impl Records	UNICEF, Implementers			Analysis of the risks mitigation measures that have been applied as revealed in the Implementation Records (incl minutes of steering committee meetings) and responses from KIIs with UNICEF and Implementers
					12.3 Number, type, and influence of barriers (e.g. political, emergency, socio-cultural) encountered by the program and identified in progress reports, which hindered the achievement of results as identified by different stakeholders	Document Review, KII	Impl Records FGD	UNICEF, NWASH, DWASH, Implementers; Schools	Community leadership ; Women, Youth, Vulnerable Groups; Schools		Analysis of the barriers encountered by the program as revealed in the Implementation Records (incl minutes of steering committee meetings) and responses from KIIs with UNICEF, national and district stakeholders, implementers, and

DAC	EQ	Indicators	Data Collection Methods See legend below	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
									schools as well as information from FGDs with groups in the communities and schools
Efficiency	13. What were the program costs compared to its facilities coverage? (Old EQ 25)	13.1 Unit cost per facility (water points, sanitation compared to its facilities) compared to coverage? (Old EQ benchmarks)	Document Review	PD, Impl Records, WASH Sector docs					quality of construction on Water Points and Sanitation
		13.2 Community capacity building costs per participant/ community compared to benchmarks	Document Review	PD, Impl Records, WASH Sector docs					Analysis of the cost of community capacity building activities as revealed by Implementation Records (incl annual financial

DAC	EQ	Indicators	Data Methods	Collection	Data Sources					Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
										reports and monitoring data) and compared to national and international benchmarks and in view of results on functionality of WASH Committees and Facilities and hygiene practices (EQ10)
					13.3 Total program cost per beneficiary compared to benchmarks	Document Review	PD, Impl Records, WASH Sector docs			Analysis of the total program costs as revealed by Implementation Records (incl annual financial reports and monitoring data) and compared to available national and international benchmarks
					13.4 Percentage of total program costs spent on program management (e.g. staff, office space and equipment, vehicles) compared to benchmarks	Document Review	PD, Impl Records, WASH Sector docs			Analysis of the total program costs and overheads as revealed by Implementation Records (incl annual financial

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
									reports and monitoring data) and compared to available national and international benchmarks
									Analysis of the available resources as revealed in PD and Implementation Records and compared to views revealed from KIIs with national and district stakeholders and implementers and schools FGDs with communities and observations on the quality of implementation Combined with indicators 13.1, 13.3, and 13.4
		14. To what extent have human, financial and material resources been adequate (in adequacy of financial quantity), sufficient (in quality) and distributed/ deployed in a timely manner for achieving results? (Old EQ 12, 24)	14.1 Views of stakeholders (implementing partners and communities) on the adequacy of financial resources to cover the costs of the WASH infrastructure and ensure infrastructure quality	Document Review, KII, FGD	PD, Impl Records	UNICEF, Implementers, NWASH, DWASH, Schools	Community leadership	Observations on quality construction	Analysis of implementation records such as annual work plans, and progress
			14.2 Time from payment requests were made to funding was available at the local level to cover implementation costs	Document Review, KII	PD, Impl Records	UNICEF, Implementers			

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
											reports combined with information from KIIs with UNICEF and Implementers on the timeliness of resources
		14.3 Type and level of contribution from expected beneficiaries during implementation (cash, labour, materials) by type of activity (e.g. infrastructure, community mobilisation, awareness raising)	Document Review, KII, FGD	PD, Impl Records	UNICEF, Implementers, NWASH, DWASH, Schools	Community leadership; Women and Youth Groups; Schools					Analysis of procedures for contribution from beneficiaries from PD and Implementation Records combined with information on actual contributions revealed from KIIs with UNICEF, national and district stakeholders, Implementers, and school management as well as FGD with leaders and groups in the communities Combined with indicators 13.1, 13.3, and 13.4

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		14.4 Availability of required equipment and quality materials for construction of WASH infrastructure	Document Review, KII, FGD, Facilities checklist	PD, Impl Records	UNICEF, Implementers, NWASH, DWASH, Schools	Community leadership			quality of construction (concrete, depth of wells etc) compared with information from KIIs with stakeholders and implementers incl construction companies on the available equipment and materials and FGD with community leaders on the actual implementation modalities and availability of equipment and materials Combined with indicators 13.1, 13.3, and 13.4
		14.5 Availability of skilled/qualified personnel at central level and in program	Document Review, KII, FGD	PD, Impl Records	UNICEF, Implementers, NWASH, DWASH, Schools	Community leadership			Analysis of personnel requirements in the PD as

DAC	EQ	Indicators	Data Collection Methods See legend below	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		locations to achieve expected results							compared to actual available personnel resources at national, district and local level as revealed by implementation records and responses from KIIs with stakeholders and implementers and FGD with community leaders on the personnel involved in the implementation Combined with indicators 13.1, 13.3, and 13.4
		15. How effective was partner collaboration with district and local structures? (Old EQ22)	15.1 Level and nature of engagement with districts and chiefdoms/ wards by implementing partners	Document Review, KII	PD, Impl Records	Implementers, DWASH			Analysis of procedures for collaboration at district and local level as prescribed in the PD and practice as revealed in Implementation Records such as minutes of District WASH coordination

DAC	EQ	Indicators	Data Methods	Collection	Data Sources					Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
										meetings and responses from KIIs with District and Ward/ Chiefdom stakeholders and Implementers
					15.2 Level and nature of support/facilitation provided by districts and chiefdoms/wards	Document Review, KII	Implementers, DWASH			Analysis of the type and level of support by district and local level as prescribed in the PD and practice as revealed in Implementation Records and responses from KIIs with District and Ward/ Chiefdom stakeholders and Implementers
					16. To what extent was the program well-coordinated with other engagements in the WASH sector? (Old EQ26)	16.1 Dialogue and information-sharing with other WASH implementers and donors at district and national level, including agreement on division of labour, geographically and/or thematically	Document Review, KII	PD, Impl records	UNICEF, NWASH, DWASH, Implementers	Analysis of the type and efficiency of the coordination at district and national level as envisaged in the PD and the actual practice as revealed in the Impl Records such as minutes of

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
											coordination meetings at national and district levels and responses from KIIs with National and District stakeholders and Implementers incl other Development Partners and WASH INGOs active in Sierra Leone
					17. What where the main internal factors to UNICEF and its implementing partners that contributed to successful attainment of the expected results? (Old EQ 17)	17.1 Degree and type of support given by UNICEF staff (programme management, technical, financial, and cross-cutting section staff) to implementing partners to facilitate implementation	Document Review, KII	PD, Impl records	UNICEF, Implementers		Analysis of the support expected from UNICEF Staff as described in the PD as compared to practice during implementation as revealed from Impl Records and the guidelines etc provided to Implementers and the responses from KIIs with UNICEF and Implementing NGOs

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		17.2 Utility of M&E systems for informed decision-making and management of program implementation	Document Review, KII	PD, Impl records	UNICEF, NWASH, Implementers				Analysis of the M&E Systems and the use of these for decision making and management as envisaged in the PD and as practiced based on Implementation Records including M&E tools and guidelines, use of indicators in progress reports, minutes of steering committee meetings; and the responses from KIIs with UNICEF, national stakeholders, and Implementing NGOs
		18. What where the main internal factors to UNICEF and its implementing partners that hindered successful attainment of the expected results and how did UNICEF	18.1 Nature of challenges related to internal UNICEF procedures, and associated delayed or changed activities	Document Review, KII	PD, Impl records	UNICEF, NWASH, DWASH, Implementers			Analysis of challenges related to internal UNICEF Procedures as revealed by the Implementation Records such as minutes of

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
	and its partners address these barriers? (Old EQ 17, 23)										meetings and progress reports from implementers combined with information from KII responses from UNICEF, national and district stakeholders, and implementers
					18.2 Degree and type of support given by UNICEF staff (programme management, technical, financial, and cross-cutting section staff) to help addressing internal institutional and procedural stumbling blocks	Document Review, KII	PD, Impl records	UNICEF, Implementers			Analysis of type and level of support provided by UNICEF staff to address stumbling blocks as revealed by the Implementation Records such as minutes of meetings and progress reports from implementers combined with information from KII responses from UNICEF, national and district stakeholders, and implementers

DAC	EQ	Indicators	Data Collection Methods	Data Sources						Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist		
Sustainability	19. To what extent are communities able and willing to contribute to ensuring the sustainability of the WASH infrastructure provided and continue with hygiene and health practices introduced by the project? (Old EQ 27, 28, 29, 30, 31, 33, 35, 51)	19.1 Proportion of community members willing to pay for WASH services	Document Review, KII, FGD, End line Survey	PD, Impl records, WASH Sector Docs	Community leadership; Women, Youth, Vulnerable Groups; Schools	willingness to pay for WASH	communities and schools		Analysis of willingness to pay for WASH services in communities and schools as revealed by the end line survey and combined with responses from FGDs with community leadership and groups as well as SMCs and information available from other WAP studies Combined with indicators 10.1-10.11	
		19.2 Proportion of community-members seeing it as beneficial to continue with improved hygiene practices	FGD, End line Survey		Community leadership; Women, Youth, Vulnerable Groups; Schools	views on whether or not it is seen as beneficial to continue with improved hygiene practices			Analysis of end line survey and FGD responses on views on importance to continue improved hygiene practices Combined with indicators to EQ9	
		20. To what extent is the government at national and local level providing resources to targeted districts/wards who have	Document Review, KII	PD, Impl Records, WASH Sector Docs	NWASH; DWASH				Analysis of resources available for monitoring and	

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey line	Facilities Checklist	
		levels able and willing to ensure the sustainability of the WASH infrastructure provided and continue with the promotion of hygiene and health practices introduced by the project? (Old EQ 27, 28, 29, 30, 31, 32, 33, 34, 35)	planned and budgeted post-support to operation and maintenance of ASWA WASH infrastructure						O&M support in districts and wards in program area as revealed by local council budgets and KIIs with district councils covering the program area and decentralisation secretariat on the general level available resources at local level Combined with indicators 10.10, 10.11
		20.2 Proportion of targeted district/wards who have planned and budgeted replication ASWA WASH activities in non-ASWA communities	Document Review, KII	PD, Impl Records, WASH Sector Docs	NWASH; DWASH				Analysis of resources available for replication of WASH activities in districts in the program area as revealed by the District Council budgets/ expenditures and KIIs with district councils and decentralisation secretariat on the general level

DAC	EQ	Indicators	Data Methods Collection	Data Sources					Data Analysis	
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	Analysis
Gender, equity, and human rights	21. To what extent did the program design used to ensure that women and men, especially from and human rights issues including the equitable representation in	21.1 Types of approaches used to ensure that women and men, especially from vulnerable groups, have equitable representation in	Document Review, KII, FGD	PD, Impl Records, WASH Sector Docs	NWASH				x	available resources for WASH implementation in Districts Combined with indicators 10.10, 10.11
										Analysis of resources available for ASWA implementation as compared for national government WASH plans and budgets as revealed in government budget and financial reports and as revealed through KIIs with national WASH Stakeholders Combined with indicators 10.10, 10.11

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
		particular situation of vulnerable households (elderly persons, persons living with disabilities, very poor household)? (Old EQ 36)	WASH decision making, management and leadership resulting in increased gender equity and women's empowerment			Vulnerable Groups; Schools			prescribed in the PD as compared to the practice as evidenced in the Implementation Records and KII responses from UNICEF, national and district stakeholders, implementers and school and the responses from FGDs with groups in the communities and schools
		21.2 Inclusion of separate toilets, facilities for menstrual hygiene and accessibility for people with disabilities in WASH infrastructure designs	Document Review, Facilities checklist	PD, Impl Records				design of toilets and visual inspection	Assessment of the design of sanitation facilities as available in the PD and Impl Records and analysis of actual implementation as revealed by visual inspections of the implemented facilities
		22. To what extent were vulnerable/marginalized	22.1 Number and proportion of WASH infrastructure supported by	Document Review, Facilities checklist	PD, Impl Records		x	design of toilets and visual inspection	Assessment of the design of sanitation facilities (separate

DAC	EQ	Indicators	Data Methods Collection	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
37, 38)	ed women, children, people living with disabilities, elderly people, child, and female-headed households as well as vulnerable/marginalized communities reached by the program and their specific barriers of access to the provided services addressed? (Old EQ	ASWA which include separate improved toilets for girls and boys and facilities for menstrual hygiene							and menstrual hygiene facilities) as available in the PD and Impl Records and analysis of actual implementation of sanitation facilities as revealed by progress reports and by visual inspections of the implemented facilities
		22.2 Number and proportion of WASH infrastructure (at schools, health centres, homes) supported by ASWA which is accessible for people with disabilities and elderly	Document Review, Facilities checklist	PD, Impl Records					design of toilets and visual inspection Assessment of the design of sanitation facilities (accessibility) as available in the PD and Impl Records and analysis of actual implementation of sanitation facilities as revealed by progress reports and by visual inspections of the implemented facilities

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
		22.3 Number and proportion of WASH infrastructure supported by ASWA which is constructed in locations that are safe for women, girls and boys during day and night	Document Review, KII, FGD, End line Survey, Facilities checklist	PD, Impl Records		Community leadership; Women, Youth, Vulnerable Groups; Schools	safe location of facilities	location of infrastructure	Assessment of the location of WASH Facilities and safety (day and night) as revealed from implementation records and FGD with groups in the communities and schools on access and safety as well as data collected through the end line survey and facilities checklist on the location of the infrastructure
		22.4 Number and proportion of WASH infrastructure supported by ASWA which is constructed in locations within easy reach (distance, number of people served per facility, costs of use - compared to national guidelines) for the poorest segments of communities	Document Review, FGD, End line Survey, Facilities checklist	PD, Impl Records, WASH Sector Docs		Community leadership; Women, Youth, Vulnerable Groups	accessibility for the poor	location of infrastructure	Assessment of the location of WASH Facilities and access (no of persons per facility and compared to poor households) as revealed from implementation records and FGD with groups in the communities on access as well as data collected

DAC	EQ	Indicators	Data Collection Methods See legend below	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
									through the end line survey and facilities checklist on the location of the infrastructure
				22.5 Number, proportion and roles of female representatives and representatives from vulnerable groups in community-level WASH decision-making, management, operation, and maintenance	Document Review, KII, FGD	PD, Impl Records	Implementers, Schools	Community leadership ; Women, Youth, Vulnerable Groups	Assessment of the representation of female and vulnerable groups in WASH decision making as revealed from Implementation Records and KIIs with Implementers and Schools and FGDs with community leadership and women, youth, and vulnerable groups
				22.6 Views of communities, including women, girls, boys, and elderly on whether the program successfully addressed their needs	FGD			Community leadership ; Women, Youth, Vulnerable Groups, Schools	Assessment of the perceived success of the ASWA Program in addressing the needs of women, girls, boys, and the elderly as revealed from FGDs with women, youth and

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
		23. How have identified equity gaps during design changed over the program lifespan? What is the contribution of the program to these changes? (Old EQ 39)	23.1 Changes in WASH equity gaps (small/large communities, rural/urban) at baseline and project completion in project areas and control districts	Document Review, End line Survey	PD, Impl Records, SSL Stats		WASH indicators		vulnerable groups in the communities and pupils in schools
									Analysis of WASH access data and equity gaps at baseline as revealed by SSL WASH Statistics in program and control districts and at end line as revealed by recent SSL WASH Stats and end line survey data
									Analysis of the views expressed by KIIs at national and district level on the contribution of the ASWA Program to reducing the equity gaps
		24. How strong was the integration of education and child protection with WASH in programming and what were the program activities	24.1 Type of evidence that education and child protection has been integrated into WASH in communities and schools	Document Review, KII, FGD	PD, Impl Records	UNICEF, NWASH, DWASH, Schools	Community leadership ; Women, Youth, Vulnerabl		Analysis of the inclusion of child protection in the Program as planned in the PD as compared to

DAC	EQ	Indicators	Data Methods Collection	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
	successful integration strategies used? (Old EQ 41, 43)					Groups, Schools			actual implementation as evidenced in the Implementation Records and KII responses from UNICEF, national and district stakeholders and schools and examples provided from FGDs with groups in the communities and schools Combined with indicator 22.3
	24.2 Examples of child protection integration measures applied by stakeholders and community-members trained by the program	Document Review, KII, FGD	Impl Records	UNICEF, NWASH, DWASH, Schools, Implementers	Community leadership ; Women, Youth, Vulnerable Groups, Schools				Analysis of the Implementation Records/ Progress reports and identification of examples of child protection measures applied by stakeholders combined with KII responses from UNICEF, national and district stakeholders and schools and

DAC	EQ	Indicators	Data Methods Collection	Data Sources					Data Analysis	
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	Analysis
		25. How and to what extent did UNICEF and partners' interventions contribute to addressing gender equity and the prevention of sexual exploitation and abuse? (Old EQ 42, 44)	25.1 Change in workloads of women and girls, men, and boys, including vis-à-vis fetching water	FGD		Community leadership ; Women, Youth, Vulnerable Groups				examples provided from FGDs with groups in the communities and schools Combined with indicator 22.3
										Analysis of the gender and sexual awareness of leadership, teachers and students in schools as expressed from KIIs with school heads and female teachers and FGDs with SMCs and teachers and pupils (female and male separate) and examples of how this has been demonstrated Combined with indicators 21.1, 21.3, 22.1, 22.3, 22.5

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		assets, e.g. as a result of ASWA saving and lending groups				; Women, Youth, Vulnerable Groups			
		25.3 Change in women's participation in, and influence on, community and household decision-making	FGD			Community leadership; Women, Youth, Vulnerable Groups			
		25.4 Change in the knowledge and ability of children to voice their needs and influence parents in WASH decision-making and practices	FGD			Community leadership; Women, Youth, Vulnerable Groups			
		25.5 Change in the perception of the roles of boys and girls and understanding of the equal need for education	FGD			Community leadership; Women, Youth, Vulnerable Groups			
		25.6 Change in the prevalence of sexual exploitation and abuse	FGD			Community leadership; Women, Youth,			Analysis of the gender and sexual awareness of community leaders and members as expressed in FGDs

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
							Vulnerable Groups				with community leadership and women and youth groups (female and male separate) and examples of how this has been demonstrated Combined with indicators 21.1, 21.3, 22.1, 22.3, 22.5
					25.7 Number and type of ASWA-supported policies, regulations and guidelines with clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups	Document Review, KII	PD, Impl Records, WASH Sector Docs	UNICEF, NWASH			Analysis of the governance document supported by ASWA and the inclusion of needs of disadvantaged groups and the views as expressed by UNICEF and national stakeholders on the use of the governance docs and inclusion of needs of disadvantaged groups Combined with indicators 21.1,

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End line Survey	Facilities Checklist	
Impact		26. What are the lasting changes in the lives and wellbeing of women, children, families, and communities targeted by the program? (Old EQ 16, 19, 45, 46, 47, 48, 51)	26.1 Percentage of achievement of set impact/ health targets for women, children and communities and views of communities on life and well-being improvement thanks to the contribution of ASWA	Document Review, KII, FGD	SSL and MoHS stats	Health Centres, DWASH, Implementers	Community leadership, women, youth, vulnerable	x	analysis of the achievement of the impact/ health targets for women, children and general in the communities based on health statistics available from SSL and MoHS and as informed from KIIs with health centre personnel and district health teams
				Document Review, KII, FGD, End line Survey	PD, Imple Records, SSL Stats, MoHS Stats	Health Centres, DWASH	Community leadership, women, youth, and disabled groups	Health indicators	Analysis of health indicators at baseline from PD and SSL/ MoHS Statistics and at completion as evidenced in recent statistics from SSL and MoHS and information from KIIs with personnel in health centres used by the program

DAC	EQ	Indicators	Data Methods Collection	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
									communities and district health staff. The development in health indicators will also be informed by perceptions of community members in particular women and the end line survey will present data on the prevalence of morbidity and mortality related to WASH
				26.3 % reduction in time spent on fetching water for women and children	Document Review, FGD, End line Survey	PD, Impl Records, SSL stats	Community leadership, women, youth, Disabled	time spent on fetching water	Analysis of the time spent on fetching water based on baseline data from SSL statistics compared to the situation at completions as revealed by the end line data collection and information provided by FGDs with community leaders and

DAC	EQ	Indicators	Data Methods	Collection	Data Sources						Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	Facilities Checklist	
											women and youth groups (female and male separate)
											Analysis of MBSSE statistics for absenteeism and responses from KIIs with education stakeholders at national and district level and school leaders as well as FGD responses with teachers and pupils
											Analysis of MBSSE statistics on school attendance and responses from KIIs with education stakeholders at national and district level and school leaders as well as FGD responses with teachers and pupils
											Analysis of the development in the overall WASH sector governance

DAC	EQ	Indicators	Data Collection Methods	Data Sources					Data Analysis
				Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		provision of WASH by Sierra Leone at baseline and the government at program completion – and national and district levels? (Old EQ 49, 50, 51)							framework at baseline and program completion based on stakeholder views from KIIs with UNICEF, national and district stakeholders, and implementers Analysis also considering indicator 8.4
		27.2 National and district-level government WASH funding allocations at baseline and program completion – and ASWA contribution perceived by stakeholders		Document Review, KII	PD, Impl Records, WASH Sector Docs	NWASH, DWASH			Analysis of annual national and district WASH budgets and expenditures and development from baseline to end line based on financial reports and information from KIIs with national and district stakeholders on their perception of the contribution by ASWA Analysis also

DAC	EQ	Indicators	Data Methods	Collection	Data Sources					Data Analysis
					Document Review See legend below	KIIs See legend below	FGD	End Survey	line	
		27.3 Clarity and appropriateness of district and ward mandates, roles, duties and budgets vis-à-vis WASH service delivery and operation and maintenance – changes from baseline to program completion – and ASWA contribution perceived by stakeholders	Document Review, KII	PD, PR, WASH Sector docs	NWASH, DWASH					consider indicator 13.4, 14.1 and 14.3 Analysis of development in the clarity and appropriateness of mandates for WASH service delivery and available resources as expressed in sector documentation and information from KIIs with national and district stakeholders on their perception of the contribution by ASWA Analysis also consider indicator 6.1, 14.5, 17.1, 18.1, 18.2

Legend for Document Sources

PD:	ASWA Program Document (PD) includes the Proposal prepared by Sierra Leone office and the combined ASWA Program Document for 9 countries, Also includes the RF and ToC and any relevant documents such as capacity assessments etc and internal UNICEF notes and minutes of meetings etc from the program formulation period.
Impl Contracts:	Documentation on ASWA implementation arrangement such as TORs and contracts with Implementing Partners, contractors etc
Impl Records:	Progress Reports (on program and from Implementing partners, - Minutes of Steering Committee Meetings, Minutes of District WASH team meetings, Inspection and supervision reports, Akvo/ UNICEF Project Monitoring data/ dashboard, Annual budgets, and financial reports etc, Sustainability reports
SSL Stats:	Statistics Sierra Leone (SSL) reports and data such as: - 2016 WASH SDG baseline study, 2015 housing and population census, 2019 multidimensional child poverty report, 2019 demographic and health survey, 2019 Multidimensional poverty index, 2017 MICS6 and MICS5, and other relevant reports on poverty and socio-economic conditions
MoHS Stats:	Data and reports from the Ministry of Health and Sanitation (MoHS) on: health indicators, sanitation incl CLTS progress and status
MWR Stats:	Information from water sector information systems such as Water Point Mapping (WPM) and other data available from the MWR M&E
WASH Sector Docs:	National WASH Sector Policy and Strategy Framework such as: National water policy, Rural and Small town strategy docs, National Rural Water Supply and Sanitation programme, WASH M&E Framework report, M&E Reports, Akvo Reports, Sector Websites, Akvo monitoring tools, Decentralisation Policy, Public Health strategy documents (EPICOME), PRSP and National development plans, National and District WASH Plans (annual and medium term), Governance documents developed with support from ASWA, WAP Studies performed for other WASH projects

Legend for Key Informants

UNICEF:	Specific KII guides to be developed for: UNICEF Chief WASH Officer, UNICEF WASH Specialist, UNICEF Planning & Monitoring, UNICEF Evidence, Policy and Social Protection Section
NWASH:	National WASH Stakeholders (NWASH) with specific KII guides to be developed for: MWR WD Dir/Dep/ Head Rural Water Supply, MWR Head M&E Division, MHS ESD Dir/Dep ESD, MHS Head, M&E Unit, MBSSE Dir/Dep of Planning/ MBSSE Officer WASH in Schools, MGSWCA Officer in Charge, Gender, PWD Commission, MLGCD Director of Local government Director Dec. Secretariat, MLGCD M&E Unit DecSec, Development Partners and Implementers such as INGOs.
DWASH:	District WASH (DWASH) stakeholders with specific guides to be developed for: MWR District Engs (Bonthe and Koinadugu), DHSMT members, Bonthe/ Koinadugu (Falaba) District Councils: Dev Planning Officers; M&E Officers; WASH Officers, Chiefdom and Ward leadership,
Schools:	Specific KII guides to be developed for separate interviews with: Head Teachers, Selected Female Teachers
Health Centres:	Specific KII guides to be developed for Midwives or other relevant staff in Peripheral Health Units accessed by the population in beneficiary communities.
Implementers:	Specific KII Guides to be developed for: NGO Implementing Partners (SLSAV, Living Water International, PACE, CEDA, ADP, OXFAM?), UNICEF CSOs (advocacy groups), Private sector partners such as Hand Pump Mechanics, Spare Parts dealers, Sanitation manufacturers etc.

Appendix 3: Persons consulted

Name	Position	Organization
Bishnu Timalsina	Chief of WASH	UNICEF Sierra Leone
Raphael Nwozor	WASH Specialist	UNICEF Sierra Leone
Jesse Kinyanjui	Previous WASH Specialist, UNICEF; current Akvo	Akvo
Maria Dhillon	Previous - Rural WASH Expert with various NGOs in Sierra Leone	
Emeline Bereziat	Regional Programme Manager	Akvo
Massey Tucker	Education Officer	UNICEF Sierra Leone
Yuichiro Yamamoto	Child Protection Specialist and Gender Focal Point	UNICEF Sierra Leone
Robert Bailey	Construction Engineer	UNICEF Sierra Leone
Daisy Dhuru-Ihoma	Chief of Planning and Monitoring	UNICEF Sierra Leone
Amara Turay	Programme Officer Secretary	Action for Development Programme, Sierra Leone (ADP-SL)
Innocent Mutabaruka	Head of Programmes	Oxfam Sierra Leone
Alfred Dumbuya	Executive Director),	Sierra Leone Social Volunteer Association
Jahun Beatrice	Teacher	Bonthe School
Andrew Jahun	Headteacher	Bonthe School
Malema Joseph Sallu	Headteacher	Bonthe School
Mokosie Sippo	Headteacher	Bonthe School
Malema Susan Moriba	Teacher	Bonthe School
Tihun	Teacher	Bonthe School

KII Respondents

National WASH MDAs

1. Francis Moijue (Ing.), Deputy Director, Directorate of Water resources, Ministry of Water resources (MWR)
2. Mr Mohamed J. Bah, Head of M&E, Deputy Director, Directorate of Water resources, Ministry of Water resources
3. Doris Bah, Deputy Director, Department of Environmental Sanitation, Ministry of Health and Sanitation
4. Dauda Kamara, Senior WASH officer, Department of Environmental Sanitation, Ministry of Health and Sanitation
5. Charles Vandi, Director Gender Affairs, Ministry of Gender and Children affairs.
6. Saa R. I. Konquee, Executive Secretary, National Commission for Person with Disability
7. Monica Lamin, School WASH Officer, Ministry of Basic, Senior Secondary Education
8. Collinia Macauley, M&E Manager, Decentralisation Secretariat, Ministry of Local Government and Community Development

District WASH

1. Ing. Christopher M.Saffa, Civil Works Engineer, Bonthe District Council
2. Ing Abubakarr Sidique, WASH Engineer, MWR
3. Mohamed Bah, District WASH Coordinator – Koinadugu District Health Management Team
4. Ing. Monya Swarray, District WASH Engineer, Ministry of Water Resources, Koinadugu

Implementing Partners

1. Mr Amara Turay, Programme Officer, Action for Development Programme, Sierra Leone (ADP-SL)
2. Innocent Mutabaruka, Oxfam-SL, Head of Programs;
3. Mr Alfred Dumbuya (Executive Director), Sierra Leone Social Volunteer Association;
4. Abdul Kemoh, Program Coordinator, CEDA
5. Patrick Sannoh, Executive Director, PACE

Bonthe – Respondents for WASH in Community Checklists

Locality	Respondent name	Function
Mokaba	Ousmane Bangalie	Chief (Mbelleh II)
	Adama Kamara	WASH Chair
Gbangbama	Suleiman Kanneh	Ward Councillor
	Moses Kongbako	WASH Secretary
	Jessie Joicy	WASH member
	Momo Ndoi	WASH member
Senehun	Mohamed Kanyande	Town chief
	Mohamed Ganda	WASH member
Foya	Ibrahim Nyale	WASH member
	Amata Dramana	WASH member
	Aminata Nyale	
Jahun	Joseph Tarawally	Civil servant from Jahun
Pelewahun	Thomas Bindu	Town chief
	Margaret Humper	WASH Chair (joint)
	Moses Bindu	WASH Chair (joint)
	Samuel Humper	WASH Secretary
	Kadie Sakie	WASH Treasurer
	Mustafa Arona	WASH member
	Sylvester Johnbull	WASH member
	Mbayo Mammy	Town chief
	Tiange Dengeia	WASH member
	Ami Daouda	WASH member
	Baycor Barrie	WASH member
	Joseph Michael	WASH member
	Solomon Lincoln	WS caretaker

Locality	Respondent name	Function
Mokosie	Ansumana Moseray	Town Chief
	Moseray Ansumana	WASH Chair
Gbahama	Mohamed Rogers	WASH member
	Emmanuel Musa	WASH member
	Ismael Lavalil	WASH member

Bonthe – Respondents for WASH in Schools Checklists

Locality	School name	Respondent name	Function
Mogbwemo	Fawe PPS/ PS	Elizabeth Lagao	Head Teacher
		Michael Wright	Responsible teacher
Mogbwemo	Kankalay PS/SS	Fatima Precious Mbayo	Head Teacher
		Suleiman Conteh	Teacher
Tissana	DEC PS	Musa Etwa	Town Chief
		Amara Sheriff	Teacher
		Musa P Fai	Retired teacher
Jahun	UBC PS	Joseph Tarawally	Civil servant from Jahun
		Ibrahim Kpaka	Contractor (Code Salone)
Gerehun	UBC PS	Josephine Tucker	Head teacher
		Senise Sembe	Chiefdom Speaker
		Joseph Kagba	SMC Chairman
		Sedie Mammy	
		David Tucker	
Tihun	St Joseph's PS	Abraham Lewis	Teacher
Mokosie	DEC PS	Thomas A Sippo	Head Teacher
		Abibu Brima	SMC Chair

Falaba – Respondents for WASH in Community Checklists

Locality	Respondent name	Function
Koromasilaya	Mohamed G Conteh	Town Chief
	Bangalie S Conteh	WASH Chair
	Sheku M Faroh	Youth Committee
	Musa Conteh	Youth Committee
Herikofeh	Mohamed Koroma	Town Chief
	Sheku Kamara	Chief's spokesman
Mongo Kiridu	Mohamed Marah	Sanitation Leader
	Fasalie Mansaray	Sanitation Leader
	Balansama Marah	Sanitation Leader
	Foday Kamara	Sanitation Leader

Falaba – Respondents for WASH in Schools Checklists

Locality	School name	Respondent name	Function
Koromasilaya	Ahmadiyya PS	Bangalie F Conteh	Head Teacher
		Sheku M Faroh	Youth Committee
		Musa Conteh	Youth Committee
Bumbukoro	MCA PS	No names collected	

Koinadugu – Respondents for WASH in Community Checklists

Locality	Respondent name	Function
Kondembaia	Jeneba Thonkara	WASH Chair
	Thomas Marah	Chief's advisor
	Dennis T Marah	Pastor
Thankoro-Sidia	Foday Moserey	Town Chief
	Fatumata Fofanah	WASH Chair
	Wurie Kallon	Secretary
	Sheku M Fofanah	Head Teacher
	Sorie Conteh	
Kumala Town	Ferenkeh Kumala	WASH Chair
	Mohamed K Kandeh	WASH member
	Ali B Jalloh	Bike Riders Rep.
Kafogo	Loko Sesay	Town Chief
	Francis Soria Sesay	WASH Secretary
	Musa Bantama	Fula Chief
	Amadu B Koroma	Public Relations Officer
	Ibrahim Monsaray	WASH member
	Sede Conteh	WASH member
Alikalia	Lahai Thoronka	Chiefdom Speaker
	Abu Black	WASH Chair
Kamayimbo	Abubacar Sawanie	WASH Chair
	Mohamed Lamin Koroma	Advisor
	Alhaji Mohamed Sesay	Youth Chair
	Foday M Koroma	Caretaker
	Kadro Bantama	Caretaker

Koinadugu – Respondents for WASH in Schools Checklists

Locality	School name	Respondent name	Function
Kondembaia	RC PS	Benedict Koroma	Headteacher

Foronaya	BAN PS	Mohamed Mansaray	Headteacher
Maliema	Meth PS	Henry Sawyer	Headteacher
Tihun	NM PS	Edmond French	Headteacher

Appendix 4: Documentation

ASWA Specific Documentation:

DGIS-funded ASWA Sierra Leone Project Proposal, October 2012 (Updated June 2013)

DGIS-funded ASWA West and Central Africa, Annual Progress Report 2018 - Country Report Sierra Leone, April 2019

DGIS-funded ASWA West and Central Africa Programme, Sierra Leone Country Report, Seventh Annual Progress Report: 2019, 30 June 2020

DGIS-funded ASWA West and Central Africa Programme, Sierra Leone Country Report, Fifth Annual Progress Report: 2017, 30 June 2018

DGIS-funded ASWA West and Central Africa Programme, Sierra Leone Country Report, Third Annual Progress Report: 2015, 30 June 2016

DGIS-funded ASWA West and Central Africa Programme, Sierra Leone Country Report, Final Report, May 2020

DGIS-funded ASWA West and Central Africa Programme Mid Term Programme Review, 2013-2015

DGIS-funded WASH Ebola Viral Disease Response Funding Final Report, March 2016 (Reporting period: 30 Sept 2014 – 31 Dec 2015)

ASWA Sierra Leone Baseline Report, for the Impact Evaluation in Sierra Leone, March 2018

Taking Stock of National WASH M&E in Sierra Leone (“WASH Diagnostic Report”), Ministry of Water Resources, Ministry of Health and Sanitation, no date

Water, Sanitation and Hygiene Sector Performance Report, Ministry of Water Resources, Ministry of Health and Sanitation, 2017

ASWA Sierra Leone, Annual WASH Sector Sustainability Check, UNICEF, Government of Sierra Leone, 2017

ASWA Sierra Leone, Monitoring Protocol, DGIS and UNICEF, No Date

WASH Baseline Survey and Water Point Mapping Final Report, Statistics Sierra Leone, and Ministry of Water Resources, 2016

ASWA West and Central Africa Inception Phase Report, 2013-2017, DGIS and UNICEF, 2013

ASWA Sierra Leone, Annual Tracking Tables (Excel File)

ASWA Sierra Leone, Progress Database (Excel File)

DGIS funded ASWA West and Central Africa, Final Report, May 2020

External Documentation:

WHO/UNICEF Water, Sanitation and Hygiene Joint Monitoring Programme (JMP), 2012

The Sierra Leone National Water and Sanitation Policy (NWSP), 2010

UNICEF and WHO's Joint Monitoring Programme (JMP) Special Report on WASH Inequalities (2000-2017)

Sierra Leone's Demographic and Health Survey, Statistics Sierra Leone, 2015

Sierra Leone's Third Generation Poverty Reduction Strategy Paper, 'Agenda for Prosperity' (2013-2017)

World Bank Water and Sanitation Program, 'AMCOW Country Status Review: Water Supply and Sanitation in Sierra Leone, Turning Finance into Services for 2015 and Beyond', 2011

Ministry of Water Resources and Ministry of Health and Sanitation, 'Sierra Leone Water and Sanitation Sector Performance Report, 2012', 2013

National Workshop on the WASH Bottleneck Analysis - 2013

UNICEF Sierra Leone Country Programme Document 2013-2014

UNICEF Sierra Leone Country Programme Document 2015-2018

UNICEF Sierra Leone Annual Reports (Various in the period of 2013 – 2018)

UNICEF's Global Strategy in WASH (2006-2015)

Sierra Leone Multi-Indicator Cluster Surveys (MICS 2010 and MICS 2017)

Sierra Leone's new Medium-term National Development Plan (MTNDP) 2019–2023

Graham, A., Powell, M., Taylor, N., Anderson, D. & Fitzgerald, R. (2013). Ethical Research Involving Children. Florence: UNICEF Office of Research - Innocenti. <https://childethics.com/home/compendium-downloads/>

Appendix 5 Data Collection Tools

KII Guide UNICEF

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

UNICEF

Interview with UNICEF Chief WASH Officer and WASH Specialist; followed by discussions on specific issues on M&E, Gender and Child Protection with heads of Evidence, Policy and Social Protection, Education and Child Protection sections as needed

Brief introduction to project

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the stainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Programme design, context and needs assessment and stakeholder involvement

Q3: Stakeholder involvement/consultation in Program design:

- How were the different implementing partners, national and district WASH institutions and beneficiaries involved in the Program planning and design? (2.1)
- What was the process for ensuring their involvement? (2.1)

Q4: Needs identification:

- How did you identify the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) elderly, (vii) women headed households, and (viii) vulnerable and poor households? (2.2)
- How were beneficiaries involved in identifying these needs? (2.2)

Q5: Capacity assessment and strategy:

- Did you carry out an assessment of the capacities and capacity building needs of communities, vis-à-vis community-based WASH management and their roles in Program implementation? (2.3)
- What measures/activities did you include in the Program design to address the identified capacity gaps? (2.3)

WASH improvements for beneficiaries

Q6: Programme targeting and coverage:

- Some targets were changed during the course of implementation, what were the reasons? (7.2)
- Were all the intended locations/ communities reached – if not, why not? (7.1)
- Were some locations excluded, and if so, why? (7.1)
- Were all the intended vulnerable groups reached? (7.3)
- Were some vulnerable groups difficult to reach, and if so, which groups and why? (7.3)

Q7: Was ASWA successful in achieving the planned results? (8.1)

Q8: Community benefits:

- What were the benefits achieved for: (8.1)
 - Women
 - Men
 - Girls
 - Boys
 - People with disabilities
 - Elderly
 - Ultra-poor households
- What are lessons and challenges can we learn from this process? (8.1)

Policy and governance results

Q9: Policy results:

- Do the policies, regulations and guidelines developed/ revised with Program support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and women – and how significant was the Program's contribution in this regard? (25.3)
- How did the Program promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and women? (25.3)
- Are there some good examples of how the needs of disadvantaged groups and women were addressed? (25.3)

Q10: Governance results:

- How do you see quality and utility of the present WASH sector governance framework in Sierra Leone? (27.1)
- How has it changed in the last 7 years? (27.1)
- How, and how significantly, did the Program contribute to any changes/improvements in WASH sector governance? (27.1)

Gender, human rights and child protection

Q11: Gender equity:

- What approaches were used to ensure equal representation of women and men in WASH decision-making and management? (21.1)
- What was the level of involvement of women and could anything have been done to enhance their involvement? (21.1)

Q12: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged, disabled, ultra-poor, and others) in WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q13: Child protection:

- Did the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the program contribute – can you provide any examples? (24.1, 24.2)
- Were the measures adequate – if not, what else would be needed? (24.1)
- Is there any evidence/ examples of this resulting in lasting changes in the communities and schools? (24.2)

Implementation and management arrangements

Q14: Partner and stakeholder roles:

- Were the nature and type of roles assigned to the implementing partners aligned and consistent with their mandates and capacities? (6.1)
- Did the implementing partners have the capacity to fully carry out their roles? (6.1)
- What are the roles of the communities, schools and District WASH stakeholders in the implementation of the Program? (6.2)
- Were all the different key stakeholders at technical and decision-making levels included in national and district project steering committees? (6.3)
- Who were included and who were missing? (6.3)

Q15: Contractual arrangements for beneficiary inclusion:

- How did you ensure the inclusion of needs of different groups were reflected in the implementation arrangements? (3.2)
- Were they included in ToRs/ contracts between UNICEF and implementing partners? (3.2)
- How were different beneficiary groups involved in the implementation of the Program and what were their roles? (2.3, 3.1)

Q16: UNICEF support, rules and procedures:

- How much, and what type of, support did the implementing partners need? (17.1)
- Did the implementing partner have any difficulties with adhering to UNICEF rules and procedures – and if so, did it cause any delays or require any changes of the work plans or targets? (18.1)

- How quickly could UNICEF process payment requests and disburse funds? (14.2)
- Were there any challenges hindering quick and timely disbursements from UNICEF's side or the implementing partners' side? (14.2)
- What type of support did you provide to the implementing partners (programme management, technical, financial, and cross-cutting section staff)? (17.1, 18.2)
- Was this support adequate to address needs and barriers faced by the implementing partners? (17.1, 18.2)

Programme M&E

Q17: results-oriented monitoring:

- Do you find the indicators for measuring results (outcomes and impacts) well-defined and measurable? (5.3)
- How were these indicators monitored during the course of the programme? (5.3, 17.2)
- Did the M&E contribute significantly informed decision-making, or was it mainly used for reporting purposes? (17.2)

Risk management

Q18: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of ASWA? (12.2, 12.3)
- How did these events and barriers affect the implementation? (12.2, 12.3)
- How were the events and barriers managed or mitigated? (12.2)
- Were the events and barriers foreseen, or could they have been foreseen? (12.1)
- How were the assumptions and risks monitored? (12.1)
- In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Financial, human and material resources

Q19: Were the financial and human resources adequate to ensure the achievement of quality WASH infrastructure? (14.1)

Q20: Were the financial and human resources adequate to ensure effective capacity development? (14.1)

Q20: Community contributions:

- Were the level and quality of community contributions (cash, labour, materials) for WASH infrastructure, community mobilisation and awareness raising sufficient and in accordance with agreements? (14.3)
- Were there any challenges with ensuring sufficient community contributions? (14.3)

Q21: Did the implementing partners have access to the needed equipment, materials and skilled personnel in all programme locations and central level – and if not, what were the reasons? (14.4)

Coordination

Q22: National WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at national level to agree on division of labour geographically and thematically? (16.1)
- Were these national dialogue mechanisms efficient? And if any, what challenges were experienced? (16.1)

Q23: District WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at district level to agree on division of labour geographically and thematically? (16.1)
- Were these district dialogue mechanisms efficient? And if any, what challenges were experienced? (16.1)

Other

Q24: Please add any other comments and observations you would like share

KII GUIDE IMPLEMENTING PARTNERS

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Implementing Partners

Interview with Implementing Partners (IPs) contracted by UNICEF for the Implementation of the ASWA Program

Brief introduction to project

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
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- The objective of the evaluation is to ensure accountability, transparency and learning.

ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA

Q1: What is your name, and position?

Q2: Please explain how you were involved in the project?

Q3: How would you describe the current situation of WASH in schools and communities in Sierra Leone? How is your organisation contributing improving access to WASH Services?

Programme design, context and needs assessment and stakeholder involvement

Q4: Stakeholder involvement/consultation in ASWA design:

- Were you personally or your organisation consulted during the planning and design of the Program?
- If so, how do you see the planning process and the consultation with stakeholders?

WASH improvements for beneficiaries

Q5: Programme targeting and coverage:

- Some targets were changed during the course of implementation, what were the reasons? (7.2)
- Were all the intended locations/ communities reached – if not, why not? (7.1)
- Were some locations excluded, and if so, why? (7.1)
- Were all the intended vulnerable groups reached? (7.3)
- Were some vulnerable groups difficult to reach, and if so, which groups and why? (7.3)

Q6: Benefits for different groups:

- What were the benefits achieved for: (8.1)
 - Women
 - Men
 - Girls
 - Boys
 - People with disabilities
 - Elderly
 - Ultra-poor households
- What are lessons and challenges can we learn from this process? (8.1)

Q7: Was ASWA successful in achieving the planned results?

- Please describe how successful is the ASWA Program in improving the WASH awareness and hygiene practices in the communities and schools, respectively? And what are the changes/results of these action these communities and schools? What can we learn from this activity of the program (9.1)

Q8: Results related to Schools:

- Are female students aware of and practice menstrual hygiene at schools and elsewhere? How large a proportion of the female students do you think practice good menstrual hygiene? (9.3)

- How were the School Management Committees (SMCs) involved in the implementation of the ASWA Program? What were there roles, what are the challenges? (10.3)
- Are there SHCs functioning in the schools in the ASWA Program area? And if not, what are the challenges? (10.4)

Q9: Results related to Communities:

- Are the WASH Committees fully functioning in the communities in the ASWA Program area? If so how functional are they in terms of meeting desired requirements such as raising maintenance funds, securing and cleaning water points? And if not, what are the challenges (10.5)
- Are there village savings and loan groups established in the communities in the ASWA Program area? How are these functioning and are they involved in WASH? (10.6)
- What is the level of cost recovery from users of water points and sanitation facilities in targeted communities Are there any innovation in community WASH cost recovery? (10.7)
- Could you mention the spare part shops accessible for the communities and pump mechanics in the ASWA Program target area (10.8)
- Could you mention the hand pump mechanics available for the communities in the ASWA Program target area? Are these trained and certified? (10.9)

Q10: Results related to District Support:

- How often do the District WASH or Ward officials carry out monitoring/ inspection visits and at which stages of the implementation activities? Do these visits also cover the remote locations in the Program areas (10.10)

Q11: Impact

- Has the ASWA program been successful in contributing to improving the impact and health targets for women, children and communities? If yes, in what manner do you experience that the health indicators have changed during the implementation of the ASWA Program? (26.1) what is the best source of data on health indicators?

Policy and governance results

Q12: Policy results:

- Do the policies, regulations and guidelines developed/ revised with ASWA support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and women – and how significant was ASWA's contribution in this regard? (25.3)
- How did ASWA promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and women? (25.3)
- Are there some good examples of how the needs of disadvantaged groups and women were addressed? (25.3)

Q13: Governance results:

- How do you see quality and utility of the present WASH sector governance framework in Sierra Leone? (27.1)
- How has it changed in the last 7 years? (27.1)
- How, and how significantly, did ASWA contribute to any changes/ improvements in WASH sector governance? (27.1)

Gender, human rights and child protection

Q14: Gender equity:

- What approaches were used to ensure equal representation of women and men in WASH decision-making and management? (21.1)
- What was the level of involvement of women and could anything have been done to enhance their involvement? (21.1)

Q15: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged, disabled, ultra-poor, and others) in WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q16: Child protection:

- Did ASWA contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did ASWA contribute? Is there any evidence of this resulting in lasting changes in the communities and schools? Can you provide any examples? (24.1, 24.2)
- Were the measures adequate – if not, what else would be needed? (24.1)
- Does your organisation have internal policies and procedures to prevent staff involved in sexual exploitation and abuse? Provide examples of preventive measures that are normally implemented by your organisation

Implementation and management arrangements

Q17: Partner and stakeholder roles:

- Were the nature and type of roles assigned to you as the implementing partner aligned and consistent with their mandates and capacities? (6.1)
- Did you have the capacity to fully carry out your roles? (6.1)
- What are the roles of the communities, schools and District WASH stakeholders in the implementation of the ASWA Program? And did they have the capacity to fulfil their roles? (6.2)

Q18: Contractual arrangements for beneficiary inclusion:

- How did you ensure the inclusion of needs of different groups were reflected in the implementation arrangements? (3.2)
- Were the needs of different groups specifically included in your ToRs/ contracts with UNICEF? (3.2)
- How were different beneficiary groups involved in the implementation of ASWA and what were their roles? (2.3, 3.1)

Q19: UNICEF support, rules and procedures:

- How much, and what type of, support did you as the implementing partner need? (17.1)
- Did you as the implementing partner have any difficulties with adhering to UNICEF rules and procedures – and if so, did it cause any delays or require any changes of the work plans or targets? (18.1)
- How quickly could UNICEF process payment requests and disburse funds? (14.2)
- Were there any challenges hindering quick and timely disbursements from UNICEF's side or from your side? (14.2)
- What type of support did you receive from UNICEF (programme management, technical, financial, and cross-cutting section staff)? (17.1, 18.2)
- Describe the procurement and contract management procedures applied for the award and implementation of your contract as Implementing Partner for the Program. Please provide examples of possible shortcoming if any and how these could be avoided in the future.
- Was this support adequate to address needs and barriers faced by you as the implementing partner? (17.1, 18.2)

Programme M&E

Q20: results-oriented monitoring:

- Do you find the indicators for measuring results (outcomes and impacts) well-defined and measurable? (5.3)
- How were these indicators monitored during the course of the programme? (5.3, 17.2)
- Did the M&E contribute significantly informed decision-making, or was it mainly used for reporting purposes? (17.2)

Risk management

Q21: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of ASWA? (12.2, 12.3)

- How did these events and barriers affect the implementation? (12.2, 12.3)
- How were the events and barriers managed or mitigated? (12.2)
- Were the events and barriers foreseen, or could they have been foreseen? (12.1)
- How were the assumptions and risks monitored? (12.1)
- In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Financial, human and material resources

Q22: Financial and human resources:

- Were the financial and human resources adequate to ensure effective capacity development? (14.1)

Q23: Community contributions:

- Were the level and quality of community contributions (cash, labour, materials) for WASH infrastructure, community mobilisation and awareness raising sufficient and in accordance with agreements? (14.3)
- Were there any challenges with ensuring sufficient community contributions? (14.3)

Q24: Adequate resources

- Did you as the implementing partner have access to the needed equipment, materials and skilled personnel in all programme locations and central level – and if not, what were the reasons? (14.4)

Coordination and continuation

Q25: National WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at national level to agree on division of labour geographically and thematically? (16.1)
- Were these national dialogue mechanisms efficient? And if any, what challenges were experienced? (16.1)

Q26: District WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at district level to agree on division of labour geographically and thematically? (16.1)
- Were these district dialogue mechanisms efficient? And if any, what challenges were experienced? (16.1)

Other

Q27: Please add any other comments and observations you would like share

KII Guide MWR

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Ministry of Water Resources

Interview with the Ministry of Water Resources Director/ Deputy of Water Resources, Head of Rural Water and head of M&E; followed by discussions with individuals on specific issues on M&E, and implementation experiences as needed.

12.1 Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the sustainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Q3: How would you describe the current situation of WASH in schools and communities?

Q4: What are the main challenges in WASH in Sierra Leone and what can be done to address these?

Programme design, context and needs assessment and stakeholder involvement

Q5: Stakeholder involvement/ consultation in the Program design:

- How were you and the Ministry of Water Resources involved in the formulation of the Program? (2.1)
- During the Program design, were you or MWR involved in the identification of the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) elderly, (vii) women headed households, and (viii) vulnerable and poor households? (2.2)
- To your knowledge, how were beneficiaries involved in identifying these needs? (2.2)
- During the Program design, were you involved in an assessment of the capacities and capacity building needs of National and District MDAs and the Communities, vis-à-vis community-based WASH management and their roles in the Program implementation? (2.3)
- What measures/ activities were included in the Program design to address the identified capacity gaps? (2.3)

WASH improvements for beneficiaries

Q6: Programme targeting and coverage

- Was the Program successful in achieving the planned results? (8.1)
- In your views, did the Program succeed in reducing equity gaps (such as equal access to water for all) in the access to WASH Services? (23.2a)
- If so, please describe how the Program contributed to reducing equity gaps the target communities (23.2b)
- If not, what were the challenges and what lessons can we learn from both the achievement in the equity gap and the challenges? (23.2c)

Q7: Continued access to WASH services:

- Was the Program successful in ensuring continued access to WASH services? 10.1)
- What is the system for O&M of water points? Is it fully in place and functional and with adequate resources at the Program communities? (10.1)
- What is the Ministry's 2019 budget for support to Community Management of WASH Services? (10.11a);
- What are the 2019 maintenance budgets available for the Program districts and wards – and is it adequate compared to requirements? (10.11a, 10.11b)
- To what extent have the government WASH funding allocations changed over the Program implementation period (positive or negative)? (27.2a)
- In your opinion, has the Program contributed to these changes and in which manner? (27.2b)

- Are the mandates of the districts and wards clearly defined and appropriate presently? (27.3a)
- Do the districts and wards have adequate human and financial resources for fulfilling their mandates? (27.3a)
- Have these mandates changed over the Program implementation period – and if so, has the Program contributed to this change? (27.3b)
- Has the level of support to community level WASH from the Ministry of Water Resources and the Districts changed compared to the situation at the start of the Program – if so, what is the change? (10.11c)

Policy and Governance

Q8: WASH Sector Governance:

- How do you find the present WASH sector governance framework in Sierra Leone – is it conducive for improving the access to rural WASH or are there any major gaps or weaknesses? (27.1)
- How has it changed in the last 7 years? (27.1)
- Was the Program aligned with national WASH policies and plans – and which areas of these did the Program contribute to? (1.2)

Q9 ASWA Program contribution to WASH Policy and Governance

- To your knowledge, what new or updated governance documents, guidelines and/ or initiatives/ actions has the Program contributed to? (8.4a)
- How have you used any of these and which ones do you find useful and applicable for the WASH Sector in Sierra Leone – and why? (8.4b, 8.4c)

Q10: Content of Policy and Governance improvements:

- Do the policies, regulations and guidelines developed/ revised with Program support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and women – and how significant was the Program's contribution in this regard? (25.3)
- How did the Program promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and women – can you give some good examples of how their needs were addressed? (25.3)

Gender, human rights and child protection

Q11: Gender equity:

- What approaches were used to promote and ensure equal representation of women and men in WASH decision-making and management? (21.1)
- What was the level of involvement of women – and could anything have been done to enhance their involvement? (21.1)

Q12: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged or disabled, ultra-poor, and others) in WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q13: Child protection:

- Did the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the Program contribute? Is there any evidence of this resulting in lasting changes in the communities and schools? can you provide any examples? (24.1, 24.2)

Were the measures and approaches appropriate – if not, what else would be needed? (24.1)

Program implementation and management arrangements

Q14: Partner and stakeholder roles:

- What was your role in the Program aligned and consistent with your mandate? (6.1a)
- Were there any challenges and how were they resolved to ensure your effective delivery of your role? (6.1a)
- Did you benefit from any capacity-building/ strengthening from the Program to fully carry out your assigned roles -if yes, what support did you get and how did it help? (6.1b)
- How were you or the Ministry involved in Program decision-making on technical or management issues, such as coordination, supervision, monitoring and evaluation? (6.3)
- Were UNICEF rules and procedures conducive for implementation, or did they create delays or constraints that affected the efficient delivery of the intended results? (18.1)

Program M&E

Q15: results-oriented monitoring:

- Was the Ministry directly involved in monitoring Program implementation and progress – and if so, what was the Ministry's role? (17.2)
- Was the Program monitoring building on, and/or contributing to, Ministry monitoring system, tools and indicators, or was it entirely separate? (17.2)
- Do you consider the Program monitoring system and tools effective for facilitating informed decision-making? (17.2b)

- Were there any major challenges or weaknesses in relation to the Program monitoring system and tools, and if any what were they and how were they overcome? (17.2c)
- Do you find the indicators for measuring Program results (outcomes and impacts) well-defined and measurable? (5.3)

Risk management

Q16: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Program? (12.2, 12.3)
- How did these events and barriers affect the implementation? (12.2, 12.3)
- How were the events and barriers managed or mitigated? (12.2)
- In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Coordination and Continuation

Q17: National WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at national level to agree on division of labour geographically and thematically? (16.1)
- Were these national dialogue mechanisms efficient? And if any, what challenges were experienced? What are your suggestions for the improvement of the coordination at national level (16.1)

Q18: Please add any other comments and observations you would like share

KII GUIDE MOHS

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Ministry of Health and Sanitation

Interview with the Ministry of Health and Sanitation Director/Deputy of Environmental Sanitation, Head of Rural Sanitation/CLTS, and Head of M&E followed by discussions with individuals on specific issues on M&E, and implementation experiences as needed.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the stainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Q3: How would you describe the current situation of WASH in schools and communities in Sierra Leone? Is there adequate access to facilities? How does this affect the livelihood and health of the population?

Q4: What are the main challenges in improving access to WASH services

Programme design, context and needs assessment and stakeholder involvement

Q5: Stakeholder involvement/ consultation in the Program design:

- How were you and the Ministry of Health and Sanitation involved in the formulation of the Program? (2.1)
- During the Program design, were you involved in the identification of the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) elderly, (vii) women headed households, and (viii) vulnerable and poor households? (2.2)
- To your knowledge, how were beneficiaries involved in identifying these needs? (2.2)
- During the Program design, were you involved in an assessment of the capacities and capacity building needs of National and District MDAs and the Communities, vis-à-vis community-based WASH management and their roles in the Program implementation? (2.3)
- What measures/ activities were included in the Program design to address the identified capacity gaps? (2.3)

WASH improvements for beneficiaries

Q6: Programme targeting and coverage

- Was the Program successful in achieving the planned results? (8.1)
- In your views, did the Program succeed in reducing equity gaps in the access to WASH Services? (23.2a) If so, please describe how the Program contributed to reducing equity gaps the target communities (23.2b) If not, what were the challenges and what lessons can we learn from both the achievement in the equity gap and the challenges? (23.2c)
- Has the Program been successful in contributing to improving the impact and health targets for women, children and communities? if yes, in what manner do you experience that the health indicators have changed during the implementation of the Program? (26.1)
- Please provide the data available to you on under-5 and general diarrhoea morbidity; and under-5 and general mortality attributable to diarrhoea and other water-borne and hygiene-related diseases, at the start and end of the Program implementation in the target communities (26.2)

Q7: Continued access to WASH services:

- Was the Program successful in ensuring continued access to WASH services? 10.1
- What is the Ministry's 2019 budget for support to CLTS and Hygiene Promotion? (10.11a);

- To what extent have the government WASH funding allocations (CLTS and Hygiene Promotion) changed over the Program implementation period (positive or negative)? (27.2a)
- In your opinion, has the Program contributed to these changes and in which manner? (27.2b)
- Are the mandates for CLTS of the districts and wards clearly defined and appropriate presently) (27.3a)
- Do the districts and wards have adequate human and financial resources for fulfilling their mandates? (27.3a)
- Have these mandates changed over the Program implementation period – and if so, has the Program contributed to this change? (27.3b)

Policy and Governance

Q8: WASH Sector Governance:

- How do you find the present WASH sector governance framework in Sierra Leone – is it conducive for improving the access to rural WASH or are there any major gaps or weaknesses? (27.1)
- How has it changed in the last 7 years? (27.1)
- Was the Program aligned with national WASH policies and plans – and which areas of these did the Program contribute to? (1.2, 27.1)

Q9 ASWA Program contribution to WASH Policy and Governance

- To your knowledge, what new or updated governance documents, guidelines and/ or initiatives/ actions has the Program contributed to? (8.4a)
- How have you used any of these and which ones do you find useful and applicable for the WASH Sector in Sierra Leone – and why? (8.4b, 8.4c)

Q10: Content of Policy and Governance improvements:

- Do the policies, regulations and guidelines developed/ revised with Program support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and women – and how significant was the Program's contribution in this regard? (25.3)
- How did the Program promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and women – can you give some good examples of how their needs were addressed? (25.3)

Gender, human rights and child protection

Q11: Gender equity:

- What approaches were used to promote and ensure equal representation of women and men in WASH decision-making and management? (21.1)

- What was the level of involvement of women – and could anything have been done to enhance their involvement? (21.1)

Q12: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged or disabled, ultra-poor, and others) in WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q13: Child protection:

- Did the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the Program contribute? Is there any evidence of this resulting in lasting changes in the communities and schools? can you provide any examples? (24.1, 24.2)
- Were the measures and approaches appropriate – if not, what else would be needed? (24.1)

Program implementation and management arrangements

Q14: Partner and stakeholder roles:

- What was your role in the Program aligned and consistent with your mandate? (6.1a)
- Were there any challenges and how were they resolved to ensure your effective delivery of your role? (6.1a)
- Did you benefit from any capacity-building/ strengthening from the Program to fully carry out your assigned roles -if yes, what support did you get and how did it help? (6.1b)
- How were you or the Ministry involved in Program decision-making on technical or management issues, such as coordination, supervision, monitoring and evaluation? (6.3)
- Were UNICEF rules and procedures conducive for implementation, or did they create delays or constraints that affected the efficient delivery of the intended results? (18.1)

Program M&E

Q15: results-oriented monitoring:

- Was the Ministry directly involved in monitoring Program implementation and progress – and if so, what was the Ministry’s role? (17.2)
- Was the Program monitoring building on, and/or contributing to, Ministry monitoring system, tools and indicators, or was it entirely separate? (17.2)

- Do you consider the Program monitoring system and tools effective for facilitating informed decision-making? (17.2b)
- Were there any major challenges or weaknesses in relation to the Program monitoring system and tools, and if any what were they and how were they overcome? (17.2c)
- Do you find the indicators for measuring Program results (outcomes and impacts) well-defined and measurable? (5.3)

Risk management

Q16: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Program? (12.2, 12.3)
- How did these events and barriers affect the implementation? (12.2, 12.3)
- How were the events and barriers managed or mitigated? (12.2)
- In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Coordination and Continuation

Q17: National WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at national level to agree on division of labour geographically and thematically? (16.1)
- Were these national dialogue mechanisms efficient? And if any, what challenges were experienced and what are your suggestions for the improvement of the coordination at national level? (16.1)

Q18: Please add any other comments and observations you would like share

KII GUIDE MBSSE

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Ministry of Basic and Senior Secondary Education

Interview with the Ministry of Basic and Senior Secondary Education Dir/Dep Planning and Head of WASH in Schools followed by discussions with individuals on specific issues on M&E, and implementation experiences as needed.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
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- The objective of the evaluation is to ensure accountability, transparency and learning.
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Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Q3: How would you describe the current situation of WASH in schools? Do children have access to adequate facilities? How does this affect their attendance and education?

Q4: How is WASH included in the Free Quality School Education policy? How important is WASH for achieving free education for all?

Programme design, context and needs assessment and stakeholder involvement

Q5: Stakeholder involvement/ consultation in the Program design:

- How were you and the Ministry of Basic and Senior Secondary Education involved in the formulation of the Program? (2.1)
- During the Program design, were you involved in the identification of the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) women headed households, and (viii) vulnerable and poor households? (2.2)
- To your knowledge, how were beneficiaries involved in identifying these needs? (2.2)
- During the Program design, were you involved in an assessment of the capacities and capacity building needs of National and District MDAs and the Schools vis-à-vis WASH management and their roles in the Program implementation? (2.3)
- What measures/ activities were included in the Program design to address the identified capacity gaps? (2.3)

WASH improvements for beneficiaries

Q6: Programme targeting and coverage

- Was the Program successful in achieving the planned results? (8.1) (target: 170 Primary Schools)
- In your views, did the Program succeed in reducing equity gaps in the access to WASH Services? (23.2)
- Has the Program impacted on the absenteeism and attendance rates for girls and boys in the Program schools? if so, please provide available information on the rates in the Program schools at the start and end of the Program implementation (26.4-5)

Q7: Continued access to WASH services:

- Was the Program successful in ensuring continued access to WASH services? 10.1

- What is the system for O&M of school sanitation? Is it fully in place and functional and with adequate resources? (10.2)
- What is the Ministry's 2019 budget for support to School WASH? (10.11a);
- To what extent have the government School WASH funding allocations changed over the Program implementation period (positive or negative)? (27.2a)
- In your opinion, has the Program contributed to these changes and in which manner? (27.2b)
- Are the mandates for School WASH of the districts and wards clearly defined and appropriate presently) (27.3a)
- Do the districts and wards have adequate human and financial resources for fulfilling their mandates? (27.3a)
- Have these mandates changed over the Program implementation period – and if so, has the Program contributed to this change? (27.3b)

Policy and Governance

Q8: WASH Sector Governance:

- How is WASH mentioned in the education sector plan?
- How would you describe the collaboration between education and WASH sectors regarding school WASH to ensure it is properly covered in policy frameworks and national budgets?
- How do you find the present WASH sector governance framework in Sierra Leone – is it conducive for improving the access to School WASH or are there any major gaps or weaknesses? (27.1)
- How has it changed in the last 7 years? (27.1)
- Was the Program aligned with national School WASH policies and plans – and which areas of these did the Program contribute to? (1.2, 27.1)

Q9 ASWA Program contribution to WASH Policy and Governance

- To your knowledge, what new or updated governance documents, guidelines and/ or initiatives/ actions related to School WASH has the Program contributed to? (8.4a)
- How have you used any of these and which ones do you find useful and applicable for the WASH Sector in Sierra Leone – and why? (8.4b, 8.4c)

Q10: Content of Policy and Governance improvements:

- Do the policies, regulations and guidelines developed/ revised with Program support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and girls/ women – and how significant was the Program's contribution in this regard? (25.3)
- How did the Program promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and girls/ women – can you give some good examples of how their needs were addressed? (25.3)

Gender, human rights and child protection

Q9: Gender equity:

- What approaches were used to promote and ensure equal representation of women and men in School WASH decision-making and management? (21.1)
- What was the level of involvement of women – and could anything have been done to enhance their involvement? (21.1)
- What is the importance of ensuring that girls have access to adequate facilities for menstrual hygiene management? How does this affect their school attendance?
- How is menstrual hygiene taught in schools? By whom?

Q10: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, people with disabilities, ultra-poor, youth, other) in School WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q11: Child protection:

- How safe are children in schools? How do you ensure their safety?
- Did the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the Program contribute – can you provide any examples? (24.1, 24.2)
- Were the measures and approaches appropriate – if not, what else would be needed? (24.1)
- Is there any evidence/examples of this resulting in lasting changes in the communities and schools? (24.2)

Program implementation and management arrangements

Q12: Partner and stakeholder roles:

- What was your role in the Program aligned and consistent with your mandate for School WASH? (6.1a)
- Were there any challenges and how were they resolved to ensure your effective delivery of your role? (6.1a)
- Did you benefit from any capacity-building/ strengthening from the Program to fully carry out your assigned roles -if yes, what support did you get and how did it help? (6.1b)
- How were you or the Ministry involved in Program decision-making on technical or management issues, such as coordination, supervision, monitoring and evaluation? (6.3)

- Were UNICEF rules and procedures conducive for implementation, or did they create delays or constraints that affected the efficient delivery of the intended results? (18.1)

Program M&E

Q13: results-oriented monitoring:

- Was the Ministry directly involved in monitoring Program implementation and progress – and if so, what was the Ministry's role? (17.2)
- Was the Program monitoring building on, and/or contributing to, Ministry monitoring system, tools and indicators, or was it entirely separate? (17.2)
- Do you consider the Program monitoring system and tools effective for facilitating informed decision-making? (17.2b)
- Were there any major challenges or weaknesses in relation to the Program monitoring system and tools, and if any what were they and how were they overcome? (17.2c)
- Do you find the indicators for measuring Program results (outcomes and impacts) well-defined and measurable? (5.3)

Risk management

Q14: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Program? (12.2, 12.3)
- How did these events and barriers affect the implementation? (12.2, 12.3)
- How were the events and barriers managed or mitigated? (12.2)

In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Coordination and Continuation

Q15: National WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at national level to agree on division of labour geographically and thematically? (16.1)
- Were these national dialogue mechanisms efficient? And if any, what challenges were experienced and what are your suggestions for the improvement of the coordination at national level? (16.1)

Q16: Please add any other comments and observations you would like share

KII GUIDE MLGRD

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Ministry of Local Government and Rural Development

Interview with the Ministry of Local Government and Rural Development Director of Local Government, Director of Decentralisation Secretariat and M&E Manager followed by discussions with individuals on specific issues on M&E, and implementation experiences as needed.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the sustainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Q3: How would you describe the current situation of WASH in Sierra Leone? And generally the WASH challenges in relation to the decentralisation process and district and local level capacities?

Programme design, context and needs assessment and stakeholder involvement

Q4: Stakeholder involvement/ consultation in the Program design:

- How were you and the Ministry of Local Government and Rural Development involved in the formulation of the Program? (2.1)
- During the Program design, were you involved in the identification of the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) elderly, (vii) women headed households, and (viii) vulnerable and poor households? (2.2)
- To your knowledge, how were beneficiaries involved in identifying these needs? (2.2)
- During the Program design, were you involved in an assessment of the capacities and capacity building needs of National and District MDAs and the Schools vis-à-vis WASH management and their roles in the Program implementation? (2.3)
- What measures/ activities were included in the Program design to address the identified capacity gaps? (2.3)
- How do you see the Program alignment with the national and district WASH plans? Please explain how significant was the extent to which the Program contributed to the Koinadugu and Bonthe Districts' plans and achievements? (1.2, 1.3)

WASH improvements for beneficiaries

Q5: Programme targeting and coverage

- Was the Program successful in achieving the planned results? (8.1)
- In your views, did the Program succeed in reducing equity gaps in the access to WASH Services? (23.2)

Q6: Continued access to WASH services:

- Was the Program successful in ensuring continued access to WASH services? 10.1)
- What is the system for O&M of community WASH? Is it fully in place and functional and with adequate resources? (10.2)
- What is the Ministry's 2019 budget for support to WASH? (10.11);
- To what extent have the government WASH funding allocations changed over the Program implementation period (positive or negative)? (27.2)
- In your opinion, has the Program contributed to these changes and in which manner? (27.2)
- Are the mandates for WASH of the districts and wards clearly defined and appropriate presently? Have these mandates changed over the Program implementation period – and if so, has the Program contributed to this change? (27.3)
- Do the districts and wards have adequate human and financial resources for fulfilling their mandates? (27.3)

Policy and Governance

Q7: WASH Sector Governance:

- How do you find the present WASH sector governance framework in Sierra Leone – is it conducive for improving the access to WASH or are there any major gaps or weaknesses? (27.1)
- How has it changed in the last 7 years? (27.1)
- Was the Program aligned with national WASH policies and plans – and which areas of these did the Program contribute to? (1.2, 27.1)

Q8 ASWA Program contribution to WASH Policy and Governance

- To your knowledge, what new or updated governance documents, guidelines and/ or initiatives/ actions related to WASH has the Program contributed to? (8.4a)
- How have you used any of these and which ones do you find useful and applicable for the WASH Sector in Sierra Leone – and why? (8.4)

Q9: Content of Policy and Governance improvements:

- Do the policies, regulations and guidelines developed/ revised with Program support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and girls/ women – and how significant was the Program's contribution in this regard? (25.3)
- How did the Program promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and girls/ women – can you give some good examples of how their needs were addressed? (25.3)

Gender, human rights and child protection

Q10: Gender equity:

- What approaches were used to promote and ensure equal representation of women and men in Community and School WASH decision-making and management? (21.1)
- What was the level of involvement of women – and could anything have been done to enhance their involvement? (21.1)

Q11: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged or disabled, ultra-poor, and others) in Community WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q12: Child protection:

- Did the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the Program contribute? Is there any evidence of this resulting in lasting changes in the communities and schools? can you provide any examples? (24.1, 24.2)
- Were the measures and approaches appropriate – if not, what else would be needed? (24.1)

Program implementation and management arrangements

Q13: Partner and stakeholder roles:

- What was your role in the Program aligned and consistent with your mandate for WASH? (6.1)
- Were there any challenges and how were they resolved to ensure your effective delivery of your role? (6.1)
- Did you benefit from any capacity-building/ strengthening from the Program to fully carry out your assigned roles -if yes, what support did you get and how did it help? (6.1)
- How were you or the Ministry involved in Program decision-making on technical or management issues, such as coordination, supervision, monitoring and evaluation? (6.3)
- Were UNICEF rules and procedures conducive for implementation, or did they create delays or constraints that affected the efficient delivery of the intended results? (18.1)

Program M&E

Q14: results-oriented monitoring:

- Was the Ministry directly involved in monitoring Program implementation and progress – and if so, what was the Ministry’s role? (17.2)
- Was the Program monitoring building on, and/or contributing to, Ministry monitoring system, tools and indicators, or was it entirely separate? (17.2)
- Do you consider the Program monitoring system and tools effective for facilitating informed decision-making? (17.2)
- Were there any major challenges or weaknesses in relation to the Program monitoring system and tools, and if any what were they and how were they overcome? (17.2)
- Do you find the indicators for measuring Program results (outcomes and impacts) well-defined and measurable? (5.3)

Risk management

Q15: Risk management and mitigation:

What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Program? (12.2, 12.3)

How did these events and barriers affect the implementation? (12.2, 12.3)

How were the events and barriers managed or mitigated? (12.2)

In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Coordination and Continuation

Q16: National WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at national and District levels to agree on division of labour geographically and thematically? (16.1)
- Were these dialogue mechanisms efficient? And if any, what challenges were experienced and what are your suggestions for the improvement of the coordination at national level? (16.1)

Q17: WASH budgets for continuation:

- Have the Program target district/ wards planned and budgeted for post-program monitoring and O&M support for WASH infrastructure? If so in what form and are the resources considered adequate? (20.1)
- Have the Program target district/ wards planned and budgeted for replication of the Program WASH activities? If so in what form and are the resources considered adequate? (20.2)
- To what extent have the government WASH funding allocations changed over the Program Implementation period (positive or negative)? In your opinion, has the Program contributed to these changes and in which manner? (27.2)

Q18: Please add any other comments and observations you would like share

KII GUIDE NON-IMPLEMENTING AGENCIES

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Non-Implementing Agencies

This KII Guide will be used to facilitate interviews with the Chief Gender Specialist, Ministry of Gender and Children's Affairs, and the Commissioner/Deputy, National Commission for Persons with Disabilities as well as International NGOs involved in WASH, gender and social development

Brief introduction to the ASWA Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the sustainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

Questions

Q1: Are there any instruments and/or frameworks and Guidelines (e.g. institutional, legal, byelaws, policy and regulatory, and M&E frameworks, targeting mechanisms etc.) in your Ministry that helped to address the specific needs of the disadvantaged groups such PWD and women?

Context/ follow-up questions:

- If yes, please provide some reference document the type of instrument/ framework/ mechanism/ guidelines used in your Ministry that can help improved access to service by these PWD and women?

Q2: We understand you are involved with gender, equity and human right issues. Please describe some of the main issues facing women and people with disabilities when it comes to WASH issues in rural areas?

Context/ follow-up questions:

- What is the most effective way for the Government and its partners to approach these problems?
- What are the barriers affecting equitable and effective access to WASH services and facilities?

Q3: In your view, what are the main aspects to consider when designing Rural WASH programs in order to integrate gender and equity issues?

- Safety and human right issues
- Change-behaviour Messaging
- Universal Access to WASH Services

Q4: How should the WASH needs and barriers of women be addressed during planning and the implementation

Context/ follow-up questions:

- how would this improve the access and usage of WASH services by the women?

Q5: How should the WASH needs and barriers of vulnerable or marginalized children (boys and girls that are orphans, homeless and) be addressed during planning and the implementation?

Context/ follow-up questions:

- how would this improve the access and usage of WASH services by these of vulnerable or marginalized children?

Q6: How should the WASH needs and barriers of PWDs be addressed in the planning and during the implementation?

Context/ follow-up questions:

- how would these improve the access and usage of WASH services by the PWDs?

Q7: What are the various gender equity gaps experienced at rural community-level,

Context/ follow-up questions:

- how can they be changed over a WASH program life-span
- Gender equity refers to fairness of treatment for PWD, women and men, according to their respective needs

Q8: Are you aware of any of the policies, plans, strategies and guidelines that have been established, updated or revised with support from ASWA and if so, what is your views on their quality and utility

KII GUIDE DISTRICT COUNCILS

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

District Councils

Interview with the District Councils in Bonte and Koinadugu with participation of the Development Planning Officer; the M&E Officer and the WASH Officer followed by discussions with individuals on specific issues on M&E, and implementation experiences as needed.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the stainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Programme design, context and needs assessment and stakeholder involvement

Q3: Stakeholder involvement/ consultation in the Program design:

- How were you and the District Council involved in the formulation of the Program? (2.1)
- During the Program design, were you involved in the identification of the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) elderly, (vii) female headed households, and (viii) vulnerable and poor households? (2.2)
- To your knowledge, how were beneficiaries involved in identifying these needs? (2.2)
- During the Program design, were you involved in an assessment of the capacities and capacity building needs of District MDAs and the Schools vis-à-vis WASH management and their roles in the Program implementation? (2.3) Please explain
- What measures/ activities were included in the Program design to address the identified capacity gaps? (2.3)
- How do you see the Program alignment with the district WASH plans? In which way did the Program contribute to the District's plans and achievements? (1.3)

WASH improvements for beneficiaries

Q4: Programme targeting and coverage

- Was the Program successful in achieving the planned results? (8.1)
- Did the Program target locations with i) low access to WASH? ii) High rates of water borne diseases?, and iii) high levels of poverty? If so please explain the targeting procedures? (4.1-4.3)
- In your views, how did the Program succeed in reducing equity gaps in the access to WASH Services?
 - If not what were the challenges and what lessons can we learn? (23.2)

Q5: Continued access to WASH services:

- Was the Program successful in ensuring continued access of the population to WASH services? (10.1)
- Please describe how successful the Program has been in improving the WASH awareness and hygiene practices in the communities and schools, respectively?
- What are the changes/ results of these action in the communities and schools? (9.1)

- What is the system for O&M of community WASH? Is it fully in place and functional and with adequate resources in your district ? (10.2)
- How functional are the WASH Committees in the communities in the Program area?
 - Equitable representation
 - Raising maintenance funds
 - Securing and cleaning water points?
 - What are the challenges (10.5)
- Could you mention the spare part shops accessible for the communities and pump mechanics in the ASWA Program target area (10.8)
- Could you mention the hand pump mechanics available for the communities in the ASWA Program target area? Are these trained and certified? (10.9b)

Q6: Council Support to WASH services:

- What is the WASH mandate of the districts and wards?
- How have these mandates changed over the Program implementation period – and if so, has the Program contributed to this change? (27.3)
- How have these changes affected the way districts and wards operate within their WASH mandate?
- Do the districts and wards have adequate human and financial resources for fulfilling their mandates? (27.3)
- What is the District's 2019 budget for support to WASH? (10.11)
- How have the District WASH funding allocations changed over the Program implementation period (positive or negative)? In your opinion, has the Program contributed to these changes and in which manner? (27.2)
- How often do the District WASH officials and Ward/ Chiefdom officials carry out monitoring/ inspection visits and at which stages of the activity implementation? Do these visits also cover the remote locations in the Program areas (10.10)
- What is the 2019 maintenance budgets available for the Districts and Wards? Is this considered adequate compared to requirements (10.11)
- Has the level of support to community level WASH changed compared to the situation at the start of the Program? if so how? (10.11)

Policy and Governance

Q7: WASH Sector Governance:

- How do you find the present WASH sector governance framework in Sierra Leone – is it conducive for improving the access to WASH or are there any major gaps or weaknesses? (27.1)
- How has it changed in the last 7 years? (27.1)
- Was the Program aligned with the District WASH plans – and which areas of these did the Program contribute to? (1.2, 27.1)

Q8 ASWA Program contribution to WASH Policy and Governance

- To your knowledge, what new or updated governance documents, guidelines and/ or initiatives/ actions related to WASH has the Program contributed to? (8.4a)
- How have you used any of these and which ones do you find useful and applicable for the WASH Sector in Sierra Leone – and why? (8.4)

Q9: Content of Policy and Governance improvements:

- Do the policies, regulations and guidelines developed/ revised with Program support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and girls/ women – and how significant was the Program's contribution in this regard? (25.3)
- How did the Program promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and girls/ women – can you give some good examples of how their needs were addressed? (25.3)

Gender, human rights and child protection

Q10: Gender equity:

- What approaches were used to promote and ensure equal representation of women and men in Community WASH decision-making and management? (21.1)
- What was the level of involvement of women – and could anything have been done to enhance their involvement? (21.1)

Q11: Inclusion of all groups:

- What approaches were used to ensure adequate participation of young and old and vulnerable groups (such as women headed households, people with disabilities, ultra-poor, other) in Community WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q12: Child protection:

- Did the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the Program contribute – can you provide any examples? (24.1, 24.2)
- Were the measures and approaches appropriate – if not, what else would be needed? (24.1)
- Are there any evidence/ examples of this resulting in lasting changes in the communities and schools? (24.2)

Program implementation and management arrangements

Q13: Partner and stakeholder roles:

- Was your role in the Program aligned and consistent with your mandate for WASH? (6.1)
- Were there any challenges and how were these resolved to ensure your effective delivery of your role? (6.1)
- Did you benefit from any capacity-building/ strengthening from the Program to fully carry out your assigned roles -if yes, what support did you get and how did it help? (6.1)
- How were you or the District Council involved in Program decision-making on technical or management issues, such as coordination, supervision, monitoring and evaluation? (6.3)
- How did UNICEF rules and procedures affected the overall implementation of the programme?
 - How did they help supporting efficient implementation?
 - If experienced delays and constraints, how did they affect the efficient delivery of the intended results? (18.1)

Program M&E

Q14: results-oriented monitoring:

- How was the District Council directly involved in monitoring Program implementation and progress ? (17.2)
- How was the Program monitoring building on, and/or contributing to, Council monitoring system, tools and indicators? (17.2)
- Do you consider the Program monitoring system and tools effective for facilitating informed decision-making? Why? (17.2)
- Were there any major challenges or weaknesses in relation to the Program monitoring system and tools, and if any what were they and how were they overcome? (17.2)

Risk management

Q15: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Program? (12.2, 12.3)
- How did these events and barriers affect the implementation? (12.2, 12.3)
- How were the events and barriers managed or mitigated? (12.2)
- In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to

transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Financial, human and material resources

Q16: Risk management and mitigation:

- Were the financial and human resources adequate to i) ensure the achievement of quality WASH infrastructure and ii) ensure effective capacity development? (14.1) In which way?
- How did the community contributed (cash, labour, materials) to activity implementation for WASH infrastructure, community mobilisation and awareness raising sufficient and in accordance with agreements?
 - Did it work well?
 - Was the programme able to raise a sufficient level of contribution?
 - What were the challenges with ensuring sufficient community contributions? (14.3)
- Were there any other identified risks and challenges that affected implementing partners' access to needed equipment, materials and skilled personnel in all programme locations and central level? Which one?
 - W – and if not, what were the reasons? (14.4)

Coordination and Continuation

Q17: District WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at district and ward level to agree on division of labour geographically and thematically? (15.1)
- Were these dialogue mechanisms efficient? And if any, what challenges were experienced and what are your suggestions for the improvement of the coordination at district level? (15.1)

Q17: District Support to WASH:

- What type of support/ facilitation has been provided by Districts and Wards/ Chiefdoms for the implementation of the Program? (15.2)
- Was the support/ facilitation adequate? and if any, what type of challenges have been experienced? (15.2)

Q18: WASH budgets for continuation:

- Have the District Council planned and budgeted for post-program monitoring and O&M support for WASH infrastructure? If so in what form and are the resources considered adequate? (20.1)

- Have the District Council planned and budgeted for replication of the Program WASH activities in other communities? If so in what form and are the resources considered adequate? (20.2)
- What were the 2019 expenditures and what is the 2020 budget allocation? (20.1)
- To what extent have the District Council WASH funding allocations changed over the Program Implementation period (positive or negative)? In your opinion, has the Program contributed to these changes and in which manner? (27.2)

Q19: Please add any other comments and observations you would like share

KII GUIDE DHMT

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

District Health Management Team

Interview with the Ministry of Health and Sanitation staff at District level – District Health Officer, Public Health Nurse, Environmental Health Officer; followed by discussions with individuals on specific issues on CLTS, and implementation experiences as needed.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the sustainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Q3: How would you describe the current situation of WASH in the communities and schools in the District? Is there access to adequate facilities? How does this affect the livelihood and health of people?

Programme design, context and needs assessment and stakeholder involvement

Q4: Stakeholder involvement/ consultation in the Program design:

- How were you and the Ministry of Health and Sanitation in the District involved in the formulation of the Program? (2.1)
- During the Program design, were you involved in the identification of the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) elderly, (vii) women headed households, and (viii) vulnerable and poor households? (2.2)
- To your knowledge, how were beneficiaries involved in identifying these needs? (2.2)
- During the Program design, were you involved in an assessment of the capacities and capacity building needs of the Districts and the Communities, vis-à-vis community-based WASH management and their roles in the Program implementation? (2.3)
- What measures/ activities were included in the Program design to address the identified capacity gaps? (2.3)

WASH improvements for beneficiaries

Q5: Programme targeting and coverage

- Was the Program successful in achieving the planned results? (8.1)
- In your views, did the Program succeed in reducing equity gaps in the access to WASH Services? If so, please describe how the Program contributed to reducing equity gaps the target communities; If not, what were the challenges and what lessons can we learn from both the achievement in the equity gap and the challenges? (23.2)
- Has the Program been successful in contributing to improving the impact and health targets for women, children and communities? if yes, in what manner do you experience that the health indicators have changed during the implementation of the Program? (26.1)
- Please provide the data available to you on under-5 and general diarrhoea morbidity; and under-5 and general mortality attributable to diarrhoea and other water-borne and hygiene-related diseases, at the start and end of the Program implementation in the target communities (26.2)

Q6: Continued access to WASH services:

- Was the Program successful in ensuring continued access to WASH services? 10.1)
- What is the Ministry's 2019 budget for support to CLTS and Hygiene Promotion in the District? (10.11a);
- To what extent have the government WASH funding allocations (CLTS and Hygiene Promotion) changed over the Program implementation period (positive or negative)? (27.2a)

- In your opinion, has the Program contributed to these changes and in which manner? (27.2b)
- Are the mandates for CLTS of the districts and wards clearly defined and appropriate presently? (27.3)
- Do the districts and wards have adequate human and financial resources for fulfilling their mandates? (27.3a)
- Have these mandates changed over the Program implementation period – and if so, has the Program contributed to this change? (27.3b)

Policy and Governance

Q7: WASH Sector Governance:

- How do you find the present WASH sector governance framework in Sierra Leone – is it conducive for improving the access to rural WASH or are there any major gaps or weaknesses? (27.1)
- How has it changed in the last 7 years? (27.1)
- Was the Program aligned with national WASH policies and plans – and which areas of these did the Program contribute to? (1.2, 27.1)

Q8 ASWA Program contribution to WASH Policy and Governance

- To your knowledge, what new or updated governance documents, guidelines and/ or initiatives/ actions has the Program contributed to? (8.4a)
- How have you used any of these and which ones do you find useful and applicable for the WASH Sector in Sierra Leone – and why? (8.4b, 8.4c)

Q9: Content of Policy and Governance improvements:

- Do the policies, regulations and guidelines developed/ revised with Program support contain clearly defined objectives and approaches vis-a-vis the needs of disadvantaged groups and women – and how significant was the Program's contribution in this regard? (25.3)
- How did the Program promote the inclusion of clearly defined objectives and approaches vis-à-vis the needs of disadvantaged groups and women – can you give some good examples of how their needs were addressed? (25.3)

Gender, human rights and child protection

Q10: Gender equity:

- What approaches were used to promote and ensure equal representation of women and men in WASH decision-making and management? (21.1)
- What was the level of involvement of women – and could anything have been done to enhance their involvement? (21.1)

Q11: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged or disabled, ultra-poor, and others) in WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q12: Child protection:

- Did the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the Program contribute? Is there any evidence of this resulting in lasting changes in the communities and schools? can you provide any examples? (24.1, 24.2)
- Were the measures and approaches appropriate – if not, what else would be needed? (24.1)

Program implementation and management arrangements

Q13: Partner and stakeholder roles:

- What was your role in the Program aligned and consistent with your mandate? (6.1a)
- Were there any challenges and how were they resolved to ensure your effective delivery of your role? (6.1a)
- Did you benefit from any capacity-building/ strengthening from the Program to fully carry out your assigned roles -if yes, what support did you get and how did it help? (6.1b)
- How were you or the MoHS involved in Program decision-making on technical or management issues, such as coordination, supervision, monitoring and evaluation? (6.3)
- Were UNICEF rules and procedures conducive for implementation, or did they create delays or constraints that affected the efficient delivery of the intended results? (18.1)

Program M&E

Q14: results-oriented monitoring:

- Were you or the MoHS directly involved in monitoring Program implementation and progress – and if so, what was the Ministry's role? (17.2)
- Was the Program monitoring building on, and/or contributing to, Ministry monitoring system, tools and indicators, or was it entirely separate? (17.2)
- Do you consider the Program monitoring system and tools effective for facilitating informed decision-making? (17.2b)

- Were there any major challenges or weaknesses in relation to the Program monitoring system and tools, and if any what were they and how were they overcome? (17.2c)
- Do you find the indicators for measuring Program results (outcomes and impacts) well-defined and measurable? (5.3)

Risk management

Q15: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Program? (12.2, 12.3)
- How did these events and barriers affect the implementation? (12.2, 12.3)
- How were the events and barriers managed or mitigated? (12.2)
- In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Coordination and Continuation

Q16: District WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at District level to agree on division of labour geographically and thematically? (16.1)
- Were these dialogue mechanisms efficient? And if any, what challenges were experienced and what are your suggestions for the improvement of the coordination? (16.1)

Q17: Please add any other comments and observations you would like share

KII GUIDE MWR DISTRICT STAFF

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

MWR District Staff

Interview with the Ministry of Water Resources Engineers and Water Point Mappers stationed at District or Regional Level covering Bonthe, Koinadugu and Falaba Districts.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
- The Program focused on rural sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The Program also included activities for strengthening the national sector governance and a focus on improving the sustainability through improved management and maintenance systems.
- The objective of the evaluation is to ensure accountability, transparency and learning.
- ASWA II Program is now being implemented, but the evaluation focuses on the ASWA I Program, completed in Dec 2019

Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Q3: how do you see the WASH situation in your district and what are the main challenges for improving access to WASH?

Programme design, context and needs assessment and stakeholder involvement

Q4: Stakeholder involvement/ consultation in the Program design:

- How were you involved in the formulation of the Program? (2.1)
- During the Program design, were you or MWR involved in the identification of the specific and most important WASH needs of (i) women, (ii) men, (iii) girls, (iv) boys, (v) disabled, (vi) elderly, (vii) women headed households, and (viii) vulnerable and poor households? (2.2)
- To your knowledge, how were beneficiaries involved in identifying these needs? (2.2)
- During the Program design, were you involved in an assessment of the capacities and capacity building needs of Districts and the Communities, vis-à-vis community-based WASH management and their roles in the Program implementation? (2.3)
- What measures/ activities were included in the Program design to address the identified capacity gaps? (2.3)

WASH improvements for beneficiaries

Q4: WASH Management and Water Point O&M

- Are the WASH Committees fully functioning in the communities in the Program area? If so how functional are they in terms of meeting desired requirements such as raising maintenance funds, securing and cleaning water points? And if not, what are the challenges (10.5)
- What is the system for O&M of water points? Is it fully in place and functional and with adequate resources at community level? (10.1)
- Could you mention the spare part shops accessible for the communities and pump mechanics in the ASWA Program target area (10.8)
- Could you mention the hand pump mechanics available for the communities in the ASWA Program target area? Are these trained and certified? (10.9)

Q5: Support to Community WASH

- How often do the District WASH officials carry out monitoring/ inspection visits and at which stages of the implementation activities? (10.10)

- How often do you carry out monitoring/ inspection visits on behalf of the MWR or the District Council and at which stages of the implementation activities? Do these visits also cover the remote locations in the Program areas (10.10)
- What is the 2019 budgets available for the MWR activities in the district? Is this considered adequate compared to requirements (10.11)
- Has the level of support from the MWR to community level WASH changed compared to the situation at the start of the Program? if so what is the change? (10.11)

Policy and Governance

Q6 ASWA Program contribution to WASH Policy and Governance

To your knowledge, what new or updated governance documents, guidelines and/ or initiatives/ actions has the Program contributed to? (8.4a)

How have you used any of these and which ones do you find useful and applicable for the WASH Sector in Sierra Leone – and why? (8.4b, 8.4c)

Program implementation and management arrangements

Q7: Partner and stakeholder roles:

- What was your role in the Program aligned and consistent with your mandate? Were there any challenges and how were they resolved to ensure your effective delivery of your role? (6.1)
- Did you benefit from any capacity-building/ strengthening from the Program to fully carry out your assigned roles -if yes, what support did you get and how did it help? (6.1)
- How were you or the MWR involved in Program decision-making on technical or management issues, such as coordination, supervision, monitoring and evaluation? (6.3)
- Were UNICEF rules and procedures conducive for implementation, or did they create delays or constraints that affected the efficient delivery of the intended results? (18.1)

Program M&E

Q8: results-oriented monitoring:

- Were you or the MWR directly involved in monitoring Program implementation and progress – and if so, what was your role? (17.2)
- Was the Program monitoring building on, and/or contributing to, Ministry monitoring system, tools and indicators, or was it entirely separate? (17.2)
- Do you consider the Program monitoring system and tools effective for facilitating informed decision-making? (17.2)

- Were there any major challenges or weaknesses in relation to the Program monitoring system and tools, and if any what were they and how were they overcome? (17.2)

Risk management

Q16: Risk management and mitigation:

- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Program? (12.2, 12.3)
- How did these events and barriers affect the implementation? How were the events and barriers managed or mitigated? (12.2, 12.3)
- In your view, were the procurement and contract management procedures applied in the implementation of the Program adequate to mitigate any risks related to transparency and good governance in the administration. Please provide examples of possible shortcoming if any and how these could be avoided in the future.

Financial, human and material resources

Q9: Resources for Implementation:

- Did you experience any challenges by the Implementers concerning availability of equipment and quality materials for construction of WASH infrastructure? (14.4)
- Did you experience any challenges by the Implementers concerning availability of skilled/ qualified personnel? (15.5)

Coordination and Continuation

Q10: District WASH coordination and dialogue:

- What mechanisms were used for dialogue and information-sharing with other WASH implementers and donors at District level to agree on division of labour geographically and thematically? (16.1)
- Were these District dialogue mechanisms efficient? And if any, what challenges were experienced? What are your suggestions for the improvement of the coordination at District level (16.1)

Q11: Please add any other comments and observations you would like share

KII GUIDE HEALTH NURSE

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

PHU Public Health Nurses

Interview with the Ministry of Health and Sanitation staff at Health Centre level covering the communities targeted by the ASWA Program.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
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Program Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

Q3: How would you describe the current situation of WASH in Health Centres and in the schools and communities? Do people have access to adequate facilities? How does this affect their livelihood and health situation?

WASH improvements for beneficiaries

Q4: Programme targeting and coverage

- In your views, did the Program succeed in reducing equity gaps in the access to WASH Services? If so, please describe how the Program contributed to reducing equity gaps the target communities; If not, what were the challenges and what lessons can we learn from both the achievement in the equity gap and the challenges? (23.2)
- Has the Program been successful in contributing to improving the impact and health targets for women, children and communities? if yes, in what manner do you experience that the health indicators have changed during the implementation of the Program? (26.1)
- Please provide the data available to you on under-5 and general diarrhoea morbidity; and under-5 and general mortality attributable to diarrhoea and other water-borne and hygiene-related diseases, at the start and end of the Program implementation in the target communities (26.2)

Gender, human rights and child protection

Q5: Gender equity:

- How do you find the level of involvement of women in the Program – and could anything have been done to enhance their involvement? (21.1)

Q6: Inclusion of vulnerable groups:

- How do you find the approaches that were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged or disabled, ultra-poor, and others) in WASH decision making and management? (21.1)
- What was the level of involvement of these vulnerable groups and could anything have been done to enhance their involvement? (21.1)

Q7: Child protection:

- Did you experience the Program contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1)
- How did the Program contribute? Is there any evidence of this resulting in lasting changes in the communities and schools? can you provide any examples? (24.1, 24.2)
- Were the measures and approaches appropriate – if not, what else would be needed? (24.1)

Q8: Please add any other comments and observations you would like share

KII Guide Schools

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Schools

Interview with the Head Teachers and a Female Teacher in selected Schools in the ASWA target communities where WASH in schools has been implemented.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
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Program Targets:

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- 355,883 people in 700 villages have sustainable access to basic sanitation
- 170 primary schools have access to functional, child friendly WASH facilities

KI and involvement in ASWA Program

Q1: What is your name, and position?

Q2: Please explain how you were involved in the Program?

- What was the role of the School and other partners in the implementation of the Project? (6.2)

Q3: How would you describe the current situation of WASH in your school? Do children have access to adequate facilities? How does this affect their attendance and education?

Programme design, context and needs assessment and stakeholder involvement

Q4: Stakeholder involvement/ consultation in the Program design:

- How were you involved in the planning of the Project in your School? (2.1)

WASH improvements for beneficiaries

Q5: Program success

- Was the Project successful in achieving the results in your school? (8.1)
- Do you see any changes in the WASH awareness and hygiene practices in your school as a result of the ASWA Program? What are these changes? (9.2)
- Are female students aware of and practice menstrual hygiene at schools and elsewhere? How large a proportion of the female students do you think practice good menstrual hygiene? (9.3)
- Has the Program impacted on the absenteeism and attendance rates for girls and boys in the Program schools? if so, please provide available information on the rates in the Program schools at the start and end of the Program implementation (26.4-5)

Q6: Continued access to WASH services:

- Is your sanitation facilities presently fully functional, hygienic and well maintained? And if not what is the problem? (10.2)
- Has the sanitation facility ever broken down and if so, how did you fix it? (10.2)
- How will you maintain the sanitation facility if it brakes down? And do you have all the resources and access to expertise to do this? (10.2). How do you get resources for maintaining water and sanitation facilities at your school? What are the present resources available for maintenance and do you consider that adequate? (10.7)
- Is the School Management Committee (SMC) in your institution fully functioning? and if not, what are the challenges? Is the SMC involved in decisions concerning WASH services? (10.3)
- Do you have School Health Clubs (SHCs) in your school? Are they fully functioning? And if not, what are the challenges? (10.4)

Q7: Support

- To what extent have the School WASH funding allocations changed over the Program implementation period (positive or negative)? (27.2)
- In your opinion, has the Program contributed to these changes and in which manner? (27.2)
- Are the mandates for School WASH of the School, the districts and wards clearly defined and appropriate presently) (27.3)
- Do the districts and wards have adequate human and financial resources for fulfilling their mandates? (27.3)

- Have these mandates changed over the Program implementation period – and if so, has the Program contributed to this change? (27.3)

Gender, human rights and child protection

Q8: Gender equity:

- What approaches were used to promote and ensure equal representation of women and men in the SMC and WASH decision-making and management generally in the school? (21.1)
- What was the level of involvement of women and could anything have been done to enhance their involvement? (21.1)
- What were the number and roles of female representatives in the SMC/ school WASH decision-making, management, and O&M (22.5)

Q9: Inclusion of vulnerable groups:

- What approaches were used to ensure adequate participation of vulnerable groups (such as women headed households, physically challenged or disabled, ultra-poor, and others) in the SMC/ PTA and in WASH decision making and management? (21.1)
- What was the level of involvement of these groups and could anything have been done to enhance their involvement? (21.1)
- What were the number and roles of representatives from vulnerable groups in the SMC/ school WASH decision-making, management, and O&M (22.5)

Q10: Child protection:

- Did ASWA contribute significantly to the protection of children (girls and boys) and women, e.g. from sexual exploitation and abuse? (24.1) How did ASWA contribute? Is there any evidence/ examples of this resulting in lasting changes in the school? – can you provide any examples? (24.1, 24.2)
- Were the measures and approaches adequate – if not, what else would be needed? (24.1)

Risk management

Q11: Risk management and mitigation:

- Describe any unintended results you have noticed in relation to WASH in the School (11.1)
- What in your opinion has worked well in the project interventions? and what did not work so well? (11.1)
- What were the major events (e.g. Ebola, mudslides, floods, elections) or barriers (e.g. cultural, social and political factors) that affected the implementation of the Project (12.2, 12.3)

- How did these events and barriers affect the implementation? (12.2, 12.3)

Q12: Please add any other comments and observations you would like share

KII GUIDE PRIVATE SECTOR OPERATORS

ASWA Sierra Leone Evaluation

Key Informant Interview (KII) Guide

Private Sector Operators

Interview with the Private Sector Operators providing WASH Services such as Hand Pump Maintenance, Spare Parts Supply and Sanitation Materials Supply servicing the target communities in Bonthe, Koinadugu and Falaba Districts.

Brief introduction to Program

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) Program in Sierra Leone from 2012/13-2019 – referred to in the following as ‘the Program’.
- The Program was implemented by the Government of Sierra Leone and UNICEF with support from the Dutch Government (DGIS).
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- The objective of the evaluation is to ensure accountability, transparency and learning.
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Targets:

- 48,000 people in 90 villages have sustainable access to improved water through 90 water points
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- 170 primary schools have access to functional, child friendly WASH facilities

Hand Pump Mechanics

Identification of the Respondent

A. What is your name, position, and organisation/ business?

Involvement with ASWA projects

Q1. Describe how you first became involved in the WASH Sector and in the UNICEF Program.

Capacity building or support received.

Q2. What training did you receive in HP installation, maintenance and repair, do you have any suggestions about how this training could have been improved?

Q3. Were you issued with a set of hand pump repair tools, if so, have you found this set of tools to be adequate to carry out HP maintenance and repair.

Q4. Describe any other support and assistance you have received after training and was this support and assistance adequate and how could it have been improved?

Profitability of business.

Q5. On average how many hand pump repairs do you carry out every month?

Q6. Are you satisfied with the volume of business generated by hand pump maintenance and repair?

Q7. Has this volume of business increased, decreased, or stayed about the same over the past year?

Q8. What are the main problems you experience in your work as a hand pump mechanic? (e.g. obtaining parts, quality and cost of parts, transporting tools and equipment to site, technical difficulties, getting paid, etc).

Q9. Do you intend to continue working as a hand pump mechanic?

Q10. Is hand pump maintenance the only business you do? If not what other services/ business areas are you involved in? what part of your income comes from the hand pump maintenance?

Any other comments and observations you would like share

Hand Pump Spare part Dealers

Identification of the Respondent

A. What is your name, position, and organisation/ business?

Involvement with ASWA projects

Q1. Describe how you first became involved in the WASH Sector and in the UNICEF Program

Q2. Did you supply new hand pumps for Program funded water supply projects?

Capacity building or support received.

Q3. Describe the type of capacity building assistance you received through the Program to become develop the spare part supply business.

Q4. Was this assistance adequate and how could it have been improved?

Q5. Describe the ongoing support you received following this capacity building.

Profitability of business.

Q6. Are you satisfied with the volume of business generated by hand pump spare part sales?

Q7. Has this volume of business increased, decreased, or stayed about the same over the past year?

Q8. Do you intend to continue trading in hand pump spare parts?

Q9. What are the main problems you experience in trading in hand pump spare parts?

Q10. How large a proportion of the turnover and profit in your business comes from the hand pump spare parts sale?

Any other comments and observations you would like share

Sanitation Materials Manufacturers and Dealers

Identification of the Respondent

A. What is your name, position, and organisation/ business?

Involvement with ASWA projects

Q1. Describe how you first became involved in the WASH Sector and in the UNICEF Program.

Q2. Did you supply sanitation materials for the implementation of the UNICEF Program?

Q3. Did you supply these materials to:

- i) the households directly for their own latrines
- ii) latrine builders for construction of household latrines
- iii) schools for construction of their toilets
- iv) contractors for the construction of toilets for schools

Capacity building or support received.

Q3. Describe the type of capacity building assistance you received through the Program to become develop the sanitation business.

Q4. Was this assistance adequate and how could it have been improved?

Q5. Describe the ongoing support you received following this capacity building.

Profitability of business.

Q6. Are you satisfied with the volume of business generated by the sanitation materials supply?

Q7. Has this volume of business increased, decreased, or stayed about the same over the past year?

Q8. Do you intend to continue in the sanitation materials manufacturing and supply business?

Q9. What are the main problems you experience in the sanitation business?

Q10. How large a proportion of the turnover and profit in your business comes from the sanitation business?

Any other comments and observations you would like share

FGD GUIDE LEADERSHIP

ASWA Sierra Leone Evaluation

Focus Group Discussion (FGD) Guide

Community leadership

(and follow-up discussions with WASH Committees and Loan and saving Groups)

Brief introduction

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) programme in Sierra Leone from 2012/13-2019.
- ASWA was implemented by the Government of Sierra Leone and UNICEF with funding from the Government of the Netherlands (DGIS).
- In your community, ASWA was implemented by: ADD NAME OF IMPLEMENTING PARTNER AND/OR LOCAL NAME FOR ASWA (in the following called ‘the project’)
- The ASWA project focused on sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The objective of the evaluation is to ensure accountability, transparency and learning.

Involvement in the Project

Q1: Village/community and group/committee name:

Q2: Names and positions of FG participants:

Q3: Are you aware of the ASWA Project (or its local name)?

Q4: What were the main Project activities in your community?

Q5: How were you involved in the Project activities in your community?

Community benefits

Q6: WASH improvements:

- How is the situation in the community now for access to water and sanitation compared to the situation before the Project? (8.3)
- What were the WASH benefits/changes achieved for: (8.1)
 - Women
 - Men
 - Girls
 - Boys

- People with disabilities
 - Elderly
 - Ultra-poor households
- What was done to ensure that women, children and vulnerable people could benefit from the WASH improvements (e.g. affordability, accessibility, including for people with disabilities)? (7.3)
- What were the main challenges vis-à-vis ensuring the full level of WASH benefits for all people in the community, including vulnerable people? (8.1)
- How happy are you with the WASH services provided by the Project? (8.3)
- Have the hygiene practices in the community and households changed, and if so, in which ways? (8.3, 9.2)
- Do you find it useful and important to continue with the improved hygiene practices? (19.2)

Q7: WASH accessibility:

- How accessible are the water points? (22.4)
 - Are there any specific barriers or difficulties for the poorest households, people with disabilities and the elderly vis-à-vis accessing the water points?
- Who are mainly responsible for fetching water and cleaning in the households ? (26.3)
- Has the time spent on fetching water and cleaning changed and if so, by how much? (25.4, 26.3)

Q8: Health impacts:

- What difference have you observed between the situation before the project started and now in the frequency of diarrhoea and other hygiene-related/water-borne illnesses for (26.2):
 - Children under 5 years
 - People in general
- What difference have you observed any difference between the situation before the project started and now in the number of deaths caused by diarrhoea and other hygiene-related/water-borne illnesses for (26.2):
 - Children under 5 years
 - People in general

Q9: Village savings and loan groups:

- Are there any functioning village savings and loan groups in your community? (10.6)
 - How well are they working? Why?
 - How have they contributed to improving WASH in your community? Can you give examples?

WASH management, operation and maintenance

Q10: WASH committee:

- Is there a functioning WASH Committee in your community? (10.5, 21.1, 22.5)
- Is the committee representative enough?
 - How many people are in the committee, and how many of them are women?
 - How is broad representation ensured?

- What is its role?
- How well is it meeting its role?

Child protection and safety

Q14: Child rights, protection and safety:

- In general, how are you ensuring safety of children and women in your community?
- How has the Project/the implementing partner helped in ensuring child protection and women's safety (e.g. through awareness raising)? (22.3, 24.1, 24.2)
 - Are the water points constructed in locations that are safe for women, girls and boys during day and night? (22.3)
 - Are the toilets constructed in locations that are safe for women, girls and boys during day and night? (22.3)
 - Has there been any change in the risk of sexual exploitation and abuse of women and children since the beginning of the Project? What do you think are the reasons for the change? (22.3)
- Has there been a change in children's knowledge of WASH?
- Have the children learned something about hygiene in school, which they have then taught to their parents? (25.7)
- How do you and other community members see the roles of boys and girls, and has this view changed in any way since the Project started?
- Is it important that girls get an education – and if so, why? (25.8)

Beneficiary/community involvement in the Project

Q15: Stakeholder involvement/consultation in the Project design:

- How were you engaged in the planning of the Project activities in your community? (2.1)
- Can you describe how the needs of the most disadvantaged groups were identified (incl. women, girls, boys, disabled, elderly, woman-headed households, and vulnerable and poor households)? (2.2)
- How were community members (aside from members of the community leadership or WASH committee) involved in the planning of project activities? (2.1)
- How were the locations for WASH infrastructure identified and selected – and what was the role of the community leadership, WASH Committee and other community members in this (e.g. community mobilisation, awareness raising, data collection)? (2.1, 14.3)
- Were you satisfied with the process for community involvement, or could anything have been done better? (2.1)

Q16: Community role and responsibilities in the Project implementation:

- What were the roles and responsibilities of the community in the Project implementation, including the roles of: (2.3, 3.1, 6.1)
 - Community leadership
 - WASH committee
 - Male community members
 - Female community members
- How were the community roles in the Project implementation identified and agreed upon? (2.3)

- What was the community contribution to the project implementation: (6.1, 14.3)
 - Labour – which kinds of work was carried out by different community-members, and how big was the work input per person/household (number of days or hours)? Did everybody contribute the same amount of work or were there any differences?
 - Money – how much money did the community and each household contribute? Did everybody contribute the same amount or were there any differences?
 - Building materials – what kind of materials did the community and each household provide for the WASH infrastructure?
- What where the difficulties experienced by the community in providing the required contribution? (6.1, 14.3)
 - If so, which groups of people had difficulties?
- Did the community members need any training to carry out the work, or did you already know how to do it? (2.3, 6.1)
- What training did the community receive, was the training good or was anything missing from the training? (2.3, 6.1, 14.1, 14.3, 14.5)

ASWA Project implementing partners

Q17: Roles and performance of implementing partners:

- What were the roles of the implementing partner? (6.2)
- What were the roles of the district authorities? (6.2)
- Was there any confusion, unclarity or disagreement about the roles and responsibilities of the implementing partner, the district authorities and the community? (6.2)
 - If yes, why?
 - If no, why?

Q18: Was the implementation of the project delayed in any way – and if so, what were the causes of the delays? (14.1)

Barriers and unexpected effects

Q19: In addition to community benefits you mentioned previously, did the Project have any other positive or negative results for the community? (11.1)

Q20: Challenges:

- What were the main difficulties or barriers experienced in the implementation of the project? How were they overcome? (11.1, 12.2, 12.3)

Other

Q21: What could have been done differently or better – do you have any recommendations for similar projects in the future and in other communities? (11.1)

Q22: Please add any other comments and observations you would like share

Supplementary Questions for village savings and loan groups

Q9: Village savings and loan groups:

- How well are the village savings and loan groups working (10.6, 25.5)?
- What is the membership of the village savings and loan groups:
 - How are women involved?
 - How are community members from disadvantaged groups involved?
 - How are young people involved?
- How have the village savings and loan groups contributed to improving WASH in your community?
 - Do the village savings and loan groups provide funding for water point operation and maintenance, spare parts etc.? (10.5, 10.6)
 - Do the village savings and loan groups provide funding for household latrine construction and upgrading? (10.6)
- What do the members use the savings and loans for (e.g. income-generating activities, school fees, food during hungry months, other)? (10.6)
- Can you provide examples of the benefits people have obtained from the access to savings and loans (e.g. incomes, assets)?
- What do you see as the main benefits brought by village loan and savings groups supported by the Project for the community? (25.5)

Supplementary Questions for WASH Committee

Q10: WASH committee:

- How has the Project supported the establishment and operationalisation of the WASH Committee?
- What is the role the WASH Committee? (water point maintenance/ promotion of household sanitation/ hygiene education?) (10.5)
- How well is the WASH Committee fulfilling its role?
- Is WASH Committee representative enough?-(21.1)
 - How many people are in the committee, and how many of them are women?
 - Are any of the following women?: Chair, deputy chair, finance manager, secretary, water point caretaker, pump mechanic
 - How is broad representation of women and different groups ensured? (21.1, 22.5, 25.6)
- How is the WASH Committee funding its activities (water point maintenance/ promotion of household sanitation/ hygiene education)?
- Were any community members trained in the construction of the water facilities and toilets/ latrines?

Q11: Water supply maintenance:

- How does the WASH Committee manage, operate and maintain water points? (10.1, 10.9)
- Howe often do you have to repair the water points?
 - What type of repair needs have you experienced?
 - How were they fixed and by whom? (14.1)
- How do you finance water point maintenance?
 - How do you collect funds? What are the rules for contributions (e.g. flat rate per household, payment per bucket collected), and what are fees/tariffs? (10.7)
 - How do you administer the funds (cash box, bank account, mobile money)? (10.7)
 - How do you keep records of the contributions from households (account books, budgets)? (10.7)
 - How much do households pay to have access to water? (10.1)
- Have the payments received by users and households been adequate for maintaining the water points? (10.7)
- Do all households pay the same water fee, or is the rate depending on household economic status? (10.1)
- What type of challenges have you experienced in getting households to pay the water fees? (10.1, 19.1)
- Do community members provide any labour contributions for the operation and maintenance of water points, and if so, how does the system work? (10.1)
- What training did you receive in administration of WASH services including hand pump maintenance, and has it made you fully able to sustain the services and maintain the hand pumps? (10.1)
- Where do you (or your hand pump mechanic) get spare parts and materials for maintaining the water points (10.8)
- Are the parts always available and affordable? (10.8, 12.3)

Q12: Sanitation and Hygiene Promotion:

- Which activities have the WASH Committee carried out to ensure good hygiene and access to sanitation in the community?
- How did you get resources (money and time) to carry out these activities?
- Who is responsible for maintaining the toilets/ latrines? (10.2)
- How often do the households have to repair toilets/ latrines?
 - What type of repair needs have you experienced?
 - How were they fixed and by whom? (14.1)
- What are your plans for ensuring that households continue maintaining the toilets/ latrines and observing good hygiene practices (handwashing, safe waste disposals etc.)? (10.2)
- Are all households willing and able to pay for the maintenance and replacement of toilets/ latrines? (10.1, 19.1)

Q13: Maintenance support:

- What operation and maintenance tasks can the WASH committee and caretakers not do themselves, and who are responsible for this (e.g. district authorities, private contractors, hand pump mechanics)? (10.1, 20.1, 27.3)
- How often do the district authorities visit the community to support the WASH (10.10)
- When was the last visit, and what was the outcome? (10.10)
- To what extent do those responsible (e.g. district authorities, private contractors, hand pump mechanics) carry out their tasks when needed, and how do you make sure they do it? (10.1, 10.7, 12.3, 20.1, 27.3)

FGD GUIDE WOMEN GROUPS

ASWA Sierra Leone Evaluation

Focus Group Discussion (FGD) Guide

Women groups

Brief introduction

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) program in Sierra Leone from 2012/13-2019.
- The Program was implemented by the Government of Sierra Leone and UNICEF with funding from the Government of the Netherlands (DGIS).
- In your community, ASWA was implemented by: ADD NAME OF IMPLEMENTING PARTNER AND/OR LOCAL NAME FOR ASWA (in the following called ‘the project’)
- The ASWA project focused on sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The objective of the evaluation is to ensure accountability, transparency and learning.

Involvement in the Project

Q1: Group name:

Q2: Names and positions of FG participants:

Q3: Are you aware of the ASWA Project (or its local name)?

Q4: What were the main Project activities in your community?

Q5: How were you involved in the Project activities in your community?

Community benefits

Q6: WASH improvements:

- How is the situation in the community now for access to water and sanitation compared to the situation before the Project? (8.3)
- What were the main benefits/changes? (8.1)
 - Who benefitted most from these changes?
 - What are the main challenges in terms of access to WASH services for all people in the community, including women, girls and vulnerable people? (8.1)

- Do you know of the WASH services provided by the Project? How happy are you with them? (8.3)
 - Are the water points constructed in locations within easy reach, including for the poorest households and people with disabilities and the elderly? (22.4)
 - Are the toilets/latrines constructed in locations within easy reach, and designed and constructed in a way that people with disabilities and the elderly can use them? (22.4)
 - Are the water points constructed in locations that are safe for women, girls and boys during day and night? (22.3)
 - Are the toilets constructed in locations that are safe for women, girls and boys during day and night? (22.3)
- In your opinion, what was done to ensure that women and children could benefit (e.g. affordability, accessibility)? (7.3)
- How have hygiene practices in the community and households changed over time? (8.3, 9.2)
 - What did it improve?
 - Any negative change?
- What improved hygiene practices do you practice in your household? Do you find it useful and important to continue with the improved hygiene practices? (19.2)

Q7: WASH accessibility:

- Who are mainly responsible for fetching water and cleaning in the households (women, men, girls, boys)? (26.3)
- Has the time spent on fetching water and cleaning changed for women, girls, men and boys – and if so, by how much for each group? (25.4, 26.3)

Q8: Health impacts:

- What difference have you observed between the situation before the project started and now in the frequency of diarrhoea and other hygiene-related/water-borne illnesses for (26.2):
 - Children under 5 years
 - People in general
- What difference have you observed any difference between the situation before the project started and now in the number of deaths caused by diarrhoea and other hygiene-related/water-borne illnesses for (26.2):
 - Children under 5 years
 - People in general

Q9: Village savings and loan groups:

- Are there any functioning village savings and loan groups in your community? (10.6)
 - How well are they working? Why?
 - How have they contributed to improving WASH in your community? Can you give examples?
- What is the membership of the village savings and loan groups (10.6, 25.5):
 - How are women involved?
 - How are community members from disadvantaged groups involved?

- How are young people involved?
- What do the women members use the savings and loans for (e.g. income-generating activities, school fees, food during hungry months, other)? (10.6)
- Can you provide examples of the benefits women have obtained from the access to savings and loans (e.g. incomes, assets)?
- Has there been a change in women's access to and control over financing, incomes and assets – and did the Project saving and lending groups contribute to such changes? (25.5)

WASH management, operation and maintenance

Q10: WASH committee:

- Is there a functioning WASH Committee in your community? (10.5, 21.1, 22.5)
- Is the committee representative enough?
 - How many people are in the committee, and how many of them are women?
 - How is broad representation ensured?
 - What is its role?
 - How well is it meeting its role?

Q12: Toilet/latrine maintenance:

- Who is responsible for maintaining and cleaning the toilets/latrines? (10.2)
- What are your plans for ensuring that households continue maintaining the toilets/latrines and observing good hygiene practices (handwashing, safe waste disposals etc.)? (10.2)
- Are all households willing and able to pay for the maintenance and replacement of toilets/latrines? (10.1, 19.1)

Beneficiary/community involvement in the Project

Q16: Community role and responsibilities in the Project implementation:

- What were the roles and responsibilities of women and men in the Project implementation? (2.3, 3.1, 6.1)
- How were the roles of women and men identified and agreed upon? (2.3)
- What was the community contribution to the project implementation:
- Which kinds of work/labour was carried out by women/girls in the project implementation, and how big was the work input per woman/girl (number of days or hours)? (6.1, 14.3)
- Was there a difference in the work and money contribution provided by households, depending on their ability to contribute – and if so, what was the difference? (6.1)
- Where there any difficulties in providing the contribution required? (6.1, 14.3)
- Did any of your responsibilities require training, or did you already know what to do and how to do it? (2.3, 6.1)
- What training was received, and was it sufficient for you to carry out the tasks properly – if not, what were the gaps? (2.3, 6.1, 14.1, 14.3, 14.5)

Barriers and unexpected effects

Q19: Were there any unexpected positive or negative results of the project for your community, and if so, what were they? (11.1)

Other

Q21: What could have been done differently or better – do you have any recommendations for similar projects in the future and in other communities? (11.1)

Q22: Please add any other comments and observations you would like share

FGD GUIDE YOUTH GROUPS

ASWA Sierra Leone Evaluation

Focus Group Discussion (FGD) Guide

Youth

Adolescents (13-17 years) – separate discussions with girls and boys

Brief introduction

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) programme in Sierra Leone from 2012/13-2019.
- ASWA was implemented by the Government of Sierra Leone and UNICEF with funding from the Government of the Netherlands (DGIS).
- In your community, ASWA was implemented by: ADD NAME OF IMPLEMENTING PARTNER AND/OR LOCAL NAME FOR ASWA (in the following called ‘the project’)
- The ASWA project focused on sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.
- The objective of the evaluation is to ensure accountability, transparency and learning.

Involvement in the Project

Q1: Village/community name:

Q2: Names and positions of FG participants:

Q3: Are you aware of the ASWA Project (or its local name)?

Q4: What were the main Project activities in your community?

Q5: How were you involved in the Project activities in your community?

Community benefits

Q6: WASH improvements:

- How is the situation in the community now for access to water and sanitation compared to the situation before the Project? (8.3)

- What were the WASH benefits/changes achieved for young people? (7.3, 8.1) Were there any changes particularly for girls?
- How did you learn about hygiene practices, and from whom did you learn?
 - Format and location
 - Material
- How have hygiene practices in the community and households changed, and if so, in which ways? (8.3, 9.2)
 - What have been the benefits of improved hygiene practices?
 - Have there been any negative changes? If so, in which ways? (8.3, 9.1, 9.2)
- Do you find it useful and important to continue with the improved hygiene practices? (19.2)
- Do you know about the WASH services provided by the Project? How happy are you with them? (8.3)
 - Are the water points constructed in locations within easy reach, including for the poorest households and people with disabilities and the elderly? (22.4)
 - Are the toilets/latrines constructed in locations within easy reach, and designed and constructed in a way that people with disabilities and the elderly can use them? (22.4)
 - Are the water points constructed in locations that are safe for young people during day and night for both boys and girls? (22.3)
 - Are the toilets constructed in locations that are safe for young people during day and night for both girls and boys (22.3)?
 - Are latrines lockable from the inside?
 - Are there facilities for girls and women to wash and change?

Q7: WASH accessibility:

- Whose role is it to fetch water and clean at school? (26.3)
- How is it at home? What do you think about this? (25.8)
- Has anything changed for the better? For the worse? (25.4, 26.3)

WASH management, operation and maintenance

Q11: Water supply maintenance:

- Do young people have any role in the operation and maintenance of water points?
 - What roles?
 - Did you receive any training? (10.1, 10.9)
- Are all your households willing and able to pay the water fees? (10.1, 19.1)
 - What are the challenges faced by your families?
 - How do they make sure that the water fees are being paid?

Q12: Toilet/latrine maintenance:

- Who is responsible for maintaining and cleaning the toilets/latrines (women, men, girls, boys) at home? (10.2)
- Are all your households willing and able to pay for the maintenance and replacement of toilets/latrines? (10.1, 19.1)

- What are the challenges faced by your families?
- How do they make sure that the fees are being paid?

Child protection and safety

Q14: Child rights, protection and safety:

- In general, how is the safety of children and women ensured in your community? (22.3, 24.1, 24.2)
- What are the risks? What are the specific risks for adolescent girls?
- How are youth and children able to communicate with parents and influence them on aspects related to WASH at home? (25.7)

Note: explore the 'influencers': for this age group their peers are important and peer influence and/or pressure would be critical. Similarly, it may be the women who discipline or influence the girls but the fathers who have more influence over the sons.

- How do youth keep themselves safe and out of harm?
 - Which places are young people most at risk?
 - What have you learned at school on how to protect yourselves and stay safe?
- Do you know what to do in case anything happened to you or any of your friends?

Beneficiary/community involvement in the Project

Q16: Community role and responsibilities in the Project implementation:

- How did young people contribute to the project?
 - Which kinds of work/labour was carried out by youth (girls, boys) in the project implementation?
 - How big was the work input per person (number of days or hours)? (6.1, 14.3)
- Where there any difficulties in providing contribution from young people? (6.1, 14.3)

Other

Q21: Do you have any recommendations for WASH projects in the future and in other communities? (11.1)

Q22: Please add any other comments and observations you would like share

FGD GUIDE SCHOOL PUPILS

ASWA Sierra Leone Evaluation

Focus Group Discussion (FGD) Guide

School pupils

(separate discussions with girls, boys)

Brief introduction

- This evaluation looks at the results of the ‘Accelerating Sanitation and Water for All’ (ASWA) programme in Sierra Leone from 2012/13-2019.
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- The objective of the evaluation is to ensure accountability, transparency and learning.

Involvement in the Project

Q1: Village/community and school name:

Q2: Names and sex of FG participants:

School benefits

Q6: WASH improvements:

- How happy are you with the water and toilet facilities at the school? (8.3)
 - What kind of toilets do you have at school?
 - Are the toilets for girls and boys separate?
 - Do you have access to water and soap?
 - Are the water points constructed in locations that are safe for the girls and boys at the school? (22.3)
 - Are the toilets constructed in locations that are safe for girls and boys? (22.3)
 - Have you noticed any improvements compared to a few years ago? Which one? (8.3)
- What are the (other) problems regarding water points and toilet facilities at school?

Q7: WASH accessibility:

- Whose role is it to fetch water and clean at school? (26.3)
- How is it at home? What do you think about this? (25.8)
- Has anything changed for the better? For the worse? (25.4, 26.3)

Q7a: Hygiene education and practice (will be addressed with boys alone and girls alone)

- Why is hygiene important? (19.2)
- When were you last sick with a hygiene-related illness like worms or diarrhoea?
- What did you learn about hygiene at school?
 - Examples of topics
 - Education materials
- Do you practice what you learn at home? How? (25.7)
 - Do you discuss what you have learned about hygiene with your parents, family, or friends?
 - How have hygiene practices changed at home (handwashing, bathing, cleaning, dishwashing, cooking) changed in your home)? (25.7)
- Can you explain to us how to wash your hands? (8.3, 9.2)
- **GIRLS ONLY/ ALONE:**
 - How do you take care of yourself during your menstrual periods? (26.4)
 - Where and how did you learn this?
 - What are the main difficulties for you during that time?
 - Do you go to school when you menstruate, or do you stay at home? (26.4)
 - Do you have access to private washing cubicles at home? At school?

Child protection and safety

Q14: Child rights, protection and safety: (separate FGD for girls and for boys)

- How do children keep themselves safe and out of harm?
 - Which places are children are at most at risk, and why do you consider these places unsafe?
 - What have you learned at school on how to protect yourselves and stay safe?
- Do you know what to do in case anything happened to you or any of your friends?

Other

Q21: Do you have any suggestion on what could be done to improve things further at school? (11.1)

Q22: Please add any other comments and observations you would like share

HOUSEHOLD SURVEY QUESTIONNAIRE

ASWA Sierra Leone Evaluation

Household Questionnaire

The responses to this Questionnaire contribute to the evaluation of the ‘Accelerating Sanitation and Water for All’ (ASWA) program in Sierra Leone from 2012/13-2019. The ASWA Program is implemented by UNICEF with support from the Dutch Government. The Program focus on sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.

The ASWA Program has a special focus on increasing access to water, sanitation and hygiene in the target community and schools in vulnerable and poorly-served areas of the country and specifically targeting health and living conditions for women, girls and vulnerable groups such as people with disabilities, the elderly and poor households. The ASWA Program also include activities for strengthening the national sector governance and a focus on improving the stainability through improved management and maintenance systems.

The objective of the evaluation, that this KII will contribute to, is to ensure accountability and transparency by listening and recording your views on the situation in your household concerning access to water and sanitation facilities and hygiene issues.

This is an independent evaluation we request your assistance to provide the information needed. Please respond to the following questions in an open and objective manner to give a fair impression of the situation.

May I start now? Yes- permission is given → (continue with interview)
No- permission is not given → (end interview and report to your supervisor)

Household survey (v. 4.0)

Questionnaire identification	
Cluster/EA number _____	Household number _____
Region _____	District_____
Chiefdom_____	Area (Urban/Rural)
Section_____	Name of Village/Town_____

Team number _____

Interviewer number _____

Household Roster form

First, please tell me the name of each person who usually lives here, starting with the head of the household.

List the head of the household in line 01. List all household members,

their relationship to the household head, and their sex

Then ask: Are there any others who live here, even if they are not at home now?

If yes, complete listing for these persons.

	Name	What is the relationship of (name) to the head of household?	Is (name) male or female?	How old is (name)? <i>Record in completed years. If age is above 95, record '95'</i>	Has (name) ever attended school or pre-school? <i>98 DK</i>	1 Yes/ 2 No	Highest level of school attended? 0 Preschool 1 Primary 2 Secondary 3 Higher 8 Don't Know
Line	Name	Relation	M F				
1		— —	1 2	— —			
2		— —	1 2	— —			
3		— —	1 2	— —			
4		— —	1 2	— —			
5		— —	1 2	— —			
6		— —	1 2	— —			
7		— —	1 2	— —			

8		— —	1 2	— —		
9		— —	1 2	— —		
10		— —	1 2	— —		

Water supply						
Question						Skip
WS1. What is the main source of drinking water for members of your household?	<ol style="list-style-type: none"> 1. Piped into dwelling 2. Piped into compound- yard or plot 3. Piped to neighbour 4. Public tap / standpipe 5. Tube Well- Borehole 6. Protected well 7. Unprotected well 8. Protected spring 9. Unprotected spring 10. Rainwater collection 11. Tanker-truck 12. Cart with small tank / drum 13. Surface water/River/Stream 14. Bottled/sachet water 					<i>If Piped into dwelling or Piped into compound skip to WS3</i>
WS2. Where is the main drinking water source located?	<ol style="list-style-type: none"> 1. In own dwelling 2. In own yard / plot 3. Elsewhere 					<i>If In own dwelling or own yard/plot skip to WS3</i> <i>If Elsewhere skip WS7</i>

WS2(a) What is the distance from your household to the main source of drinking water?

1. less than 500 m
2. Between 500 m and 1 Km
3. More than 1 Km but less than 2 Km
4. 2 Km
5. More than 2 Km

WS3. What is the main source of water used by your household for other purposes such as cooking and hand washing?

1. Piped into dwelling
2. Piped into compound- yard or plot
3. Piped to neighbour
4. Public tap / standpipe
5. Tube Well- Borehole
6. Protected well
7. Unprotected well
8. Protected spring
9. Unprotected spring
10. Rainwater collection
11. Tanker-truck
12. Cart with small tank / drum
13. Surface water/River/Stream

WS4. How many minutes does it take to go the water source, get water and come back?

WS5 (a). Who is mainly responsible for collecting water for your household?

1. HH member – select row number from HH roster (Son, Daughter, Spouse, Niece, Nephew)
 2. Neighbour
 3. Relative not living in HH
 4. Other - please specify
-

WS5 (b). What is sex of this person?

Male 1 Female 2

WS5 (c). How old is this person? _____
(enter age in completed years)

WS6. How frequently was the drinking water from the main source available to your house-hold during the last two weeks?

1. At least 12 hours a day
2. Daily less than 12hrs
3. Three - Five days a week
4. One - two days a week
5. Less frequent than once a week

WS7. I would very much like to see your drinking water source. Would you be able to show it me? (if within compound)

1. Water flowing
2. Water not flowing
3. Water point broken
4. Refused to show

WS8. What are the main problems you encounter as far as water supply is concerned?
(Tick all that apply)

1. Water quality
2. Accessibility
3. Reliability
4. Adequate quantity
5. Affordability
6. Management burden
7. Time spent collecting water
8. No problems

WS9. Do you do anything to the water to make it safer to drink?

Yes 1

No 2

Don't know 3

If No/Don't know skip to WS11

WS10. What do you usually do to make the water safer to drink?

1. Boil
2. Add bleach
3. Strain it through a cloth
4. Use water filter
5. Solar disinfection
6. Let it stand and settle
7. Don't know
8. Add chlorine

WS11. Did your household experience interruptions in the drinking water supply from the main source during the last two weeks?

Yes 1

No 2

If No/Don't know skip to WS19

Don't know 3

WS12. During these interruptions/ breakdowns, how many days was drinking water not available from the main source?

WS13. What was the reason for these interruptions?

1. Water point damaged or broken
2. Interruption in water supply
3. Dry due to seasonality
4. Don't know

If Interruption in supply, dry due to seasonality or don't know skip to WS19

WS14. How long did it take for the water point to be repaired?

1. A Few days
2. One week
3. Within a month
4. More than one month
5. Not fixed yet

If not fixed skip to WS19

WS15. Who repaired the water point when it was broken?

1. Privately hired repairman
2. NGO
3. SALWACO
4. GUMA VALLEY
5. LOCAL COUNCIL
6. Don't know

WS16. Did the repairman come with adequate spares for the maintenance of the water point?

1. Bought from the market
2. Supplied by the water company
3. Don't know

WS17. Did you pay for the repair?

Yes 1

No 2

If No skip to WS19

WS18. How much did you pay for the repair? (Leones)

WS19. Do you pay for the water services you receive?

Yes 1

No 2

If No skip to WS221

WS20. If yes, how much do you pay per month? (Leones)?

WS21. How much would you be willing to pay per month for water services? (Le)

*How easy or difficult is it for your HH to
cover the cost of water services?*

No problem 1

Slightly difficult 2

Very difficult 3

Cannot afford 4

WS22. Would you be willing to contribute financially to improvements to your water source?

Yes 1

No 2

WS23. What improvements would you like to see being made ?

1. Water source well protected
2. Source provides water reliably
3. Improve water quality

WS24. Who is operating and maintaining the community WASH facilities:

1. WASH/Water Committee
2. Community Leaders
3. Community
4. No-one
5. Other
6. Don't know

s?

If No/Don't know skip to WS27

WS 25 Are you or any member of your household a member of this committee?

Yes 1

No 2

WS 26. Do you or any member of your household contribute financially to the savings of the committee for its role in water management?

Yes 1

No 2

WS27. If operation and maintenance is by a community group, is the group functioning?

Yes 1

No 2

Don't know 3

WS28. Do you use water for any productive or commercial purposes?

Yes 1

No 2

If No skip to WS30

WS29. If yes, which of the following are you engaged in?

1. Irrigation of garden/farm
2. Car/bike/vehicle washing
3. Animal/poultry rearing
4. Sale of water to the public

Climate change and seasonality

WS 30. Does your household or community have a reservoir to collect and safely store rainwater to be used in times of scarcity?

1. Yes, at household level
2. Yes, at the community level
3. No Reservoir
4. Don't store water

WS31. Are there some months where your household cannot use the main source of drinking water?

Yes 1

No 2

Don't know 3

If No/Don't know skip to S1

SANITATION

WS32. If yes, which month(s)?

1. January
2. February
3. March
4. April
5. May
6. June
7. July
8. August
9. September
10. October
11. November

12. December

WS33. What is the main source of drinking water for your household during the months mentioned above?

1. Piped into dwelling
2. Piped into compound- yard or plot
3. Piped to neighbour
4. Public tap / standpipe
5. Tube Well- Borehole
6. Protected well
7. Unprotected well
8. Protected spring
9. Unprotected spring
10. Rainwater collection
11. Tanker-truck
12. Cart with small tank / drum
13. Surface water

WS34. Do you know how many minutes it takes to go there, get water and come back?

Yes 1

No 2

Water on premises 3

*If No/Water on premises
skip to S1*

WS34. During those months, how many minutes does it take to go there,
get water and come back? _____

Sanitation	
Questions	Skips
<p>S1. What kind of toilet facility do members of your household usually use?</p> <ul style="list-style-type: none"> 1. Flush to piped sewer system 2. Flush to septic tank 3. Flush to pit (latrine) 4. Flush to unknown place / Not sure / DK where 5. Ventilated Improved Pit latrine (VIP) 6. Pit latrine with slab 7. Pit latrine without slab / Open pit 8. Composting toilet 9. Bucket 10. Hanging toilet- Hanging latrine 11. No facility- Bush- Field 	
	If No facility skip to S25
<p>S2. Do ALL members of your household use this facility?</p> <p>Yes 1</p> <p>No 2</p>	If Yes skip to S4
<p>S3. What do you think prevents people from using this toilet?</p> <hr/>	
<p>S4. How do you dispose of small children's (under 3years) excreta?</p> <ul style="list-style-type: none"> 1. Children use toilet/latrine 2. Put/rinsed into toilet or latrine 	

- 3. Put/rinsed into drain or ditch
- 4. Thrown into garbage
- 5. Buried
- 6. Left in the open
- 7. Not applicable

S5. Are there separate Toilet/drop holes for males and females?

Yes 1

No 2

S6. Do men and women have equal access to the facility with separate male and female toilets?

If yes skip to S8

Yes 1

No 2

Don't know 3

S7. Why do men and women not have equal access?

S8. Is your latrine accessible to people with disabilities?

Yes 1

No 2

Don't know 3

S9. Do you share this facility with others who are not members of your household?

Yes 1

No 2

If No skip to S11

S10. How many households in total use this toilet facility, including your own household?

1. 1-5 households
2. 6-9 households
3. 10 or more households
4. Don't know

S11. Is the toilet located in your own compound?

Yes 1

No 2

S12. How many minutes does it take to go to the toilet?

S13. I would like to see your toilet - would you kindly show it to me?

Yes 1

No 2

If No skip to S15

S14. Observations about toilet

1. Visible faecal residues around the drop hole or basin
2. Visible faecal residues on the floor-wall or door
3. Visible used anal cleaning material(e.g. Toilet paper)
4. Surface flow of sewage
5. The toilet smells bad
6. Toilet looks good

S15. How far is the toilet from the nearest water source?

1. Less than 30 meters
2. Greater than 30 meters
3. Don't know

S16. What kind of maintenance is needed for the household toilet?

1. Empty pit
2. Empty septic tank (dislodge)
3. Dig new hole (when pit is full)
4. Cleaning
5. No maintenance required

S17. Do you know how much you approximately spend per year for repair and cleaning of the toilet?

1. Yes, I know
2. No, I don't know
3. Household not responsible for toilet maintenance

*If Don't know or
household not
responsible skip to S19*

S18. How much does your household approximately spend

per year for repair and cleaning of the toilet?(Leones)

S19. Do you know what were the household's total expenses for building the toilet, including hired labour, materials etc.?

1. Yes I know
2. Not applicable
3. Don't know

*If Not applicable or
Don't know skip to S21*

S20. What were the household's total expenses for

building the toilet, including hired labour, materials etc.?

S21. Would you like to make improvements to your toilet?

Yes 1

If No skip to S24

No 2

S22. How would you like to improve it?

1. Install permanent superstructure
2. Improve ventilation
3. Install pour flush
4. Improve water supply
5. Replace slab
6. Install lockable door
7. Paint walls
8. Add tiles

S23. Would you be willing to pay for these improvements?

Yes 1

No 2

Don't know 3

S24. What is the main material your toilet facility is constructed with?

1. Bamboo
2. Thatch
3. Sandcrete blocks (cement)
4. Landcrete (mud)
5. Wood

S25. Do you know of any diseases associated with the use of unclean toilets?

Yes 1

No 2

If No skip CS26

S26. If yes, please name them

_____ add some pre-codes here for ease of coding_____

Has any child U5 in the HH had diarrhoea in the past week?

Yes/no

S27. How does your household dispose of waste?

1. Public dustbin removed daily
2. Public dustbin removed weekly
3. Public dustbin removed monthly
4. Burn waste in own compound
5. Dispose of outside compound

S28. Have you or any member of your household received training in relation to ending open defecation?

Yes 1

No 2

Don't know 3

S29. Has your community been declared open defecation free (ODF)?

Yes 1

No 2

Don't know 3

If No/Don't Know skip to S32

S30. Do you think your community is still open defecation free (ODF)?

Yes 1

No 2

Don't know 3

If Yes skip to S32

S31. Why do you think it is not open defecation free (ODF)?

S32. Are there trained natural leaders on ODF in your community?

Yes 1

No 2

Don't know 3

If No/Don't Know skip to HW1

S33. Are the trained natural leaders performing their role effectively?

Yes 1

No 2

Don't know 3

Handwashing	
HW1. Do you have any facility in your household for handwashing?	If no, skip to HW6
Yes 1	
No 2	
HW2. Can I please see the hand washing facility members of your household most often use to wash their hands?	If Not in dwelling/No permission to see skip to HW6
1. Observed	
2. Not in dwelling / plot / yard	
3. No permission to see	
HW3. Observe presence of water at the specific place for hand washing.	
1. Water is available	
2. Water is not available	
HW4. Observe what device is present for hand washing.	
1. No device present	
2. Tap	
3. Bucket	
4. Sink	
5. Water kettle/cooler	
HW5. Record if soap or detergent is present at the specific place for hand washing.	If Bar soap/Detergent/Liquid soap/Ash skip to HW8
1. Bar soap	
2. Detergent (Powder / Liquid / Paste)	
3. Liquid soap	

4. Ash / Mud / Sand

5. None

HW6. Do you have any soap or detergent (or other locally used cleansing agent) in your household for washing hands?

Yes 1

No 2

If No skip to HW8

HW7. Can you please show it to me?

1. Bar soap

2. Detergent (Powder / Liquid / Paste)

3. Liquid soap

4. Ash / Mud / Sand

5. Not able / Does not want to show

HW8. Why do you use this type of detergent or soap for handwashing?

HW9. Have you used soap today or yesterday?

Yes 1

No 2

If No skip to HW11

HW10. When you used soap today or yesterday, what did you use it for?

1. WASHING CLOTHES

2. WASHING MY BODY

3. WASHING CHILD'S BOTTOM

4. WASHING CHILD'S HANDS

5. WASHING HANDS AFTER DEFECATING

6. WASHING HANDS AFTER CLEANING CHILD
7. WASHING HANDS BEFORE FEEDING CHILD
8. WASHING HANDS BEFORE PREPARING FOOD
9. WASHING HANDS BEFORE EATING
10. WASHING HANDS BEFORE GOING OUT
11. WASHING HANDS BEFORE RECEIVING VISITORS

HW11. When do you think you should wash your hands with soap and water?

1. WASHING CLOTHES
2. WASHING MY BODY
3. WASHING CHILD'S BOTTOM
4. WASHING CHILD'S HANDS
5. WASHING HANDS AFTER DEFECATING
6. WASHING HANDS AFTER CLEANING CHILD
7. WASHING HANDS BEFORE FEEDING CHILD
8. WASHING HANDS BEFORE PREPARING FOOD
9. WASHING HANDS BEFORE EATING
10. WASHING HANDS BEFORE GOING OUT
11. WASHING HANDS BEFORE RECEIVING VISITORS

HW 12 What benefit do you think one can derive from washing his/her hands with soap and water?

Add some pre-codes

HW13. Results of household interview

1. Completed

- | | |
|---|--|
| <ul style="list-style-type: none">2. No household member or no competent respondent at home at time of visit3. Entire household absent for extended period of time4. Refused5. Dwelling vacant / Address not a dwelling6. Dwelling destroyed7. Dwelling not found_____ | |
|---|--|

Thank the respondent for his time in participating in the interview

Write any additional information obtained during the interview in the spaces provided blow

SCHOOL SURVEY QUESTIONNAIRE

ASWA Sierra Leone Evaluation

School Questionnaire

The responses to this Questionnaire contribute to the evaluation of the 'Accelerating Sanitation and Water for All' (ASWA) program in Sierra Leone from 2012/13-2019. The ASWA Program is implemented by UNICEF with support from the Dutch Government. The Program focus on sanitation, hygiene promotion and water supply interventions for communities and primary schools in Bonthe and Koinadugu (now also Falaba) districts.

The ASWA Program has a special focus on increasing access to water, sanitation and hygiene in the target community and schools in vulnerable and poorly-served areas of the country and specifically targeting health and living conditions for women, girls and vulnerable groups such as people with disabilities, the elderly and poor households. The ASWA Program also include activities for strengthening the national sector governance and a focus on improving the stainability through improved management and maintenance systems.

The objective of the evaluation, that this KII will contribute to, is to ensure accountability and transparency by listening and recording your views on the situation in your household concerning access to water and sanitation facilities and hygiene issues. This is an independent evaluation we request your assistance to provide the information needed. Please respond to the following questions in an open and objective manner to give a fair impression of the situation.

May I start now? Yes- permission is given → (continue with interview)

No- permission is not given → (end interview and report to your supervisor)

School questionnaire (v. 5.0)

Questionnaire identification	
Cluster/EA number _____	Team number _____
Province _____	District _____
Chiefdom _____	Area (Urban/Rural) _____
Section _____	GPS coordinates _____

Number of users in the past month _____	Photo
Type of school	1. Pre-school 2. Primary 3. Junior Secondary 4. Senior Secondary 5. Tech/Voc

Water Supply		
Question		Skips
WSS 1. Do you have a source of water supply within the school premises?		If No skip to WS4
Yes 1	1. Piped water into dwelling	
No 2	2. Piped water into yard / compound	
	3. Public tap / street pump	
	4. Borehole	
	5. Protected dug well	
	6. Unprotected (or open) well	
	7. Protected spring	
	8. Unprotected spring	
	9. Rainwater collection	
	10. Bottled water/sachet water	
	11. Push cart vendor with drums/buckets	
	12. Tanker/Water bowser	
	13. Surface water	
WSS2. What is the main source of drinking water for the school?		
WSS3. What is the main source of water for the school other uses?		
	1. Piped water into dwelling	
	2. Piped water into yard / compound	
	3. Public tap / street pump	
	4. Borehole	
	5. Protected dug well	
	6. Unprotected (or open) well	
	7. Protected spring	
	8. Unprotected spring	

9. Rainwater collection
10. Bottled water/sachet water
11. Push cart vendor with drums/buckets
12. Tanker/Water bowser
13. Surface water

WSS4. If no water supply in the school does the pupil bring water from the community for use in the school

1. Yes
2. No

WSS4a How far is the nearest water point from the school?

1. On site
2. Less than 50 metres
3. Greater than 50 metres
4. Don't know

WSS5. Is the water point accessible to all pupils during school hours?

Yes 1

No 2

Sanitation**WSS6.** Does the school have a latrine?

1. Flush / Pour flush latrine to:

Yes 1

2. Piped sewer system

No 2 → WSS 23

3. Septic tank

4. Pit latrine

WSS7. What type of latrine does the school have?

5. Elsewhere

6. Don't know

7. Pit Latrine

8. Ventilated Improved Pit (VIP) Latrine

9. Pit latrine with slab

10. Pit latrine without slab / open pit

11. Composting Latrine

12. Bucket

13. Hanging Latrine

14. Other _____ (Specify):

WSS8. How many toilet cubicles do your school have? _____**WSS9.** How many male toilet cubicles does the school have? _____**WSS10.** How many female toilet cubicles does the school have? _____**WSS11.** Are the female and male toilets in separate blocks?

Yes 1

No 2

Doesn't apply 3

WSS12. Are there separate toilet facilities for teachers?

Yes 1

No 2

WSS13. Does each block of boys toilets have at least one urinal?

Yes 1

No 2

WSS14. Are there any latrine facilities for pupils with disability?

Yes 1

No 2

WSS15. Are toilets locked?

Yes 1

No 2

If No skip to
WSS17

WSS16. Who holds the keys to the toilets?

1. Head Teacher only
2. Teachers (plural)
3. School prefect
4. Don't know

WSS17. Does the toilet have a lockable door (from the inside)?

Yes 1

No 2

WSS18. Is there a caretaker who maintains the toilets?

Yes 1

No 2

WSS19. Is some form of toilet paper or water available? (Please observe and verify a toilet used by pupils)

Yes 1

No 2

WSS20. What is the condition of the structure of the toilet?

1. Well maintained, roofed, well painted

2. Reasonable, some cracks, painted but not recently

3. Dilapidated (poor condition)

WSS21. Can you visibly see what the situation is in the pit? Please observe and verify

1. Sewer connection/septic tank (WCs)
2. Pit, not full
3. Pit, visibly nearly full
4. Pit full
5. Pit overflowing
6. unable to verify

WSS22. Subjectively, how would you find using the toilet?

1. Extremely smelly and disgusting
2. Smelly and disgusting
3. Reasonable
4. Very clean and free of smell

WSS23. Are sanitary facilities available for menstruating females that allow for washing, changing and for the disposal of menstrual waste?

- Yes, wash, change and dispose 1
Yes – wash and change 2
Yes, change only 3
No 4

WSS24. How is waste disposed of at the school?

1. Waste bin in each classroom only
2. Waste bin in each classroom and central bin
3. Central waste bin only
4. No waste collection
5. Waste bin in toilet

Handwashing facilities

WSS25. Is there a place for handwashing in the toilet facility OR within 10 paces steps from the toilet block?

Yes 1

No 2

If No skip to WSS33

WSS26. Is water present at the specific place for handwashing? [Turn on tap and/or check container and note if water is present]

1. Water is not available

2. Water is available

WSS27. Is soap or detergent present at the specific place for handwashing?

Yes 1

No 2

WSS28. What type of soap or detergent is present at the specific place for handwashing?

1. Multipurpose bar soap

2. Toilet bar soap

3. Detergent (powder/laundry soap)

4. Liquid soap

5. Local soap (black soap / soap Africana)

6. No soap present

WSS29. What device is present for handwashing at this handwashing station?

1. No device present

2. Tap

3. Wash basin

4. Bucket

5. Water kettle/cooler

If No device skip to WSS33

WSS30. Is it possible to wash both hands without touching the washing device?

Yes 1

No 2

WSS31. Is there a towel or cloth to dry hands present at the handwashing station?

Yes 1

If No skip to
WSS33

No 2

WSS32. Does the towel or cloth appear to be clean?

Yes 1

No 2

WSS33. Do children wash their hands with soap and water before coming to class?

1. Always
2. Often
3. Sometimes
4. Rarely
5. No

WSS34. Do children wash their hands before eating any food?

1. Always
2. Often
3. Sometimes
4. Rarely
5. No

WSS35. Do children wash their hands after eating any food?

1. Always
2. Often
3. Sometimes
4. Rarely
5. No

WSS36. Do children wash their hands after using the toilet?

Yes 1

No 2

Don't know 3

WSS37. Are both soap and water available for children to wash their hands?

1. Both soap and water always available

2. Sometimes soap is not available

3. Sometimes water is not available

4. Both soap and water sometimes not available

Management of sanitation

WSS38. Is there a school management committee at this school?

Yes 1

If No skip TO
WSS40

No 2

WSS39. Is the school management committee functioning?

1. Yes
2. No
3. Don't now

WSS 40. What does the committee do to ensure that water and sanitation facilities are properly maintained in the school

Yes 1

If No
skip
WSS41

No 2

WSS41. Are there any school health clubs established at the school?

Yes 1

If No skip to
WSS43

No 2

WSS42. Are the health clubs functioning?

1. Yes
2. No
3. Don't Know
- 4.

WSS 43. What does the health club do to ensure that children inculcate the habit of always washing their hands?

1. Sensitization
2. Awards/recognitions
3. Fines
4. Others specify

If No
skip
WSS 43

Review the responses and end the interview; thank the respondent for participating in the interview

Write any additional information obtained during the interview in the spaces provided blow

OBSERVATION CHECKLIST

UNICEF Evaluation - WASH Check List

A.1 Community Water - HDWs, BHs (Community checklist) Complete checklist by (1) using information provided, (2) with assistance from community leaders and WASH committee, and (3) by direct observation (see right hand column). Complete one questionnaire for each locality sampled.

1	Submission date		1
Hint	<i>Q.1 is completed automatically</i>		
2	Submitter		1
3	District		1
Hint	<i>Questions 3-6 have drop down menus</i>		
4	Chiefdom		1
5	Section		1/2
6	Locality		1/2
7	Population (PHC 2020)		1
Hint	<i>The response to Q.7 is provided automatically</i>		
8	No. of water points in locality		2/3

A.2 Community Water - HDWs, BHs (Water point checklist) Complete checklist by (1) using information provided, (2) with assistance from community leaders, WASH committee and users, and (3) by direct observation (see right hand column). Complete one questionnaire for each waterpoint sampled.

1	Water point No. - 1, 2, 3, 4 etc	3
Hint	<i>Number the water points in the order in which they are visited</i>		
2	Which agency implemented this water point?	UNICEF/PACE, UNICEF/CEDA, UNICEF/SLSAV, UNICEF/ADP, UNICEF/ADP/CEDA, UNICEF/OXFAM, OTHER	2
Hint	<i>If not known leave this blank</i>		
3	Type of water point	Protected HDW/ Borehole/ Improved HDW/ Unprotected HDW	3
Hint	<i>Protected HDW = HDW with cover and hand pump, lockable hatch, apron and drainage.</i> <i>Improved HDW = as protected HDW but without hand pump.</i>		

4	Extraction system/ pump type	Hand manual/ Afridev/ India Mk 2/ Kardia/ Other	3
5	Is this a rehabilitated water point?	Yes/ No	2
Hint	<i>Rehabilitation means major work on an existing water point which takes more than 3 days to complete</i>		
6	If yes, what rehabilitation work was carried out?	HDW deepening/ repair of HDW cover and hatch/ repair of apron and drainage/ repair of hand pump/ replacement of hand pump	2
7	Briefly describe other rehabilitation work not included in 11 above.	2
8	Is water point functional?	Yes/ No	2/3
9	If No, when did the water point break down?	Less than 1 week ago/ between a week and a month ago/ between 1 and 3 months ago/ more than 3 months ago.	2
10	The last time this water point was repaired, how long did it take after breaking down before the water point was in use again?	Less than 1 week/ between 1 and 2 weeks/ between 2 weeks and a month/ more than one month	2
Hint	<i>Ask at least 3 people to agree on a response</i>		
11	Is water point damaged?	Below ground damage to well/ damaged apron or drain/ damaged hand pump/ damaged well cover or hatch/ no damage	2/3
FO	<i>Please allow multiple selections for this question</i>		
Hint	<i>Only responses 2, 3, and 5 are for BHs with HPs.</i>		
12	Briefly describe other damage not listed in Q. 10.		2/3
13	Geolocate nearest latrine or septic tank		3
Hint	<i>For Q. 20 go to latrine or septic tank closest to well or borehole source and select geolocation mode.</i>		
FO	<i>Please activate geolocation mode for Q.12</i>		
14	How reliable is this water point?	Good/ reasonable/ insufficient	2
Hint	<i>Good = Rarely or never broken down Reasonable = occasionally broken down for short periods Insufficient = Frequently or always broken down</i>		
15	Does the water point provide water all year round?	Always water/ Seasonal/ Never has water	2
16	If Seasonal, for how many months is water not available or is insufficient?	2

17	If a hand dug well in which month was well digging completed?	2
18	What was the reason for stopping well digging?	Adequate water supply obtained/ Hard rock prevented further digging/ Other	2
19	If the response to Q.18 is Other, briefly describe reason.	2
20	Is this water point used as a source of drinking water?	Yes/ No	2
21	If No, why is it not used as a source of drinking water?		2
22	What is the taste and appearance of the water from this water point?	Crystal clear/ Coloured/ Salty/ Clean/ Rust or iron taste/ Visible particles/ Odour/ Other	2/3
FO	<i>Please allow multiple selections for this question</i>		
Hint	<i>Inspect a sample and also ask 2-3 users for their opinion.</i>		
23	If Other selected in Q.22 briefly describe other issue.		2/3
24	If the water point is a hand dug well is it regularly chlorinated?	Yes/ No	2
25	Is water paid for at this water point	Yes/ No	2
26	If Yes how is payment made?	When water collected from water point/ Other	2
27	If Yes who is the payment made to?	2
28	If water paid for on collection what is the charge per container? SLL /bucket SLL/ 5 gallon or 20 litre container	2
29	If Other briefly describe payment amount and frequency.	2
Hint	<i>For example this could be a monthly payment per household or a payment when the water point breaks down etc</i>		
30	Was a caretaker(s) trained to look after this water point?	Yes/ No	2
31	Name this person(s).		2
32	Is there a WASH management committee?	Yes/ No	2
33	Were the committee members trained?	Yes/ No	2
34	How many members are women?	2
35	What positions do women hold on the committee?	Chairperson/ Secretary/ Treasurer	2

FO	<i>Please allow multiple selections for Q.35</i>		
36	How many committee members have disabilities?	2
37	Is there a trained mechanic available at this water point?	Yes/ No	2
38	What is the mechanics name?	2
39	Were trained mechanics given toolkits	Yes/ No	2
40	Image of tools		3
<i>Hint</i>	<i>Take a picture of the tools removed from their storage container and laid out on a flat surface.</i>		
41	How many minutes to reach nearest parts supplier?	2
42	Name locality where nearest parts supplier is found.	2
43	Have repairs been effectively carried out on this water point.	Yes/ No	2
44	Give brief details	2
45	Image of water point		3
<i>Hint</i>	<i>Take picture to show all parts of the water point including the drainage</i>		
46	Image of hand pump or extraction system		3
<i>Hint</i>	<i>Take close up picture to show hand pump or extraction system.</i>		
47	For protected hand dug well, image of access hatch		3
<i>Hint</i>	<i>Badly made or fitted access hatches allow contamination of protected hand dug wells, take a close up picture of the closed access hatch.</i>		
48	Assess construction quality of water point	Good/ Fair/ Poor	3
49	Give comments not included above	2/3

A.3 Rainwater Harvesting (Community checklist). Complete checklist by (1) using information provided, (2) with assistance from community leaders and WASH committee, and (3) by direct observation (see right hand column). Complete one questionnaire for each locality sampled.

1	Submission date		1
Hint	<i>Q.1 is completed automatically</i>		
2	Submitter		1
3	District		1
Hint	<i>Q. 3 – 6 have drop down menus</i>		
4	Chiefdom		1
5	Section		1/2
6	Locality		1/2
7	Population (PHC 2020)		1
Hint	The responses for Q.7 and Q.8 are selected automatically		
8	Total number of households (PHC 2020)		1
9	How many households have rainwater harvesting systems?	2/3

A.4 Rainwater Harvesting (Household checklist) Complete checklist by (1) using information provided, (2) with assistance from householder, and (3) by direct observation (see right hand column). Complete one questionnaire for each household sampled.

1	Name of head of household		2
2	Type of storage tank	Plastic/ Steel/ ferrocement/ Masonry/ Recycled container (eg. oil drum)/ containers normally used for collecting water from public supply	3
3	Image of storage tank		3
Hint	<i>Take picture showing storage tank and inlet from roof catchment.</i>		
4	Assess construction quality of tank	Good/ Fair/ Poor	3
5	How is rainwater treated before drinking?	Chlorinated/ Filtered/ Boiling/ Solar disinfection/ No treatment	2/3
6	How is rainwater used?	Drinking/ Cooking/ Bathing/ Washing clothes	2/3
FO	<i>Please allow multiple selections in Q.6</i>		
7	How many days does full tank last?	2

8	How could you improve your rainwater harvesting system, eg. by adding more storage.	2
9	What is your alternative water source?	Protected HDW/ Borehole/ Unprotected HDW/ Protected spring/ Unprotected spring/ Piped water system/ Surface water	2

A.5 Community Water (Spring protections, gravity flow systems). Complete checklist by (1) using information provided, (2) with assistance from the water system caretakers, WASH committee and users, and (3) by direct observation (see right hand column). Complete one questionnaire for each locality with a piped water system.

1	Submission date		1
<i>Hint</i>	<i>Q.1 is completed automatically</i>		
2	Submitter		1
3	District		1
<i>Hint</i>	<i>Q. 3 – 6 have drop down menus</i>		
4	Chiefdom		1
5	Section		1/2
6	Locality		1/2
7	Population (2020)		1
<i>Hint</i>	<i>The response to Q.7 is provided automatically.</i>		
8	Which agency implemented this water point?	UNICEF/SLSAV, UNICEF/ADP, UNICEF/ADP/CEDA, UNICEF/OXFAM, OTHER	2
9	Type of water system	Spring protection only/ spring protection with storage/ gravity flow piped system/ piped system with pumped source.	2/3
10	What is water source 1 for this water system?	Protected spring/ open intake in stream/ protected hand dug well/ borehole/ OTHER (specify)	2/3
11	Image of water source – 1 (take picture)		3
12	Assess construction quality of water source	Good/ Fair/ Poor	3
13	If the water source is a spring or stream, what measures have been taken to protect this source from contamination?	2/3
14	For well or borehole 1 geolocate nearest latrine or septic tank		3
<i>Hint</i>	<i>For Q. 14 go to latrine or septic tank closest to well or borehole source and select geolocation mode.</i>		

15	What is water source 2 for this water system?	Protected spring/ open intake in stream/ protected hand dug well/ borehole/ OTHER (specify)	2/3
16	Image of water source – 2 (take picture)		3
17	Assess construction quality of source	Good/ Fair/ Poor	
18	If the water source is a spring or stream, what measures have been taken to protect this source from contamination?	2/3
19	For well or borehole 2 geolocate nearest latrine or septic tank		3
20	If water is pumped, what is the power source?	Solar/ grid/ generator	2/3
21	What is the functional status of the water system?	Fully functional/ partially functional/ Non functional	2/3
22	If not fully functional give brief details of problem/ breakdown	2
23	When did this problem/ breakdown occur?	Less than 1 week ago/ between a week and a month ago/ between 1 and 3 months ago/ more than 3 months ago.	2
24	The last time the water supply was repaired, how long did it take after breaking down before the water point was in use again?	Less than 1 week/ between 1 and 2 weeks/ between 2 weeks and a month/ more than one month	2
25	Briefly describe the most recent breakdown and how it was repaired.		
26	How reliable is the water system?	Good/ reasonable/ insufficient	2
Hint	<p><i>Good = Rarely or never broken down</i></p> <p><i>Reasonable = occasionally broken down for short periods</i></p> <p><i>Insufficient = Frequently or always broken down</i></p>		
27	Do the water source/sources provide water all year round?	Always water/ Seasonal/ Dry always	2
28	If Seasonal, for how many months is water not available or is insufficient?	2

29	Is the water system used as a source of drinking water?	Yes/ No	2
30	If No, why is it not used as a source of drinking water?	2
31	What is the taste and appearance of the water from this water point?	Crystal clear/ Coloured/ Salty/ Clean/ Rust or iron taste/ Visible particles/ Odour/ Other	2/3
FO	<i>Please allow multiple selections for this question</i>		
Hint	<i>Inspect a sample and also ask 2-3 users for their opinion.</i>		
32	If Other selected in Q.31 briefly describe.		2/3
33	If the water source(s) is a hand dug well is it regularly chlorinated?	Yes/ No	2
34	How is water entering the water system treated?	Chlorination/ UV treatment/ Filtration/ No treatment	2
FO	<i>Please allow multiple selections for Q.34</i>		
35	If water is treated take picture of treatment facility		3
36	If a piped water system, what is the total capacity of the storage tank(s) (m ³)?	2/3
Hint	<i>For plastic tanks capacity in litres may be marked on them (1 m³ = 1,000 litres), otherwise ask caretaker or leave blank. Number of plastic tanks is also required (eg. 2 x 5m³).</i>		
37	Take a picture of the storage tank(s).		3
38	If a piped water system how many public taps are provided?	2
39	If a piped water system, how many of the public taps are currently functional?	3
40	Take a picture of a public tap in good condition		3
41	Take a picture of the public tap which is in the worst condition		3
42	Assess construction quality of tank, standpipes and other visible structures.	Good/ Fair/ Poor	3
43	Is there queuing at any of the public taps	Dry season only/ At all times of the year/ Never	2

<i>Hint</i>	<i>Ask users near each of the taps, and also observe if there is queuing.</i>	
44	If there is a health facility, does it have water piped to the delivery room?	Yes/ No
<i>Hint</i>	<i>Ask the responsible person at the health facility and check water is available in the delivery room.</i>	
45	If Yes, take a picture of the water outlet in the delivery room.	
46	Is there a payment for use of the water system?	Yes/ No
47	If Yes how is this payment made?	When water collected from public standpipes/ Other
48	If payment is at public standpipe what is charge per bucket or per 5 gallon or 20 litre container SLL/ bucket SLL/ 5 gallon or 20 litre container
49	If Yes, who is the payment made to?
50	If Other, briefly describe payment method, including name of person receiving money.
51	Are there yard or household water connections?	Yes/ No
52	If Yes, how is the water paid for?	Metered and paid monthly/ Fixed monthly charge/ Other/ No payment for water
53	If Other briefly describe payment method.
54	Take picture of safe used for keeping money and receipt/ record book opened at current page.	
55	Were caretakers trained to operate and repair the water system.	Yes/ No
56	Name these caretakers.
57	Ask the caretakers to describe the most common repair or maintenance work they have to carry out.

58	Is there a WASH management committee?	Yes/ No	2
59	If Yes, were the committee members trained?	2
60	If Yes, how many members are there?	2
61	If Yes, how many members are women?	2
62	If Yes, what positions do women hold on the WASH management committee?	Chairperson/ Secretary/ Treasurer	2
FO	<i>Please allow multiple selections for Q.61</i>		
63	If Yes, how many WASH management committee members have disabilities?	2
64	Give comments not included above	2

B.1 Community Sanitation and Hygiene (community level). Complete checklist by (1) using information provided, (2) with assistance from community leaders, WASH committee members and community members, and (3) by direct observation (see right hand column). Complete one questionnaire for each sampled locality.

1	Submission date		1
Hint	<i>Q.1 is completed automatically</i>		
2	Submitter		1
3	District		1
Hint	<i>Q. 3 – 6 have drop down menus</i>		
4	Chiefdom		1
5	Section		1/2
6	Locality		1/2
7	Population (2020)		1
Hint	<i>The response to Q.7 is provided automatically.</i>		
6	Has community been declared ODF?	Yes/ No	2
7	If Yes, when was it declared ODF?		2
Hint	<i>Ask at least 3 community members to agree a response. Provide month and year.</i>		
8	If yes, Is community still ODF today?	Yes/ No	2
Hint	<i>Ask at least 3 community members to agree a response.</i>		
9	Is there evidence of open defaecation?	Yes/ No	3
Hint	<i>Small children's faeces may be visible close to homes.</i>		
10	Have trained latrine builders been active in the community?	Yes/ No	2
11	No. of households (2020)		1
Hint	<i>The response to Q.11 is provided automatically.</i>		
12	No. of households without latrine	2
Hint	<i>Provide exact number if the community are sure of this, otherwise "more than ..." is also acceptable.</i>		

Sample 10% of latrines, the required sample size of households for each locality will be provided.

Divide the sample approximately according to house types as follows:

House type >	A. Mud wall/ thatch roof	B. Mud wall/ tin roof	C. Concrete wall/ tin roof
Sample allocation			

All house types present	30%	40%	30%
No type A houses		60%	40%
No type B houses	60%		40%
No type C houses	50%	50%	

Then visit each of the sampled households and complete the following form for their latrine and hygiene arrangements. If a household does not have a latrine record No in question 1 and then continue to the next sampled household and complete a new form until the required sample number is reached.

B.2 Community Sanitation and Hygiene (sampled household level). Complete checklist by (1) using information provided, (2) with assistance from householder, and (3) by direct observation (see right hand column). Complete one questionnaire for each sampled household.

1	Does household have their own latrine	Yes/ No	2
Hint	<i>If response to Q.1 is No, save checklist and go to next sampled household.</i>		
2	Take photo of inside of latrine		3
3	Is faecal matter separated from human contact eg. by slab or seat with drop hole, pour flush bowl etc.	Yes/ No	3
4	Give details of slab	Concrete/ Timber/ Sheet metal	3
5	Assess cleanliness of latrine	Clean/ Fairly clean/ Not clean	3
6	What type of structure is built over latrine	1/ 2/ 3/ 4/ 5	3
Hint	1. Local materials (fragile)/ 2. Local materials (sturdy)/ 3. Unplastered mud block/ 4. Plastered mud block/ 5. Brick or block masonry. Note: Go to next lower category for cloth screen or door with no internal latch.		
7	Take photo of structure over latrine from outside		3
8	Assess construction quality of latrine	Good/ Fair/ Poor	3
9	Is water available nearby for hand washing	Yes/ No	3
10	Is soap available at the point where water is available?	Yes/ No	3
11	Did you observe hand washing taking place or is there evidence of use of recent use of hand washing facilities?	Yes/ No	3
12	Does the household have a dish rack	Yes/ No	3
13	Does the household have a clothes hanging line	Yes/ No	3
14	Does the household have a compost pit	Yes/ No	3
15	How is water treated before drinking?	Chlorination/ filtration/ Solar disinfection/ No treatment	2/3
16	How is collected water stored?	In covered or screw capped containers/ in open containers/ both of these	2/3
17	Other comments not included above	2/3

C. School Water. Complete checklist by (1) using information provided, (2) with assistance from headteacher and staff, and (3) by direct observation (see right hand column). Complete one questionnaire for each sampled school.

1	Submission date		1
<i>Hint</i>	<i>Q.1 is completed automatically</i>		
2	Submitter		1
3	District		1
<i>Hint</i>	<i>Q. 3 – 6 have drop down menus</i>		
4	Chiefdom		1
5	Section		1/2
6	Locality		1/2
7	Name of school		1/2
8	Type of school	PPS/ PS/ JSS/ SSS/ Tec.voc.	1/2
9	Total number of pupils		2
10	Total number of male pupils		2
11	Total number of female pupils		2
12	Number of resident staff and their families	2
13	What is the main source of drinking water for the school?	Prot. Spring/ Prot. HDW/ Borehole/ Piped water supply/ Unprot. Spring/ Unprot. HDW/ Rainwater catchment/ Surface water	2/3
14	Extraction system/ pump type	Hand manual/ Afridev/ India Mk 2/ Kardia/ Standpipe	2/3
15	How far is this water point from the school?	On site/ Less than 50 m/ Greater than 50 m/ Don't know	2
16	Who owns this water point?	Community/ school	2
17	Who uses this water point?	Community and school/ school only	2
18	Water point functional?	Yes/ No	2/3
19	If No, when did the water point breakdown?	Less than 1 week ago/ between a week and a month ago/ between 1 and 3 months ago/ more than 3 months ago.	2
20	Estimate amount of drinking water used by the school per day. x 20 L jerrycans/ containers x 15 L buckets	2
21	Drinking water required to meet MEST standards. L/day	1

<i>Hint</i>	<i>For Q. 21, according to MEST guidelines each pupil requires 3 litres/day of drinking water, so amount required = No. of pupils x 3. Then add 25 litres/resident teacher and teacher's household member.</i>	
22	Where is water provided for drinking	In classrooms/ Outside classrooms/ At sanitation facility/ Taken directly from water point
23	How is water provided for drinking?	Open buckets with shared cup/ Closed Veronica buckets/ Other closed containers/ From standpipe/ From tap on storage tank
24	How is water treated before drinking?	Chlorinated/ Filtered/ Solar disinfection/ No treatment
25	Is hand pump damaged?	Yes/ No
26	Does the water source provide sufficient water all year round?	Yes/ No
27	If No, for how many months is water not available or is insufficient?
28	In which month was well digging completed?
29	What was the reason for well deepening to be halted?	Adequate water obtained/ Hard rock stopped further digging/ Other reason
30	If response to Q. 29 was Other reason, briefly describe reason.
31	Is there a staff member responsible for the water point?	Yes/ No
32	If yes, what is this person's name?	
33	Who maintains water point?	
34	Is there a trained mechanic available at this point?	Yes/ No
35	Have repairs been effectively carried out on this water point.	Yes/ No
36	Give brief details of last breakdown and repair
37	On this occasion how long was pump out of use? days
38	Image of water point used for drinking water	
39	Assess construction quality of water point	Good/ Fair/ Poor

40	What is the main source of water for the school for other purposes, such as washing and cleansing?	Prot. Spring/ Prot. HDW/ Borehole/ Piped water supply/ Unprot. Spring/ Unprot. HDW/ Rainwater catchment/ Surface water	2/3
41	How far is this water point from the school?	On site/ Less than 50 m/ Greater than 50 m/ Don't know	2
42	Who owns this water point?	Community/ school	2
43	Who uses this water point?	Community and school/ school only	2
44	Water point functional?	Yes/ No	2/3
45	If No, when did the water point breakdown?	Less than 1 week ago/ between a week and a month ago/ between 1 and 3 months ago/ more than 3 months ago.	2
46	Estimate amount of water used for washing and cleansing by the school per day. x 20 L jerrycans/ containers x 15 L buckets	2
47	Water for washing and cleansing required to meet MEST standards. L/day	1
Hint	<i>For Q. 47, according to MEST guidelines each pupil requires 3 litres/day of washing and cleansing water, so amount required = No. of pupils x 3.</i>		
48	Does the water source provide sufficient water all year round?	Yes/ No	2
49	If No, for how many months is water not available or is insufficient?	2
50	Image of water point used for water for washing and cleansing.		3
51	Assess construction quality of water point	Good/ Fair/ Poor	3
52	Other comments not included above.	2/3

D.1 School Sanitation (general). Complete checklist by (1) using information provided, (2) with assistance from headteacher and staff, and (3) by direct observation (see right hand column). Complete one questionnaire for each sampled school.

1	Name of school		1/2
2	Locality		1/2
3	Type of school	PPS/ PS/ JSS/ SSS/ Tec.voc.	1/2
4	Is there a focal point trained teacher responsible for hygiene and sanitation?	Yes/ No	2
5	If yes what is this person's name?		2
6	What is the responsible persons gender?	Female/ Male	2
7	Is the responsible person disabled?	No/ Yes	2
8	Are there hand washing facilities in front of each classroom?	Yes/ No	2/3
9	Is soap available at these hand washing points?	Yes /No	2/3
10	Take photo of hand washing arrangements		3
11	Other comments not included above	2/3

D.2 School Sanitation and Hygiene (Latrine inspection). Complete checklist by (1) using information provided, (2) with assistance from headteacher and staff, and (3) by direct observation (see right hand column). Complete one questionnaire for each sampled latrine.

1	Sanitation facility No. 1, 2, 3, 4 etc		3
<i>Hint</i>	<i>Number the latrines in the order in which they are visited</i>		
2	Facility for	Boys/ Girls/ Shared	2/3
3	Type of facility	Pit latrine/ VIP latrine/ Pour flush latrine	3
4	No. of drop holes/ seats	3
5	If this facility is for girls is there a container for the disposal of absorbent materials?	Yes/ No	3
6	How is the material disposed of by the school?	3
7	If this facility is for girls are there facilities that allow for washing and changing?	Yes/ No	3
<i>Hint</i>	<i>This means a cubicle with internal latch and with sufficient space for changing and a supply of water inside or close to the latrine with containers for collecting the water and bringing it to the cubicle.</i>		

8	If this facility is for boys, is there a urinal?	Yes/ No	3
9	Are there separate cubicles for each drop hole/ seat	Yes/ No	3
10	Is there provision for male/ female teachers and staff?	Yes/ No	3
11	Is there provision for special needs users?	Yes/ No	3
12	If Yes, select features provided.	Access ramp/ wide entry door/ extra large cubicle/ grab rails next to toilet or drop hole/ accessible hand wash facility/ internal door latch	3
FO	<i>Please allow multiple selections for Q.12</i>		
13	Can the cubicle doors be latched from the inside?	Yes/ No	3
14	Are cubicle doors clearly labelled?	Yes/ No	3
Hint	<i>For example, Girls, Boys, Male Staff, Female Staff</i>		
13	Cleanliness of latrine/ toilet	Clean/ Fairly clean/ Not clean	3
14	Take photo of inside of one cubicle		3
15	How is cleansing water provided in cubicles	In bucket or other container/ From tap/ Water has to be brought to cubicle from tap close to latrine/ Water not available close to latrine	2/3
16	What provision is made for hand washing outside cubicle?	Tap/ Veronica bucket/ Open container with scoop/ No provision	3
17	How many hand washing points are there at this latrine? Enter number.	3
18	Is soap available at hand washing points?	Yes /No	2/3
19	Take photo of hand washing arrangements		3
20	Did you observe pupils correctly using the hand washing facilities?	Yes/ No	3
21	Is there evidence that hand washing facilities are in regular use?	Yes/ No	3
22	Take external photo of latrine		3
23	Assess construction quality of latrine	Good/ Fair/ Poor	3
24	Other comments not included above	2/3

Appendix 6 ASWA Communities and Survey Samples

Koinadugu District Target End-line Survey Sample

Koinadugu District HH Survey + WINC + WINS (2 Localities)

Chiefdom	Section	Locality	EA code
Diang	Kondembaia	Kondembaia	23020407
Sengbe	Heremakono	Foronaya	23080301

HH Survey + WINC (4 Localities)

Chiefdom	Section	Locality	EA code
Gbonkobon Kayaka	Gbonkobor	Thankoro-Sidia	23040309
Kalian	Kalian	Kumala Town	23070222
Kasunko Kakellian	Kasunko	Kafogo	23040503
Wara Bafodia	Kamanikie	Kamaninki	23100505

HH Survey + WINS (4 Localities)

Chiefdom	Section	Locality	EA code
Diang	Darakuru	Soloya	23020102
Diang	Sokurala	Sokurala I	23020602
		Sokurala I	23020602
Diang	Sokurala	Sokurala II	23020602
Wara Yagala	Zone 4	Yagala	23110403

Falaba District HH Survey + WINC + WINS (1 Localities)

Chiefdom	Section	Locality	EA code
Dembelia	Balandugu	Koromasilaya	23030102

HH Survey + WINC (3 localities)

Chiefdom	Section	Locality	EA code
Delemandugu	Mankalia	Fankaia	23050306

Mongo	Mongo I	Herikofeh	23050410
Wollay Barawa	Barawa	Koikoro	23070101

HH Survey + WINS (1 locality)

Chiefdom	Section	Locality	EA code
Nyedu	Nyedu	Bumbukoro	23060502

Koinadugu Baseline 5 Localities without ASWA Intervention)

Chiefdom	Section	Locality	EA code
Diang	Gbenekoro	Heremakono	23020210
Kamukeh	Kambalia	Kamagbonsie	23100603
Kasunko Kakellian	Kasunko	Fadugu Town	23040510
Nieni	Yiffin	Perakoro	23070316
Nieni	Yiffin	Yirayasokurala	23070316

Falaba Baseline (5 localities)

Chiefdom	Section	Locality	EA code
Kulor Saradu	Kulor	Yiraya	23060104
Mongo	Mongo I	Mongo	23050405
Neya	Neya I	Kunia	23060208
Neya	Neya II	Yiraya Kura II	23060408
Sulima	Gberia-Timbako	Gberia-Timbako	23091904

Bonthe District Target End-line Survey Sample

Chiefdom	Section	Locality	EA code
Bum	Gbondubum	Malema	32020309
Bum	Koimato	Simbaru	32020402
Bum	Lanje	Mania	32020506
Bum	Torma	Victoria	32020702
Bum	Yawma	Luvuma	32020901
Imperri	Bigo	Cannal Junction	32040303

Imperi	Bigo	Mokabba	32040312
Imperi	Kahekay	Junctionla	32040402
Imperi	Kahekay	Junctionla	32040402
Imperi	Moimaligie	Momoligie	32040506
Imperi	Moimaligie	Teso Old Town	32040504
Jong	Basiaka	Petema	32050106
Jong	Beyinga	Yenkisa	32050307
Jong	Falewuja	Banjuma	32050412
Jong	Sopan-Cleveland	Blama	32110101
Jong	Sopan-Cleveland	Foya	32050707
Jong	Sopan-Cleveland	Tissana	32050703
Kpanda Kemo	Sewama	Gondama	32060506
Kpanda Kemo	Taokunor	Jahun	32060602
Kpanda Kemo	Taokunor	Pelewahun	32060603
Sogbeni	Beyorgboh	Gerehun	32100202
Sogbeni	Ndopie	Gola	32100301
Sogbeni	Ndopie	Mosanjo	32100302
Sogbeni	Pengor	Batoke	32100408
Sogbeni	Pengor	Tihun	32100406
Sogbeni	Pengor	Tihun	32100406
Yawbeko	Baryegbe	Biama	32050708
Yawbeko	Baryegbe	Mokosie	32110102
Yawbeko	Kataway	Naba	32110303
Yawbeko	Mobulie	Gbahama	32110402

Bonthe Baseline (12 localities)

Chiefdom	Section	Locality	EA code
Bum	Tamba	Jangale	32020604
Bum	Tamba	Talia	32020604
Bum	Torma	Gbema I	32020702
Bum	Torma	Solon	32020702
Bum	Yawma	Nyandehun	32020905
Imperi	Sokrapan	Lontoke	32040601
Imperi	Sokrapan	Mbaoma	32040601
Jong	Falewuja	Sembehun	32050412

Nongoba Bullom	Gbangbassa	Bisau	32080501
Sogbeni	Pengor	Sembehun	32100408
Yawbeko	Baryegbe	Goama	32110101
Yawbeko	Baryegbe	Maiema	32110101

Corrections to data

The following are examples of incorrect data with brief explanations of the corrections applied:

Transcription errors

Koinadugu/ Diang/ Sokurala/ Sokuralatwomankorekor

It was assumed that Sokuralatwo referred to the section so removing this gives:

Koinadugu/ Diang/ Sokurala/ Mankorekor, although this does not match any SSL locality names.

Incorrect chiefdom name

Koinadugu/ Wara Yagala/ Bendugu/ Kurankor Sansa

A locality with the same section name was found in the neighbouring chiefdom so this becomes:

Koinadugu/ Sengbe/ Bendugu/ Kuranko Sansarah, which matches an SSL locality.

Bonthe/ Yawbeko/ Gbonduhun/ Malema

A locality with the same section name was found in the neighbouring chiefdom so this becomes:

Bonthe/ Bum/ Gbondobum/ Malema

Incorrect Section name

Koinadugu/ Wara Yagala/ Yagala/ Kamaseh

Following the splitting of Koinadugu district some of the sections in Koinadugu were renamed:

Koinadugu/ Wara Yagala/ Zone 4/ Kamaseh.

Bonthe/ Sogbeni/ Bayorgboh/ Batogie

A locality with a similar sounding name is found in the neighbouring section so this becomes:

Bonthe/ Sogbeni/ Pengor/ Batoke

Although the progress data base records a new HDW/HP, the HDW/HP at this locality, which is partly disassembled, was provided not by ASWA but by MoWR/ KOICA and Team and Team contractors in 2018. In view of the errors in location data in the records this should be checked.

Incorrect section and locality name

Bonthe/ Kpanda Kemo/ Haahun/ Haahun/ RC PS – Borehole

No section or locality Haahun could be found, the locality name which sounds similar to Haahun is Jahun (pronounced Yahun). The school at Jahun is recorded in the EMIS data base as a UBC PS. The locality information then becomes:

Bonthe/ Kpanda Kemo/ Taokunor/ Jahun/ UBC PS – HDW/HP

A visit to this school showed that the water point is not a borehole, but a hand dug well with hand pump, this water point was being rehabilitated and nearing completion on the day of inspection.

Incorrect chiefdom and section name

Koinadugu/ Nieni/ Nieni/ Alikalia

Alikalia is a large town located in the neighbouring chiefdom of Kalian:

Koinadugu/ Kalian/ Kalian/ Alikalia

Section name missing

Koinadugu/ Kasonko/ / Kafogo

Koinadugu/ Kasonko/ / Thankorosidia

These locality names match SSL localities so the correct sections could be identified:

Kasunko Kakellian/ Kasunko/ Kafogo

In the case of Tankorosedeia it was found to be in a neighbouring chiefdom:

Gbonkobon Kayaka/ Gbonkobor/ Tankorosedeia

The splitting of the old Koinadugu district into Koinadugu and Falaba districts included the creation of new chiefdoms and sections in both districts and some section boundaries were also adjusted. The progress data base showed the new districts, but some localities had not been allocated to the correct district, or the chiefdom and section identities were incorrect due to the above changes.

Other corrections to data

During the field work some additional errors in data were discovered, some examples are as follows:

Bonthe/ Imperri/ Kahekay/ Junctionla/ Fawe PS and Kankalay PS

These schools are not located at Junctionla but at Mogbwemo, so their location becomes:

Bonthe/ Imperri/ Babum/ Mogbwemo/ Fawe PS and Kankalay PS

Bonthe/ Imperri/ Bigo/ Mokaba

In the progress data base ASWA has provided a borehole for this locality. This is incorrect as the facility provided is a hand dug well with hand pump which was completed in December 2020. This locality does have a borehole, but it was installed in 2018 by MoWR/ KOICA.

Bonthe/ Jong/ Sopan-Cleveland/ Tissana/ DEC PS

This school has a hand dug well which is listed in the progress data base, however, the community report this well as having been constructed by WVI in 2012 so it is possible that it predates the ASWA project and instead was rehabilitated by ASWA.

Appendix 7 Facilities Observations Checklist – Technical Narrative

Piped Water Systems

A general observation relevant to all types of piped water systems is that in all cases where these systems were working the caretakers reported that by far their most common repair task was the replacement of taps (called pumps in communities). It was noticed that these taps were mostly 15 mm (half inch) size and very lightly made. If UNICEF could identify a suitable heavy duty tap in 20 mm size this would make a very large difference to the reliability of all piped water systems in Sierra Leone. These taps would have a much higher cost, but less frequent replacement would save the cost of the replacement tap itself as well as the labour cost. A more robust tap might also be suitable for repair, such as replacement of the tap washer rather than replacement of the whole fitting. UNICEF has clarified that PVC ball-valves are now used for the taps and these are more durable and less prone to theft.

Gravity Flow Systems

Several gravity flow water systems have been constructed in Koinadugu and Falaba districts by Oxfam and SLSAV. Gravity flow systems (GFS) can be an attractive technology for rural water supplies due to their low operating costs and reliability.

The following table lists the GFSs constructed/ rehabilitated under the ASWA program in Koinadugu and Falaba together with their functional status.

Chiefdom	Section	Locality	Popn.	IP	Sampled	Date visited	New/rehab.	Status at time of visit
Koinadugu								
Nieni	Nieni	Alikalia	14,495	Oxfam	No*	20.12.20	Rehab.	Not functional <i>(April 2021 update: The rehab work was not completed, and NGO was not paid. UNICEF has engaged new IP to complete works)</i>
Kasunko Kakellian	Kasunko	Kafogo	1,246	Oxfam	Yes	23.12.20	Rehab.	Not functional <i>(April 2021 update: Work was not completed, and NGO was not paid. UNICEF has engaged new IP to complete works)</i>
Wara Yagala	Zone 6	Kamayimbo	290	Oxfam	No*	24.12.20	New	Not functional <i>(April 2021 update: UNICEF</i>

								<i>reported that IP did not complete the work and was not paid). UNICEF is engaging IP to make it functional</i>
Nieni	Kalian	Kumala Town	6,729	Oxfam	Yes	20.12.20	Rehab.	<i>Not functional (April 2021 update: UNICEF reported that IP did not complete the work and was not paid). UNICEF has engaged new IP to complete works)</i>
Falaba								
Wollay Barawa	Barawa	Koikoro	905	Oxfam	No	Not visited	Not known	
Neya	Neya I	Kurubonla	7,047	SLSAV	No	Not visited	Not known	Under construction**
Mongo	Mongo I	Mongo Kiridu	389	SLSAV	Yes	21.12.20	New	Partially functional. (April 2021 update: UNICEF informs that the facilities are now fully functioning. A pump was installed to pump the water from the sedimentation tank to the reservoir and some lengths of pipes have been replaced.)
Neya	Neya II	Yarandor	534	SLSAV	No	Not visited	Not known	Functional**

*Observation checklists not conducted but discussion held with community leaders.

**Information provided by SLSAV.

The very high proportion of these water systems which are not functional indicates that there are issues which need to be addressed and these are discussed in more detail for each locality.

Alikalia (Koinadugu)

This locality had not been included in the sample group but the return journey from Kumala Town to Kabala passed through the town and this allowed for a brief visit with the Chiefdom Speaker and his advisors.

These works were the rehabilitation and extension of an existing GFS built by Peace Corps in 1976. This water system continues to operate but with a reduced capacity and has no storage. Provision of storage capacity would enable much more effective use of the water available.

Community leaders at Alikalia reported that 5 new storage tanks had been constructed and gravity mains and distribution pipelines installed as well as 42 new standpipes. However, water had only reached the first of the 5 storage tanks, and flow to this tank was lower than expected. They said they had expressed their concern to Oxfam, as the Implementation Partner, that the storage tanks were being constructed at too high an elevation in relation to the intake and this fear seems to have been justified by the subsequent results.

Kafogo (Koinadugu)

This GFS uses an intake structure which includes a small horizontal roughing filter section between the intake and the storage tank, which is located close to the intake. The WASH committee members report that the system is seasonal and there was no water entering the system on the day of the visit even though there was a flow in the stream on which the intake is located. An inspection showed that this flow was leaking under the intake structure wall and continuing down the stream. This flow is just visible to the lower left of the image of the intake. UNICEF reported that discussion is ongoing with the IP to complete the work.



Figure 13-1: Kafogo GFS intake

Kamayimbo (Koinadugu)

As this locality lies along the Kabala to Makeni road a brief visit was made for discussions with WASH committee members. They reported that the system had stopped working 2 days before as the distribution pipeline had been cut by an installation team laying a fibre optic cable. The WASH committee were trying to find a solution to this problem, and it is likely that they will be successful. They also reported that the water system did not function from January to April and that there had been previous problems with the intake structure. For example in 2019 the stream flow had escaped from the intake structure, and they had used sandbags to close this leak, although the same problem has occurred several times. They report that the source itself is perennial and it may be possible to solve the problems with the system by improving the intake. UNICEF reported that discussion is ongoing with the IP to complete the work.

Kumala Town (Koinadugu)

This scheme is a rehabilitation of an existing GFS which was constructed in 1996 but badly damaged during the war. The original system had no storage tanks, water flowed directly from the intake structure

to the taps. It was reported that no survey of the gravity main was carried out for the recent rehabilitation and that the pipes were laid along the same alignment as the old system. Two storage tanks had been constructed but no water had reached either tank. During the inspection, a handheld GNSS device (Trimble TDC 600) was used to capture their positions and elevations, see table.

Point No.	Description	Elevation (m above MSL)	Elevation corrected for instrument height
1	1996 intake structure	442.9	441.7
2	New intake structure	421.6	420.4
3	Reservoir 1	397.4	397.4
4	Reservoir 2 (town)	419.0	419.0
5	GL upper part of town	410.2	409.0

These elevations were obtained using the device's internal GNSS receiver as no external antenna or receiver was available so there is a range of uncertainty, about +/- 3 m for positions 1 and 2 (which are in dense tree cover) and between 1 and 1.5 m for points 3, 4, and 5. Despite this the elevation of reservoir 2 (intended to serve the southern, higher part of the town), is similar to the elevation of the intake and this would explain why water has not reached this tank. Water has also not reached tank 2 despite its elevation being considerably lower than the intake, flow in both gravity mains may also be reduced or stopped completely by air trapped at high points in the pipeline, particularly with low heads and it is understood that in the 1996 system 7 air release vents were provided whereas none have been provided in the new gravity main. There are also no washouts at low points to allow for the flushing of debris and sediment from the pipeline.

A further issue with the gravity main was that the pipe was exposed at some areas, and this runs the risk of damage to the pipeline by unauthorised persons. It was also reported that most part of this reticulation was not done under ASWA-SL as this was a rehabilitated system.

It was also noticed that the intake was open and contaminated with leaves and tree debris.

The WASH committee members taking part in the inspection said that an intake at a higher level had been used for the 1996 system but that no water entered this intake during the dry season so for the new scheme the intake structure was built at a lower elevation.

UNICEF reported that the IP did not complete the work and was not paid. UNICEF has engaged new IP to make the required design corrections and complete the system.

Mongo Kiridu (Falaba)

This locality was substituted for the locality originally in the sample, Koikoro, as it provided an opportunity to look at a GFS constructed by an agency other than Oxfam and was also more accessible in the limited time available for the field work.

The Manager of SLSAV had drawn our attention to the issues with the water system, namely that the storage tank was at a higher elevation than the intake and this was verified using the hand-held GNSS device with the following results:

Point No.	Description	Elevation (m above MSL)	Elevation corrected for instrument height*
1	Intake structure (WL)	482.1	481.7
2	Solar pump feed tank (WL)	455.2	454.7
3	Current collection point (outlet)	477.9	478.1
4	Storage tank (inlet)	499.0	499.0

*All elevation values are subject to uncertainty of up to +/- 1.5 m.

As at Alikalia and Kumala Town there is an issue with the relative elevations of the intake and storage tank and in this case the elevations obtained using the hand-held GNSS device show clearly that the storage tank is at a higher elevation than the intake structure.

UNICEF reported that since the intake is almost at the same elevation as the existing community tap stand, it was not feasible for the water to flow by gravity to a storage tank in the community, which will be able to, in turn, feed the tap stands. UNICEF decided to introduce a feed tank at a lower elevation and then pump to a storage tank on a higher ground, which can then feed the tap stands within the community. UNICEF informed that the facilities has now been completed and fully functioning. A solar pump was installed to pump the water from the sedimentation tank to the reservoir, which feeds the tap stands. The old broken pipes have equally been replaced.

Elevations and Survey and Design Process

It is the view of the Evaluation Team that the elevation problems at Kumala Town and Mongo Kiridu (and possibly at Alikalia as well) show that the methods used for survey and design of these systems needs to be reviewed. We understand from IP staff that they have been collecting horizontal coordinates for proposed features such as intakes using mobile devices and providing these locations to UNICEF and that these coordinates have then been used to obtain elevations using Google Maps or Google Earth, although this has not been confirmed by UNICEF. If this is the case it is probable that the elevations for intakes, which are often located in wooded areas, will be artificially high as the technique used for measuring these elevations using Lidar or space based radar will see the upper level of the tree canopy as a solid surface.

UNICEF WASH Team has clarified that in their view, there were no elevation problem in Monge Kiridu and that the design was based on the ground realities. The elevation difference between the intake and the existing tap stand in the community is just 4 meters (+-2 m). Considering head loss and other variables, it was not feasible to move the water by gravity to a storage tank in the communities and still feed the tap stands from the storage tank. UNICEF then decided to introduce a feed tank at a lower elevation to first receive the water from the intake and then, through a solar pump, lift the water to a storage tank at a higher elevation to be able to feed the tap stands within the community. This was simply the intended design based on the peculiarity of the location and was never an elevation error as report here. For Kumala, UNICEF already confirmed that the IP did not follow the design, could not complete the work, and was not paid. UNICEF has already engaged another IP to complete the work in line with the design.

Portable GNSS receivers are now available which can obtain levels of precision (about 0.3-0.5 m horizontal position and elevation), which are more than adequate for the design of a rural gravity water system. IP technical staff could be provided with and trained in using this equipment in conjunction with a handheld device to collect the position data. This device would have a suitable software which would

also allow the input of attributes for points or line features. The resultant survey could then be downloaded to QGIS on an office computer to provide a site plan and other design data. This approach would have several advantages:

- The training of IP staff in this technique would create a sustainable local capacity and would incentivise these staff as they would be following a project through from inception to completion, with responsibility for its success.
- Using the above approach not only the survey but a large part of the design is carried out by the person in the field. This has a strong practical logic in that siting of structures and alignment of pipelines are best done while looking at the situation first-hand. Surveying software has some facilities which facilitate this process, for example, the ability to check elevation at any time.
- Completed designs would still have to be checked and approved by UNICEF or MoWR technical staff but as the outputs are in digital form this would be simple to arrange.

UNICEF confirmed that this is already used in the design of piped systems under UNICEF supported projects.

Intake construction

At Kafogo and Kamayimbo the water systems were not working primarily due to leakage of the intake structures. This is not likely to be an issue in all GFS, for example the intake structure for the Mongo Kiridu GFS has been built on a rock outcrop in the stream channel. At Kafogo and Kamayimbo it is likely that the intakes have been constructed on a foundation which includes porous weathered material, and a possible solution would be to remove some of this material upstream of the intake weir and seal the bed and sides of the stream with clay.

General Comments on Gravity Flow Systems

It is the experience of the Evaluation Team that the springs in Sierra Leone used for gravity feed water systems are rarely from fractured rock formations but are usually water table springs in the deep weathered zone.

As illustrated in Figure 2-1 showing the intake for Kumala Town, most gravity system intakes in Sierra Leone are open, and not sealed intakes emerging from rock fractures and cracks which is the case in areas with shallow weathering and fractured rock formations. The reason for raising this issue is that an open intake has clear implications for water quality, and it is important to consider how the water quality can be ensured or to consider alternative water sources such as boreholes.

The high, seasonal rainfall in Sierra Leone means that the point at which these springs emerge moves up or down slope with the rise and fall of the water table. Conventional sealed spring catchments are thus not feasible and gravity system intakes are usually constructed below the lowest limit of the water table in the form of weirs with an open impoundment of water behind them. Effectively this water is



Figure 13-2: Kumala Town GFS intake

surface water as it is open to contamination from a variety of sources, see image of intake at Kumala Town GFS.

One method of protection of this water is to have byelaws in place to prevent human activity in the catchment area. Such byelaws can be effective and had been in place for the Kumala Town catchment since 1996. (Byelaws at Kafogo are enforced by fines which are paid to the WASH Committee for water system repair and maintenance.)

Filters can also be incorporated into the intake structure to remove large material such as leaves, twigs etc and this has been done in the GFSs built by Oxfam at Kafogo and Kamayimbo. It is also possible to have slow sand filters, but this loses the main advantage of a GFS which is its simplicity and low operation and maintenance requirements.

To make the water safe for consumption continuous chlorination can also be provided.

Oxfam had informed us of the non-functionality of the water systems at Alikalia and Kumala Town and were seeking additional funding to complete these schemes. As explained above, SLSAV were implementing a solar pumping stage at Mongo Kiridu. We think that before any further work is carried out there should be a review of the survey and design process to understand the elevation problem and an alternative approach. In the light of the nature of the sources for gravity flow systems in Sierra Leone it might also be worthwhile to consider the relative advantages of these systems compared with other options, such as piped water systems based on solar pumped boreholes which is a technology already widespread in Sierra Leone. Although pumping and an energy source are required, water quality is much better even without any form of treatment. In favour of gravity flow systems the technology is very simple, and most problems can be fixed by a competent builder and a plumber. It should also be said that often communities have a history of using a particular source, for example they may have depended on it during very dry periods, and this can influence their preference for a gravity scheme based on this source.

Solar BH Piped Water Supplies

In this type of water system a borehole is provided which is fitted with a solar powered submersible pump. Storage capacity is usually provided by plastic tanks on a concrete stand which pressurises the distribution system and also provides an elevated mounting for the solar array, clear of buildings and most trees and also relatively secure from theft.

This type of water supply is common throughout Sierra Leone, particularly for health facilities and schools. For health facilities they provide a self-contained source of pressurised water which can supply the internal plumbing of the clinic.

CEDA implemented 10 of these systems under the ASWA project in Bonthe district, and during fieldwork we discovered other similar systems which had been implemented by WVI, also under ASWA, although the number of these systems is unknown as UNICEF has not provided any information on them. The sample for Bonthe included one of these WVI systems, (Tihun, St. Josephs PS) and the water system at Fawe primary school in Imperri chiefdom, which had been reported in the UNICEF progress report as a borehole with hand pump, was also found to be a solar BH piped water system implemented by WVI. We also discovered WVI community systems at Tihun and Junctionla but time pressure did not allow

observation checklists to be carried out, in these cases a note was taken of functional status and images were collected.

Two other CEDA systems were added to increase the sample size , Senehun, which was very close to Mattru across the river, and Gbangbama, which lies along the road from Mattru to Mogbwemo.

The systems visited were as follows:

Chiefdom	Section	Locality	School name	Popn.	IP	Date visited	Status at time of visit
Bonthe – Observation checklist							
Jong	Kumabwe-Kwe	Senehun		No data	CEDA	28.12.20	Functional*
<u>Sogbeini</u>	Pengor	Tihun		No data	CEDA	29.12.20	Partially functional**
<u>Sogbeini</u>	Pengor	Tihun	St Josephs PS and JSS	PS 200	WVI	29.12.20	Functional
<u>Imperi</u>	Bigo	Gbangbama		No data	CEDA	30.12.20	Partially functional
<u>Imperi</u>	Bonthe	Mogbwemo	Fawe PS	529	WVI	30.12.20	Functional
<u>Imperi</u>	Bonthe	Mogbwemo	Kankalay PS	550	WVI	30.12.20	Functional***
Bonthe – No Observation checklist							
<u>Sogbeini</u>	Pengor	Tihun		No data	WVI	29.12.20	Non functional
Imperi	Kahekay	Junctionla		950	WVI	30.12.20	Functional

*Functional – minor issues such as broken taps are ignored, the system is providing a service which meets MoWR guidelines.

**Partially functional – System functioning but with major issues and which does not entirely meet MoWR guidelines.

***Shares Fawe PS water system.

Comments on partially functioning and non-functional systems

Tihun (CEDA) – Parts of the distribution system are out of action, (5 out of 15 taps working), water is not used for drinking and the amount of water provided does not meet demand, with regular queuing at taps.

Gbangbama (CEDA) – Parts of the distribution system do not function correctly, (3 taps out of 9 working). Water used for drinking only by some users, water supplied does not meet demand, with regular queuing at taps.

Tihun (WVI) – This system was reported to have broken down in 2017, about one year after construction. The problem is believed to be a failure of the submersible pump, so probably beyond the capacity of the town WASH committee to replace.

In terms of number of systems 6/7 solar BH PWS were found to be either functional or partially functional, 4/7 were functional.

Water Quality

The CEDA water system at Tihun is not used as a source of drinking water. Users report that the water is clear when collected but then develops a brownish colouration, and that there is also some sediment. The water is used for all other purposes but drinking water is collected from the solar BH PWS at St Josephs Primary School or from the CHC, which also has a solar BH PWS.

The reports of the water quality from the Gbangbama solar BH PWS are very similar, with some but not all consumers using the water for drinking and also reporting a slight brownish colour with sediments.

The change in colour from clear to brownish after drawing the water suggests high iron levels In addition to iron, the sediment could be due to insufficient development of the borehole after completion or poor borehole construction. This indicates that implementation procedures could be improved e.g. water quality testing after borehole completion but before construction of the water supply.

In the case of the solar BH PWS at St Joseph's RC PS at Tihun, the water quality was reported as very good, and this borehole is located a 220 m from the community system borehole. Tihun lies in the Bullom series which is characterised by laterally continuous unconsolidated aquifers so the presence of high levels of iron in one of these boreholes and not the other is surprising. This also supports the view that the presence of sediment is more likely to be a result of the well design and construction than of the aquifer.

No records have been provided for any of the water supplies so the water quality characteristics cannot be checked from borehole records but should be investigated to determine the cause. If the water produced is not being used for drinking this is an inefficient use of UNICEF resources.

All the other sampled solar BH PWS were reported by users as having good water quality.

System Capacity

The standard solar BH PWS seem to be available with 3 storage capacities, 5 m³ for schools and small communities and 10 m³ and 20 m³ for larger communities.

The following table makes estimations of the demand for all the solar BH PWS surveyed or visited during the fieldwork in Bonthe district. In the case of Tihun there are 3 separate solar BH PWS, constructed by CEDA, WV and a third non ASWA IP. The share of the total daily demand has been attributed to these water systems in the proportion 70%, 20% and 10% respectively.

A storage capacity of 62% of the daily demand provides adequate capacity to smooth out the fluctuations in demand and supply as well as provide some reserve for 2 days of reduced solar energy.



Figure 13-3: Water from Gbangbama WS

This has been used to estimate the required storage capacity in each case and compare with the storage provided.

For a solar powered water system 1 l/sec . of borehole yield pumped for 7 hours provides about 25 m³/day so these system capacities seem well matched to the capacity of a borehole which in the Bullom Series can be up to 2 l/sec.

Locality	School name	Popn.	Supply factor	Daily Demand (m ³ /d)	Required storage capacity (m ³)	Capacity provided (m ³)
Bonthe – Observation checklist						
Old Senehun		210 (est)*	1.0	4.2	2.6	10
Tihun (CEDA)		4,478	0.7	63	39	20
Tihun	St Josephs PS and JSS	PS 200 JSS 200(est)	1.0	2.4	1.5	5
Gbangbama		770 (est)*	1.0	15.4	10	10
Mogbwemo	Fawe PS	529	1.0	3.2	2	5
Mogbwemo	Kankalay PS	550	1.0	3.3	2	
Bonthe – No observation checklist						
Tihun (WVI)		4,478	0.2	18	11	5
Junctionla		950	1.0	19	12	5

*Estimated population based on number of houses counted on Google Earth x 7.

This table shows the good match between the 5m3 tank size system and schools, and this is the size of system preferred by MoHS for clinics.

However for community water systems it is clear that more attention should be paid to matching the system capacity and storage with the size of the community and other design parameters.

Distribution Systems

The CEDA constructed systems at both Tihun and Gbangbama had poorly performing distribution networks. At Tihun there were several areas where the pipelines had been laid very close to the surface with consequent damage to the PE pipes. In general the capacity of the pipelines seemed to be too low, and some had become blocked so that only 5 of the 15 standpipes were functioning. In some places consumers, in frustration, had unearthed the pipes and cut them so that they could fill containers and queuing was common. My driver witnessed a dispute between the wife of an elder and the wife of the town chief over precisely this issue.



Figure 13-5: Tihun CEDA solar BH PWS-signs of water shortage



Figure 13-4: Tihun CEDA solar BH PWS, distribution pipeline on the surface.

At Gbangbama the WASH Committee members reported that 20 mm pipes were used throughout the distribution system even though larger diameter pipes had been brought to site. There were frequent pipe blockages and only 3 of a total of 9 standpipes were reliably functional, with a fourth functional only when other taps were closed. It is notable that no piped connection was made during construction to the CHC close to the town centre, so the community funded and arranged for this connection to be made themselves, unfortunately the connection was not working on the day of the visit due to problems with the distribution system in general.

To address these problems with distribution systems the system designs should be reviewed and compared with what has been implemented. The effectiveness of supervision also needs to improve. There were no distribution problems reported by users at the other systems.

It should be noted that these facilities were only rehabilitated by ASWA-SL and most of the pipe network were not done under ASWA.

Construction quality

The brief inspections carried out showed fair to good construction quality with a few exceptions:

The poor installation of pipelines, i.e.. insufficient depth, which has been mentioned above. The evaluation team recognise that some of these systems are rehabilitated as part of ASWA-SL, and therefore the insufficient construction quality can stem from the original construction. However, when the population in a service area is reported to be served by ASWA-SL, then it should be expected that the rehabilitated project is designed to bring the water system to the expected quality to ensure continued operation.

At Gbangbama the first water tower was condemned as not being strong enough to support the 2 No. 5 m³ tanks and was instead used as a support for the solar array. A second tank support was constructed alongside the first by a new contractor (Code Salone) and the tanks have been installed on this tower. This suggests that supervision could be improved since early inspection identifying the faulty construction would prevent the waste of time and resources used to construct the two towers instead of only one.

Hand Dug Wells with Hand Pumps (HDW/ HP)

New facilities

The new HDW/ HPs inspected were generally of good quality but with the following problems being identified in more than one case:

Insanitary hatch covers.

Ideally the hinged hatch should close over and outside the raised steel frame to prevent contaminated water on the cover from entering the well (see Image below of Gerehun DEC PS well).

As a further precaution the concrete around the hatch should also be cast to form a raised lip into which the frame is cast, (see image below of Pelewahun community well, this lip is too low, and the hatch is insanitary). It is also important that the hatch frame is not recessed into the well cover due to the application of a thick layer of topping as this negates the advantage of having a raised frame, (see image of Jahun community well below).

Having a raised lip cast into the well cover provides an additional barrier to the entry of contaminated spilt water back into the well. No drawings of the well cover were provided but if the MWR standard design is being used this part of the well cover is not well detailed . It is recommended that more detailed drawings of this area be provided to contractors and supervisors be made aware of its importance for the safety of the water supply.



Figure 1: Gerehun DEC PS well



Figure 2: Pelewahun community well



Figure 3: Jahun Community well

Security Gate mounting

The hinges of some of these gates had broken loose from their anchorage in the concrete wall around the well and at Mokosie community the hinges on the gate had broken.

Rehabilitated facilities

Rehabilitation of existing wells seems an attractive a cost effective option, but it is important to understand if the well is seasonal, what the reasons for this are. If digging of the original well did not reach rock and was carried out while the water table was high then there is a good chance of success. However, at some of the well rehabilitations visited, e.g. Koromasilaya community well, the excavation of the original well was stopped due to the diggers reaching rock and so there was little chance of a rehabilitation being successful. The suggestion is that due to the very poor record keeping in Sierra Leone, the community are carefully consulted before any decision is made about rehabilitation.

School Latrines

Guttering (also applies to community RWH systems)

A problem in almost all school latrine rainwater harvesting installations was the quality of installation of the guttering, and the following issues were observed:

Guttering incorrectly mounted in relation to the roof covering so that rainwater would run past the gutter.

No stop ends in guttering allowing water to flow to waste. Running outlets used at the ends of gutters instead of end outlets allowing water to run to waste.

Outlets and down pipes poorly supported so that in most of the latrines inspected these parts had fallen off. When a running outlet is used at the end of a gutter it is difficult to support so a better detail would be to install running outlets close to but not at the end so they would be supported by guttering fixed by fascia clips at each side. The down pipe would then have to be fitted around the corner of the building but clipping it to the walls would provide a much more secure installation.



Figure 13-6: Herikofeh community RWH, poorly supported end outlet.



Figure 13-7: Jahun UBC PS, poorly supported end outlet and down pipe



Figure 13-6: Bumbukoro MCA PS, full length guttering, most gutters were too short.

Most gutters were much too short, for example the guttering fitted to the very large roof of Bumbukoro MCA PS was only about 4 m long so most of the rainwater falling on this very large roof was wasted. Not surprisingly the caretaker reported that even after heavy rain storms the 10,000 litre tank only filled to about a third of its capacity.

Disabled access

Ramps

Where disabled access had been considered there was always a ramp to facilitate access to the facility. It was noticed however that erosion at the toe of the ramp in some cases had created a step which would be difficult for wheelchair users to negotiate. This could be avoided if the ramp was extended below ground level during construction and it is suggested that this detail be included in the drawings for these facilities.



Figure 13-7: Ramp at Mokosie DEC PS

Grab Rails

Grab rails were provided in all special needs cubicles, and these were more or less as indicated in the MEST drawings. At Mokaba DEC PS in Mokaba a different approach had been used with grab rails on both sides and a seat so the user would not have to squat or suspend themselves while using the facility. The provision of grab rails on both sides seems to provide a more balance support than a single rail. Also just visible next to the toilet is a tiled washing area which seems a worthwhile addition.



Figure 13-8: Special needs cubicle at Mokaba DEC PS

Rainwater Harvesting (RWH)

Guttering

The same comments as made for school latrine gutters also apply to community RWH systems.

Is Rainwater Harvesting Appropriate

Rainwater harvesting can only supply water on a seasonal basis and should therefore be considered as a water source supplementary to a community's principal, perennial water source. Harvesting and storing sufficient water to last for the whole year is simply not viable and is not necessary as there is a huge store of rainwater in the ground which can be exploited using wells and boreholes. It is therefore a bit surprising to find that at Herikofeh, a community reliant on surface sources who say they had wanted a well, that a RWH system was provided. It is understood that this was a pilot project, but there was no need for this, and it has prolonged the suffering of this community unnecessarily. Due to the lack of data available it is not possible to comment about any of the other communities provided with RWH, but it should be a priority for UNICEF to investigate and provide perennial water sources where they are required as soon as possible.

Claims for Population Served

There are a number of comments which can be made about the way the progress report is prepared.

In all the communities listed in the progress report, the whole population of the community seems to have been used to assess the numbers of persons benefitting from the ASWA program. This is incorrect as a single water point will not provide an adequate supply of water to a community greater than the total number the systems are designed to cover.

The MWR recommended number of persons to be served by a point water source such as a HDW/ HP or BH/ HP is 250. At the basic service level of 20 lpcd this requires the water point to produce about 5 m³/day which is about the most that can be expected of a typical well, so greater populations will be unlikely to receive adequate water. A borehole may produce more water but when the number of users exceeds 250 the wear and tear on the pump is greater and the cost of repairs is greater. For these reasons, a single point source cannot be considered to have adequately served the entire population of a locality if this is greater than 250 persons.

The gravity schemes in Falaba and Koinadugu have been presented in the reporting available to the Evaluation Team as completed whereas none of the 5 schemes visited was functional (Mongo Kiridu was partly functional) at the time of the field work, which was one year after the formal end of the project.

Some of these schemes are not new schemes but rehabilitations of older schemes, e.g. Kumala Town, Alikalia, Kafogo, and has been indicated in the report.

Some point sources reported as complete in the ASWA-SL progress till end of 2019 were incomplete at the time of the evaluation team's field visits in December 2020 or had recently been completed or were still under construction. The water points at Mokaba and Jahun communities had been completed a few days before our visit and the well at Jahun UBC PS was still under construction. There are also some water points included in the progress report which have never worked (Gbahama), or which are seasonal and so cannot be considered to have provided a basic service, (Koromasilaya community and Ahmadiyya PS, Tissana DEC PS, and several others).

At Batoke community in Sogbeini chiefdom no ASWA water point was found, but as no coordinates for the locations of facilities were provided to the Evaluation Team, there is some uncertainty about this observation.

Details of Inspected Facilities

Communities sampled in Bonthe.

Chiefdom	Section	Locality	Baseline	HHs	Popn.	CLTS IP	Baseline	Target	Completed	ODF	ODF celeb	WINC pop	WINC IP	WS type	WINSname	WINS pop	WINS IP	WS type	
Bum	Gbondubum	Malema	No	65	418	PACE		1	6	4	Yes	Yes	209	PACE	HDW/ HP	Methodist PS	288	PACE	HDW
Bum	Yawma	Luvuma	No	165	965	CEDA/ PAC	6	87	72	Yes	No								
Bum	Torma	Victoria	Yes	25	150	PACE	3	10	10	No	No								
Bum	Lanje	Mania	Yes	119	558	PACE	4	8	8	Yes	Yes								
Bum	Koimato	Simbaru	No	25	422	CEDA	0	25	25	Yes	No								
Imperri	Kahekay	Junctionla	No	150	950	PACE	8	15	8	Yes	Yes				Fawe PPS/ PS	342	WVI	BH/HP	
Imperri	Kahekay	Junctionla	No												Kankalay PS/SS	?	WVI	?	
Imperri	Bigo	Mokabba										288	PACE	BH/ HP					
Imperri	Bigo	Cannal Junction		26	185	PACE	5	10	10	Yes	Yes								
Imperri	Moimaligie	Teso Old Town		24	151	PACE	7	15	15	Yes	Yes								
Imperri	Moimaligie	Momoligie		109	597	PACE	3	11	11	Yes	Yes								
Jong	Sopan-Cleveland	Foya	No	35	203	PACE/ CEDA	5	30	27	Yes	Yes	118	PACE	HDW/ HP					
Jong	Sopan-Cleveland	Tissana	No	69	336	PACE	2	8	8	Yes	Yes				DEC PS	180	CEDA	HDW/ HP	
Jong	Sopan-Cleveland	Blama	Yes	42	185	CEDA	0	46	42	Yes	Yes								
Jong	Falewuja	Banjuma	Yes	11	82	PACE	3	8	8	Yes	Yes								
Jong	Beyinga	Yenkisa	Yes	86	325	PACE	3	10	10	Yes	Yes								
Jong	Basiaka	Petema	Yes	67	466	PACE	2	6	6	Yes	Yes								
Kpanda Kei	Taokunor	Jahun	No	54	220	CEDA	7	54	51	Yes	Yes	287	PACE	HDW/ HP	RC PS/ UBC PS??	253	PACE	BH/ HP	
Kpanda Kei	Sewama	Gondama	Yes	54	257	CEDA	0	54	49	Yes	Yes								
Kpanda Kei	Taokunor	Pelewahun	No									437	CEDA	HDW/ HP					
Sogbeni	Beyorgboh	Gerehun	No	70	410	PACE	3	15	9	Yes	No				UBC PS	287	PACE	Rehab.	
Sogbeni	Pengor	Batoke	Yes									153	CEDA	HDW/ HP					
Sogbeni	Pengor	Tihun	No										CEDA	BH/ Piped WS					
Sogbeni	Pengor	Tihun	No	228	4,478	CEDA	1,486	1,821	518	Yes	Yes				NIM PS	220	PACE	Rehab.	
Sogbeni	Pengor	Tihun	No												St Josephs PS	318	WVI	BH/ HP	
Sogbeni	Ndopie	Mosanjo		56	71	CEDA	21	56	56	Yes	Yes								
Sogbeni	Ndopie	Gola		6	160	CEDA	0	6	6	Yes	Yes								
Yawbeko	Baryegbe	Mokosie		58	276	CEDA	18	56	51	Yes	Yes	276	CEDA	HDW/ HP	DEC PS	255	PACE	HDW/ HP	
Yawbeko	Mobulie	Gbahama		20	181	CEDA	1	4	3	Yes	Yes	110	PACE	HDW/ HP					
Yawbeko	Kataway	Naba		10	146	CEDA	5	30	30	Yes	Yes								
Yawbeko	Baryegbe	Biama		34	122	CEDA	4	10	9	Yes	Yes								
Yawbeko	Yorma	Sargoh		45	1,827	CEDA	3	26	25	Yes	Yes								

Bonthe - CLTS

Chiefdom	Section	Locality	Baseline	HHs	Popn.	CLTS IP	Baseline	Target	Completed	ODF	ODF celeb
Bum	Gbondubum	Malema	No	65	418	PACE	1	6	4	Yes	Yes
Bum	Yawma	Luvuma	No	165	965	CEDA/ PACE	6	87	72	Yes	No
Bum	Torma	Victoria	Yes	25	150	PACE	3	10	10	No	No
Bum	Lanje	Mania	Yes	119	558	PACE	4	8	8	Yes	Yes
Bum	Koimato	Simbaru	No	25	422	CEDA	0	25	25	Yes	No
Imperi	Kahekay	Junctionla	No	150	950	PACE	8	15	8	Yes	Yes
Imperi	Bigo	Cannal Junction	No	26	185	PACE	5	10	10	Yes	Yes
Imperi	Moimaligie	Teso Old Town	No	24	151	PACE	7	15	15	Yes	Yes
Imperi	Moimaligie	Momoligie	No	109	597	PACE	3	11	11	Yes	Yes
Jong	Sopan-Cleveland	Foya	No	35	203	PACE/ CEDA	5	30	27	Yes	Yes
Jong	Sopan-Cleveland	Tissana	No	69	336	PACE	2	8	8	Yes	Yes
Jong	Sopan-Cleveland	Blama	Yes	42	185	CEDA	0	46	42	Yes	Yes
Jong	Falewuja	Banjuma	Yes	11	82	PACE	3	8	8	Yes	Yes
Jong	Beyinga	Yenkisa	Yes	86	325	PACE	3	10	10	Yes	Yes
Jong	Basiaka	Petema	Yes	67	466	PACE	2	6	6	Yes	Yes
Kpanda Kemo	Taokunor	Jahun	No	54	220	CEDA	7	54	51	Yes	Yes
Kpanda Kemo	Sewama	Gondama	Yes	54	257	CEDA	0	54	49	Yes	Yes
Sogbeni	Beyorgboh	Gerehun	No	70	410	PACE	3	15	9	Yes	No
Sogbeni	Pengor	Tihun	No	228	4,478	CEDA	1,486	1,821	518	Yes	Yes
Sogbeni	Ndopie	Mosanjo	No	56	71	CEDA	21	56	56	Yes	Yes
Sogbeni	Ndopie	Gola	No	6	160	CEDA	0	6	6	Yes	Yes
Yawbeko	Baryegbe	Mokosie	No	58	276	CEDA	18	56	51	Yes	Yes
Yawbeko	Mobulie	Gbahama	No	20	181	CEDA	1	4	3	Yes	Yes
Yawbeko	Kataway	Naba	No	10	146	CEDA	5	30	30	Yes	Yes
Yawbeko	Baryegbe	Biama	No	34	122	CEDA	4	10	9	Yes	Yes
Yawbeko	Yorma	Sargoh	No	45	1,827	CEDA	3	26	25	Yes	Yes

Bonthe - WINC

Functionality and Service Level										
Chiefdom	Section	Locality	Popn.	WINC IP	WS type	Functionality	WS service level	Comments	Popn. w/ Basic service	
Bum	Gbondubum	Malema	209	PACE	HDW/ HP			Not surveyed	209	
Imperri	Bigo	Mokaba	288	PACE	BH/ HP	Functional	Basic	Just completed	96	
Imperri	Bigo	Gbangbama*		CEDA	Solar BH PWS	Partly functional	Basic	Not used as drinking water by all, not adequate?		
Jong	Kumabe-Kwe	Senehun	210	CEDA	Solar BH PWS	Functional	Basic	Community generally satisfied.	210	
Jong	Sopan-Cleveland	Foya	118	PACE	HDW/ HP	Functional	Basic	Not yet completed, not known if perennial.	118	
Kpanda Kemo	Taokunor	Jahun	287	PACE	Rehab. HDW/ HP	Functional	Basic	Just completed, was seasonal before rehab.	144	
Kpanda Kemo	Taokunor	Pelewahun	437	CEDA	HDW/ HP	Functional	Seasonal	Not adequate for population		
Sogbeni	Pengor	Batoke	153	CEDA	HDW/ HP			No ASWA WS here		
Sogbeni	Pengor	Tihun	4,478	CEDA	Solar BH PWS	Partly functional	Basic	Not used as drinking water, not adequate	1,567**	
Yawbeko	Baryegbe	Mokosie	276	CEDA	Rehab. HDW/ HP	Functional	Basic	Was perennial before rehabilitation.	138	
Yawbeko	Mobulie	Gbahama	110	PACE	HDW/ HP	Not functional	No service	Has never functioned		
		Totals	6,566						2,482	

*No population figures available

**Town population x 0.7 (portion served) x 0.5 (Not adequate service)

Bonthe – WINS Water Supply

Functionality and Service Level										
Chiefdom	Section	Locality	School name	School popn.	WINS IP	WS type	Functionality	Service level	Comments on WS	Pupils w/ Basic service
Bum	Gbondubum	Malema	Methodist PS	288	PACE	HDW/ HP	Not functional	Seasonal		
Imperri	Bonthe	Mogbwemo	Fawe PPS/ PS	342	WVI	Solar BH	Functional	Basic		342
Imperri	Bonthe	Mogbwemo	Kankalay PS/SS	550	WVI	Solar BH	Functional	Basic	WS shared with Fawe PS	550
Jong	Sopan-Cleveland	Tissana	DEC PS	180	CEDA	HDW/ HP	Functional	Seasonal		
Kpanda Kemo	Taokunor	Jahun	UBC PS	253	PACE	BH/ HP	Under construction	No service		
Sogbeni	Beyorgboh	Gerehun	UBC PS	287	PACE	Rehab. HDW/ HP	Not functional	Seasonal		
Sogbeni	Pengor	Tihun	NIM PS	220	PACE	Rehab. HDW/ HP	Not functional	Basic	Currently broken down	220
Sogbeni	Pengor	Tihun	St Josephs PS, JSS	318	WVI	Solar BH	Functional	Basic		318
Yawbeko	Baryegbe	Mokosie	DEC PS	255	PACE	Rehab. HDW/ HP	Functional	Basic		255
		Totals	2,693							1,685

Bonthe - WINS Sanitation

Latrine Service Level										
Chiefdom	Section	Locality	School name	School popn.	WINS IP	Latrine type	Latrine score	Sanitation service level	Comments on Latrines	Pupils w/ Basic service
Bum	Gbondubum	Malema	Methodist PS	288	PACE				Not surveyed	288
Imperri	Bonthe	Mogbwemo	Fawe PPS/ PS	342	WVI	1 x Pit latrine	2	Limited	Shared, 132 pupils/drop hole	180
Imperri	Bonthe	Mogbwemo	Kankalay PS/SS	550	WVI				Not an ASWA facility	
Jong	Sopan-Cleveland	Tissana	DEC PS	180	CEDA	VIP Boys	9	Basic		180
Jong	Sopan-Cleveland	Tissana	DEC PS		CEDA	VIP Girls	9	Basic		
Kpanda Kemo	Taokunor	Jahun	UBC PS	253	PACE	VIP Boys	9	Basic		253
Kpanda Kemo	Taokunor	Jahun	UBC PS		PACE	VIP Girls	9	Basic		
Sogbeni	Beyorgboh	Gerehun	UBC PS	287	PACE	VIP Boys	9	Basic		287
Sogbeni	Beyorgboh	Gerehun	UBC PS		PACE	VIP Girls	9	Basic		
Sogbeni	Pengor	Tihun	NIM PS	220	PACE	VIP Boys	7	Limited	No urinal	
Sogbeni	Pengor	Tihun	NIM PS		PACE	VIP Girls	8	Basic		110
Sogbeni	Pengor	Tihun	St Josephs PS	318	WVI	VIP Boys	7	Limited	No urinal	
Sogbeni	Pengor	Tihun	St Josephs PS		WVI	VIP Girls	8	Basic		159
Yawbeko	Baryegbe	Mokosie	DEC PS	255	PACE	VIP Boys	0	No service	Not completed, not in use	
Yawbeko	Baryegbe	Mokosie	DEC PS		PACE	VIP Girls	4	Limited	Not completed, in use	128
			Totals	2,693						1,585

Communities sampled in Falaba.

Chiefdom	Section	Locality	Baseline	HHs	Popn.	CLTS IP	Completed latrines	ODF celeb	WINC pop	WINC IP	WINC WS type	WINS name	Sch pop	WINS IP	WINS WS type
Delemandugu	Mankalia	Farawaroh	Yes	53	388	SLSAV	2	Yes							
	Mankalia	Fankaia	No	42	1,008	Oxfam	23	Yes	669	Oxfam	BH/ HP				
Dembelia	Balandugu	Koromasilaya	No	54	890	ADP/ CEDA	50	Yes	890	ADP/ CEDA	Rehab.	Ahmadiyya PS	367	ADP/ CEDA	Rehab.
	Balandugu	Laboya	No	16	61	ADP SL	9	Yes							
Dembelia Sinkunia	Manan	Bangaya I	No	19	210	ADP SL	24	Yes							
	Manan	Jedia	No	40	251	ADP SL	46	Yes							
	Sinkunia	Bantantia	No	48	507	ADP SL	36	No							
	Manan	Talaya	No	25	147	ADP SL	2	Yes							
Kamadugu Yiraia	Lower Kamadugu	Karakunema	No	10	185	ADP SL	12	No							
Mongo	Mongo I	Herikofeh	No	27	163	Oxfam	20	Yes	163	SLSAV	RWH				
Neya	Neya I	Soroya	No	61	378	Oxfam	46	Yes							
Nyedu	Nyedu	Bumbokoro	No	78	3,219	Oxfam	57	Yes				MCA PS	324	Oxfam	RWH
Wollay Barawa	Barawa	Koikoro	No	33	268	Oxfam	18	Yes	905	Oxfam	GFS				

Falaba – CLTS

Chiefdom	Section	Locality	Baseline	HHs	Popn.	CLTS IP	Baseline latrines	Target	Completed latrines	ODF	ODF celeb
Delemandugu	Mankalia	Farawaroh	Yes	53	388	SLSAV	13	24	2	Yes	Yes
	Mankalia	Fankaia	No	42	1,008	Oxfam	19	23	23	Yes	Yes
Dembelia	Balandugu	Koromasilaya	No	54	890	ADP/ CEDA	4	50	50	Yes	Yes
	Balandugu	Laboya	No	16	61	ADP SL	7	9	9	Yes	Yes
Dembelia Sinkunia	Manan	Bangaya I	No	19	210	ADP SL	0	15	24	Yes	Yes
	Manan	Jedia	No	40	251	ADP SL	9	46	46	Yes	Yes
	Sinkunia	Bantantia	No	48	507	ADP SL	7	40	36	No	No
	Manan	Talaya	No	25	147	ADP SL	4	23	2	Yes	Yes
Kamadugu Yiraia	Lower Kamadugu	Karakunema	No	10	185	ADP SL	3	12	12	Yes	No
Mongo	Mongo I	Herikofeh	No	27	163	Oxfam	5	20	20	Yes	Yes
Neya	Neya I	Soroya	No	61	378	Oxfam	15	46	46	Yes	Yes
Nyedu	Nyedu	Bumbokoro	No	78	3,219	Oxfam	38	57	57	Yes	Yes
Wollay Barawa	Barawa	Koikoro	No	33	268	Oxfam	15	18	18	Yes	Yes

Falaba – WINC

Functionality and Service Level									Popn. w/ Basic service
Chiefdom	Section	Locality	Popn.	WINC IP	WS type	Functionality	Service level	Comments on WS	Popn. w/ Basic service
Delemandugu	Mankalia	Fankaia	669	Oxfam	BH/ HP			Not visited	250
Dembelia	Balandugu	Koromasilaya	890	ADP/ CEDA	Rehab.	Not functional	Limited	Seasonal, broke down 6 months ago	
Mongo	Mongo I	Herikofeh	163	SLSAV	RWH	Not functional	Seasonal	Minor construction issues, but community wanted HDW/ HP	
Wollay Barawa	Barawa	Koikoro	905	Oxfam	GFS			Subsิตuted by Mongo Kiridu	905
Mongo	Mongo I	Mongo Kiridu	389	SLSAV	GFS/ solar	Partially functional	Not completed	Design problem, tank higher than intake	195
		Totals	3,016						1,350

Falaba – WINS Water supply

Functionality and Service Level										
Chiefdom	Section	Locality	School name	Sch. Popn.	WS type	Functionality	Service level	Comments on WS	Pupils w/ Basic service	
Dembelia	Balandugu	Koromasilaya	Ahmadiyya PS	367	Rehab.	Not functional	Seasonal	Seasonal		
Nyedu	Nyedu	Bumbukoro	MCA PS	324	RWH	Not functional	Limited	PVC tap fitting broken, guttering faulty and is too short.	324	
Nyedu		Bumbukoro	MCA PS		BH/ HP	Functional	Basic	Marked as provided by CRS not ASWA		
			Totals	691					324	

Falaba – WINS Sanitation

Latrince Service Level										
Chiefdom	Section	Locality	School name	Sch. Pop.	Latrine type	Latrine score*	Service level	Comments on Latrines	Pupils w/ Basic service	
Dembelia	Balandugu	Koromasilaya	Ahmadiyya PS	367					367	
Dembelia	Balandugu	Koromasilaya	Ahmadiyya PS							
Nyedu	Nyedu	Bumbukoro	MCA PS	162	VIP (boys)	7.5	Basic	54 pupils/drop hole	135	
Nyedu	Nyedu	Bumbukoro	MCA PS	162	VIP (girls)	9	Basic		162	
			Totals	691					664	

*Scored on meeting MEST requirements

Communities visited in Koinadugu.

Locality	Baseline	HHs	Popn.	CLTS IP	Completed latrines	ODF celeb	WINC pop	WINC IP	WINC WS type	WINS name	Sch pop	WINS IP	WINS WS type
Kondembaia	No	79	335	ADP SL	14	Yes	698	ADP	Rehab.	RC PS	277	ADP	Rehab.
Soloya	No	110	1,207	ADP SL	101	No				RC PS	166	ADP	HDW/ HP
Nerekoro	Yes	12	128	ADP SL	12	Yes							
Sokurala I										RC PS		? ADP	?
Sokurala I										RC PS	171	ADP	Rehab.
Sokurala II										Islamic PS	221	ADP	HDW/ HP
Thankoro-Sidia	No	39	447	Oxfam	19	Yes	690	Oxfam	BH/ HP				
Kumala Town		213	447	Oxfam	99	Yes	6,729	Oxfam	GFS				
Sowayirahia		30	178	Oxfam	21	Yes							
Kafogo		98	1,246	Oxfam	38	Yes	1,246	Oxfam	GFS				
Kamakumba		37	135	ADP SL	37	Yes							
Sawuria	Yes	96	1,339	Oxfam	61	Yes							
Foronaya	No	21	243	ADP SL	14	Yes	243	ADP/ CEDA	HDW/ HP	BAN PS	124	ADP/ CEDA	HDW/ HP
Kasanikoro	Yes	205	294	Oxfam	49	Yes							
Kamaninki	No	74	705	Oxfam	46	Yes	380	Oxfam	Spr. Prot.				
Kasiehtinti	Yes	25	874	Oxfam	23	Yes							
Yagala		20	133	Oxfam/ ADP SL	23	Yes				RC PS	595	ADP/ CEDA	Rehab.
Kayako		23	31	Oxfam	23	Yes							
Kamaseh		69	1,012	Oxfam/ ADP SL	7	Yes							

Koinadugu - WINC

Functionality and Service Level										
Chiefdom	Section	Locality	WINC pop	WINC IP	WS type	Functionality	WS service level	Comments on WS	Popn. w/ Basic service	
Diang	Kondembaia	Kondembaia	698	ADP	Rehab.	Functional	Basic	Other sources available, adequate supply	250	
Gbonkobon Kayaka	Gbonkobor	Thankoro-Sidia	690	Oxfam	BH/ HP	Functional	Basic	Supply not adequate for population	250	
Kalian	Kalian	Kumala Town	6,729	Oxfam	GFS	Not functional	No service	Design issues, not complete	0	
Kasunko Kakellian	Kasunko	Kafogo	1,246	Oxfam	GFS	Not functional	Seasonal	Seasonal due to intake problem.	0	
Nieni	Nieni	Alikalia*	14,495	Oxfam	GFS	Not functional	No service from ASWA WS	Existing 1976 WS working. New water system not functional as water does not reach tanks.	0	
Sengbe	Heremakono	Foronaya	243	ADP/ CEDA	HDW/ HP	Not functional	Seasonal	Seasonal, broke down 3 months ago		
Wara Wara Bafodia	Kamanikie	Kamaninki	380	Oxfam	Spr. Prot.			Not visited	380	
Wara Wara Yagala	Kayakor	Kamayimbo*	290	Oxfam	GFS	Not functional	Seasonal	Seasonal due to intake problem. Broken down on day of visit as pipeline cut by cable contractor.	0	
		Totals	24,771						880	

*These localities were not in the sample but were visited briefly when moving between other sampled localities.

Koinadugu - WINS Water Supply

Functionality and Service Level									
Section	Locality	WINSname	Sch pop	WINS IP	WS type	Functionality	WS service level	Comments on WS	Pupils w/ Basic service
Kondembaia	Kondembaia	RC PS	331	ADP	Rehab.	Not functional	Limited	Seasonal, broke down 1-3 months ago.	
Darakuru	Soley	RC PS	166	ADP	HDW/ HP			Not surveyed	166
Sokurala	Sokurala I	RC PS	Not known	ADP	Not known			Not surveyed	
Sokurala	Sokurala I	RC PS	171	ADP	Rehab.			Not surveyed	171
Sokurala	Sokurala II	Islamic PS	221	ADP	HDW/ HP			Not surveyed	221
Heremakono	Foronaya	BAN PS	124	ADP/ CEDA	HDW/ HP	Not functional	Limited	Seasonal, broke down >3 months ago.	
Zone 4	Yagala	RC PS	595	ADP/ CEDA	Rehab.			Not surveyed	595
		Total	1,608						1,153

Koinadugu - WINS Sanitation

Latrine Service Level										
Chiefdom	Section	Locality	School name	School popn.	WINS IP	Latrine type	Latrine score	Service level	Comments on Latrines	Pupils w/ Basic service
Diang	Kondembaia	Kondembaia	RC PS	147	ADP	Pit latrine	8	Basic	49 pupils/ drop hole	135
Diang	Kondembaia	Kondembaia	RC PS	184	ADP	Pit latrine	7	Basic	61 pupils/ drop hole	134
Diang	Darakuru	Soley	RC PS	166	ADP				Not surveyed	166
Diang	Sokurala	Sokurala I	RC PS		ADP				Not surveyed	
Diang	Sokurala	Sokurala I	RC PS	171	ADP				Not surveyed	171
Diang	Sokurala	Sokurala II	Islamic PS	221	ADP				Not surveyed	221
Sengbe	Heremakono	Foronaya	BAN PS	124	ADP/ CEDA	Pit latrine	9	Basic		124
Sengbe	Heremakono	Foronaya	BAN PS		ADP/ CEDA	Pit latrine	9	Basic		
Wara Wara Yagala	Zone 4	Yagala	RC PS	595	ADP/ CEDA				Not surveyed	595
			Totals	1,608						1,546

Scoring School Latrines

Bonthe - School Sanitation																				
Scoring of Latrines on Compliance with MEST Standards																				
Locality	School name	WINC IP	No of pupils	Latrine type	No. of drop holes	Pupils/ drop hole	Min. 4 drop holes/ school	Separate cubicles	Separate/ shared	Staff provision	Special needs provision	Urinal	Distance from WS	Doors marked	Disposal of absorbent mats.	Latch inside	Construction quality	Score	Score corrected for pupil Nos.	
Mogbwemo	Fawe PPS/ PS	WVI	529	Pit	4	132	Yes	Yes	Shared	Shared	No	No	>50	No	In pit	Yes	Good	7	2	
Tissana	DEC PS	CEDA	90	VIP	3	30	Yes	Yes	Separate	Separate	Yes 5/6	Yes	51	No		Yes	Good	9	9	
Tissana	DEC PS	CEDA	90	VIP	3	30	Yes	Yes	Separate	Separate	Yes 5/6		>51	No	In pit	No	Good	9	9	
Jahun	UBC PS	PACE	126	VIP	3	42	Yes	Yes	Separate	Shared	Yes 5/6		50	No	In pit	Yes	Good	9	9	
Jahun	UBC PS	PACE	127	VIP	3	42	Yes	Yes	Separate	Shared	Yes 5/6	Yes	>50	No		Yes	Good	9	9	
Gerehun	UBC PS	PACE	135	VIP	3	45	Yes	Yes	Separate	Shared	Yes 4/6	Yes	>39	No		Yes	Fair	9	9	
Gerehun	UBC PS	PACE	115	VIP	3	38	Yes	Yes	Separate	Shared	Yes 4/6		39	No	In pit	Yes	Fair	9	9	
Tihun	NIM PS	PACE	95	VIP	3	32	Yes	Yes	Separate	Shared	Yes 2/6	No	Not known	No		Yes	Good	7	7	
Tihun	NIM PS	PACE	120	VIP	3	40	Yes	Yes	Separate	Shared	Yes 2/6		Not known	No	In pit	Yes	Good	8	8	
Tihun	St Josephs PS	WVI	108	VIP	3	36	Yes	Yes	Separate	Shared	Yes 4/6	No	55	No		No	Fair	7	7	
Tihun	St Josephs PS	WVI	109	VIP	3	36	Yes	Yes	Separate	Shared	Yes 4/6		>55	Yes	In pit	No	Good	8	8	
Mokosie	DEC PS	PACE	144	Pit	3	48	Yes	Yes	Separate	Shared	Yes 4/6	Yes	60	No		Yes	Incomplete	0	0	
Mokosie	DEC PS	PACE	161	VIP	3	54	Yes	Yes	Separate	Shared	Yes 4/6		>60	No	In pit	Yes	Incomplete	8	4	

Falaba - School Sanitation																				
Scoring of Latrines on Compliance with MEST Standards																				
Locality	School name	IP	No of pupils	Type of latrine	No. of drop holes	Pupils/ drop hole	Min. 4 drop holes/ school	Separate cubicles	Separate/ shared facilities	Staff provision	Special needs provision	Urinal	Distance from WS	Doors marked	Disposal of absorbent mats.	Latch inside	Construction quality	Score	Score corrected for No. of pupils	
Koromasilaya	Ahmadiyya PS	ADP/ CEDA																		
Koromasilaya	Ahmadiyya PS	ADP/ CEDA																		
Bumbokoro	MCA PS	Oxfam	162	VIP	3	54	Yes	Yes	Separate	Share	Yes 4/6	Yes	>50	No		Yes	Good	9	7.5	
Bumbokoro	MCA PS	Oxfam	162	VIP	4	41	Yes	Yes	Separate	Share	Yes 5/6		>50	No	In pit	Yes	Good	9	9	

Koinadugu - School Sanitation																				
Scoring of Latrines on Compliance with MEST Standards																				
Locality	School name	WINS IP	No of pupils	Latrine type	No. of drop holes	No. of pupils/ drop hole	Min. 4 drop holes/ school	Separate cubicles	Separate/ shared facilities	Staff provision	Special needs provision	Urinal	Distance from WS	Doors marked	Disposal of absorbent mats.	Latch inside	Construction quality	Score	Score corrected for No. of pupils	
Kondembaia	St Peter's RC PS	ADP	147	Pit latrine	3	49	Yes	Yes	Separate	Use old latrine	Yes 3/6	Yes	>50 m	No		Yes	Fair	9	8	
Kondembaia	St Peter's RC PS	ADP	184	Pit latrine	3	61	Yes	Yes	Separate	Use old latrine	Yes 3/6		>50 m	No	In pit	Yes	Fair	9	7	
Foronaya	BAN PS	ADP/ CEDA	61	Pit latrine	3	20	Yes	Yes	Separate	Share with pupils	Yes 3/6	Yes	61	No		Yes	Good	9	9	
Foronaya	BAN PS	ADP/ CEDA	55	Pit latrine	3	18	Yes	Yes	Separate	Share with pupils	Yes 3/6		>60	No	In pit	Yes	Good	9	9	

Summary of CLTS Results and Household Latrines

Based on ASWA-SL Reporting

ODF		District	Targetted localities	Declared ODF	Declared & celebrated
Bonthe	Localities		336	325	268
	Population	219,218	73,931	71,937	54,518
	% Target population		100	97	74
	% district population	100	34	33	25
Falaba	Localities		181	175	151
	Population		64,866	63,798	59,688
	% Target population		100	98	92
Koinadugu	Localities		256	250	244
	Population		78,251	75,760	73,984
	% Target population		100	97	95
Falaba & Koinadugu	Localities		437	425	395
	Population	456,140	143,117	139,558	133,672
	% Target population		100	98	93
	% district population	100	31	31	29
Overall	Localities		773	750	663
	Population	675,358	217,048	211,495	188,190
	% Target population		100	97	87
	% district population	100	32	31	28

Household Latrines		District	Targetted localities	Latrines before ASWA	ASWA Target	Total Latrines after ASWA	Latrines realised during ASWA
Bonthe	Households		10,826	931	4,322	5,043	4,112
	Population	219,218	73,931	7,724	38,671	42,110	34,286
	% ASWA population		100	10	52	57	46
	% district population	100	34	4	18	19	16
Falaba	Households		5,693	1,743	4,114	5,675	3,932
	Population		64,866	21,506	46,169	66,573	45,067
	% Target population		100	33	71	103	69
Koinadugu	Households		8,721	2,815	6,047	8,599	5,784
	Population		78,251	27,763	51,825	77,265	49,502
	% Target population		100	35	66	99	63
Falaba & Koinadugu	Households		14,414	4,558	10,161	14,274	9,716
	Population	456,140	143,117	49,269	97,994	143,838	94,569
	% Target population		100	34	68	101	66
	% districts population	100	31	11	21	32	21
Overall	Households		25,240	5,489	14,483	19,317	13,828
	Population	675,358	217,048	56,993	136,665	185,948	128,855
	% Target population		100	26	63	86	59
	% districts population	100	32	8	20	28	19

Appendix 8 Household Survey Results – ASWA target Communities

Analysis of household questionnaire data - Water Supply

1. Comparison of Baseline and End line water service levels

Bonthe	Baseline (SDG 2016)		End line (2020)	
	%	n	%	n
Safely Managed	1.2	7	0	0
Basic Service	16.6	99	51.5	211
Limited	1.2	7	1.5	6
Unimproved	26.1	155	35.4	145
No service	55.0	327	11.7	48
Total	100.0	595	100.0	410

Falaba/ Koinadugu	Baseline (SDG 2016)		Edline (2020)	
	%	n	%	n
(Using "Old" Koinadugu baseline)				
Safely Managed	0.5	3	8.2	18
Basic Service	42.2	244	55.7	122
Limited	7.8	45	0.9	2
Unimproved	27.7	160	17.4	38
No service	21.8	126	17.8	39
Total	100.0	578	100.0	219

Overall ASWA	Baseline (SDG 2016)		end line (2020)	
	%	n	%	n
Safely Managed	0.9	10	2.9	18
Basic Service	29.2	343	52.9	333
Limited	4.4	52	1.3	8
Unimproved	26.9	315	29.0	183
No service	38.6	453	13.8	87
Total	100.0	1173	100.0	629

2. Source of drinking water

Bonthe - 2016 baseline		
What is the main source of drinking water for your household?		
Response	Frequency	%
Piped into dwelling	1	0.2
Piped into compound- yard		
Piped to neighbour	6	1.0
Public tap / standpipe	8	1.3
Protected spring		
Tube Well- Borehole	12	2.0
Protected well	79	13.3
Rainwater collection	6	1.0
Tanker-truck		
Unprotected spring	38	6.4
Unprotected well	111	18.7
Cart with small tank*	6	1.0
Surface water*	327	55.1
Other		
Total	594	100.0

Koinadugu - 2016 baseline		
What is the main source of drinking water for your household?		
Response	Frequency	%
Piped into dwelling		
Piped into compound*	2	0.3
Piped to neighbour	30	5.2
Public tap / standpipe	39	6.7
Protected spring	1	0.2
Tube Well- Borehole	5	0.9
Protected well	216	37.2
Rainwater collection	1	0.2
Tanker-truck		
Unprotected spring	3	0.5
Unprotected well	63	10.9
Cart with small tank*	93	16.0
Surface water*	126	21.7
Other	1	0.2
Total	580	100.0

Bonthe - 2020 UNICEF ASWA		
What is the main source of drinking water for your household?		
Response	Frequency	%
Piped into dwelling		
Piped into compound- yard or plot		
Piped to neighbour		
Public tap / standpipe	142	34.6
Tube Well-Borehole	9	2.2
Protected spring	1	0.2
Protected well	65	15.9
Tanker truck/ water bowser		
Unprotected spring	117	28.5
Unprotected well	28	6.8
Surface water	48	11.7
Total	410	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA		
What is the main source of drinking water for your household?		
Response	Frequency	%
Piped water into dwelling	4	1.8
Piped water into yard / compound		
Piped to neighbour		
Public tap / standpipe	41	18.7
Tube Well-Borehole	27	12.3
Protected spring		
Protected dug well	70	32.0
Tanker truck/water bowser		
Unprotected spring	37	16.9
Unprotected (or open) well	1	0.5
Surface water/river/stream	39	17.8
Total	219	100.0

3. Water Availability

<u>Bonthe - 2016 baseline</u>		
Water availability		
Description	No.	%
At least 12 hours a day	327	55.1
Daily less than 12hrs	124	20.9
Three - Five days a week	14	2.4
One - two days a week	13	2.2
Less frequent than once a week	116	19.5
Total	594	100.0

<u>Koinadugu - 2016 baseline</u>		
Water availability		
Description	No.	%
At least 12 hours a day	340	58.6
Daily less than 12hrs	205	35.3
Three - Five days a week	26	4.5
One - two days a week	3	0.5
Less frequent than once a week	6	1.0
Total	580	100.0

<u>Bonthe - 2020 UNICEF ASWA</u>		
Water availability		
Description	No.	%
At least 12 hours a day	156	39.7
Daily less than 12hrs	187	47.6
Three - Five days a week	30	7.6
One - two days a week	11	2.8
Less frequent than once a week	9	2.3
Total	393	100.0
Blanks	17	
Total (incl. blanks)	410	

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Water availability		
Description	No.	%
At least 12 hours a day	125	62.5
Daily less than 12hrs	71	35.5
Three - Five days a week	2	1.0
One - two days a week	1	0.5
Less frequent than once a week	1	0.5
Total	200	100.0
Blanks	19	
Total (incl. blanks)	219	

4. Time taken for water collection

<u>Bonthe - 2016 baseline</u>		
Time range for water collection (mins)		
Response (mins)	Frequency	%
>0	<=10	244 44.8
>10	<=20	155 28.4
>20	<=30	82 15.0
>30	<=40	13 2.4
>40	<=50	9 1.7
>50	<=60	20 3.7
>60		22 4.0
Total		545 100.0
Total <=30 mins	481	88.3

<u>Koinadugu - 2016 baseline</u>		
Time range for water collection (mins)		
Response (mins)	Frequency	%
>0	<=10	180 33.1
>10	<=20	117 21.5
>20	<=30	98 18.0
>30	<=40	45 8.3
>40	<=50	32 5.9
>50	<=60	48 8.8
>60		23 4.2
Total		543 100.0
Total <=30 mins	395	72.7

<u>Bonthe - 2020 UNICEF ASWA</u>		
Time range for water collection (mins)		
Response (mins)	Frequency	%
>0	<=10	264 55.1
>10	<=20	103 21.5
>20	<=30	49 10.2
>30	<=40	23 4.8
>40	<=50	19 4.0
>50	<=60	8 1.7
>60		13 2.7
Total		479 100.0
Total <=30 mins	416	86.8

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Time range for water collection (mins)		
Response (mins)	Frequency	%
>0	<=10	132 66.0
>10	<=20	22 11.0
>20	<=30	16 8.0
>30	<=40	8 4.0
>40	<=50	7 3.5
>50	<=60	10 5.0
>60		5 2.5
Total		200 100.0
Total <=30 mins	170	85.0

Average time taken to collect water.

District	2016 baseline	2020 end line	Change
Bonthe	20.9 mins (n=545/596)	15.7 mins (n=387/410)	-24.9%
Koinadugu (incl. Falaba)	25.2 mins (n=542/582)	14.8 mins (n=198/219)	-41.3%
Overall	23.0 mins (n=1,087/1,178)	15.3 mins (n=585/629)	-33.5%

5. Water collection by age and gender (age and gender of water collector data not asked by 2016 baseline survey)

<u>Bonthe - 2020 UNICEF ASWA</u>									
Age and Gender Analysis of Persons Collecting Water									
	>5 <=11	>11<=14	>14 <=17	>17 <=30	>30 <=50	>50 <=60	>60	Total	%
Total	24	49	53	180	70	8	5	389	100.0
Female	12	27	32	136	69	8	5	289	74.3
Male	12	22	21	44	1			100	25.7
Ratio (F/M)	1.0	1.2	1.5	3.1	69.0			2.9	2.9
Total (<17)			126						
%			32.4						

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>									
Age and Gender Analysis of Persons Collecting Water									
	>5 <=11	>11<=14	>14 <=17	>17 <=30	>30 <=50	>50 <=60	>60	Total	%
Total	12	24	29	96	27	1	2	191	100.0
Female	8	19	21	73	25		2	148	77.5
Male	4	5	8	23	2	1		43	22.5
Ratio (F/M)	2.0	3.8	2.6	3.2	12.5			3.4	3.4
Total (<17)			65						
%			34.0						

6. Problems with Water Supply

Bonthe - 2016 baseline		
Problems with Water Supply		
Description	No.	%
No problems	41	6.9
Problems mentioned	552	92.9
Blanks	1	0.1
Total	594	99.9

Bonthe - 2016 baseline		
Analysis of Water Supply Problems		
Description of problem	Frequency	%
Water quality	409	24.9
Time spent collecting water	246	15.0
Accessibility	264	16.0
Reliability	291	17.7
Adequate quantity	159	9.7
Affordability	130	7.9
Management burden	146	8.9
Total	1,645	100.0

Bonthe - 2020 UNICEF ASWA		
Problems with Water Supply		
Description	No.	%
No problems	68	16.6
Problems mentioned	342	83.4
Total	410	100.0

Bonthe - 2020 UNICEF ASWA		
Analysis of Water Supply Problems		
Description of problem	Frequency	%
Water quality	287	28.1
Time spent collecting water	207	20.3
Accessibility	156	15.3
Reliability	141	13.8
Adequate quantity	88	8.6
Affordability	77	7.5
Management burden	65	6.4
Total	1,021	100.0

Koinadugu - 2016 baseline		
Problems with Water Supply		
Description	No.	%
No problems	37	6.4
Problems mentioned	543	93.6
Blanks		
Total	580	100.0

Koinadugu - 2016 baseline		
Analysis of Water Supply Problems		
Description of problem	Frequency	%
Water quality	463	28.4
Time spent collecting water	311	19.1
Accessibility	227	13.9
Reliability	270	16.6
Adequate quantity	220	13.5
Affordability	122	7.5
Management burden	18	1.1
Total	1,631	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA		
Problems with Water Supply		
Description	No.	%
No problems	28	12.8
Problems mentioned	191	87.2
Total	219	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA		
Analysis of Water Supply Problems		
Description of problem	Frequency	%
Water quality	111	24.3
Time spent collecting water	67	14.7
Accessibility	83	18.2
Reliability	99	21.7
Adequate quantity	78	17.1
Affordability	8	1.8
Management burden	10	2.2
Total	456	100.0

5.1. Recent interruptions in water supply and duration (2016 baseline)

Bonthe - 2016 baseline			
Recent Interruptions to WS			
Did your household experience interruptions in the drinking water supply from the main source during the last two weeks?			
Response	Frequency	%	
Yes	86	14.5	
No	447	75.3	
Don't know	61	10.3	
Total	594	100.0	
Bonthe - 2016 baseline			
If there was an interruption in supply within the last two weeks, how many days did it last?			
Days	Frequency	%	Cumul. %
0			
1	9	10.5	10.5
2	9	10.5	20.9
3	9	10.5	31.4
4	2	2.3	33.7
5	5	5.8	39.5
6	1	1.2	40.7
10	2	2.3	43.0
14	1	1.2	44.2
30	2	2.3	46.5
60	2	2.3	48.8
72	1	1.2	50.0
90	34	39.5	89.5
120	9	10.5	100.0
Total	86	100.0	
Average (days)		52.5	

Koinadugu - 2016 baseline			
Recent Interruptions to WS			
Did your household experience interruptions in the drinking water supply from the main source during the last two weeks?			
Response	Frequency	%	
Yes	67	11.6	
No	511	88.1	
Don't know	2	0.3	
Total	580	100.0	
Koinadugu - 2016 baseline			
If there was an interruption in supply within the last two weeks, how many days did it last?			
Days	Frequency	%	Cumul. %
0			
1	31	46.3	46.3
2	10	14.9	61.2
3	4	6.0	67.2
4	1	1.5	68.7
5	2	3.0	71.6
6	1	1.5	73.1
7	1	1.5	74.6
8	2	3.0	77.6
10	1	1.5	79.1
12	1	1.5	80.6
14	1	1.5	82.1
15	1	1.5	83.6
30	5	7.5	91.0
60	3	4.5	95.5
70	1	1.5	97.0
120	1	1.5	98.5
200	1	1.5	100.0
Total	67	100.0	
Average (days)		13.1	

5.2. Recent interruptions in water supply and duration (2020 UNICEF-ASWA)

Bonthe - 2020 UNICEF ASWA		
Recent Interruptions to WS		
Did your household experience interruptions in the drinking water supply from the main source during the last two weeks?		
Response	Frequency	%
Yes	22	10.6
No	182	87.9
Don't know	3	1.4
Total	207	100.0
Blanks	203	
Total (incl. blanks)	410	

Bonthe - 2020 UNICEF ASWA	
If there was an interruption in supply within the last two weeks, how many days did it last?	
Days	Frequency
0	2
1	4
2	5
3	2
4	3
5	1
8	1
30	2
Total	20
Average (days)	5.3
Cumul. %	
0	10.0
1	30.0
2	55.0
3	65.0
4	80.0
5	85.0
8	90.0

The tables in 5.1 and 5.2 show marked reductions in the time taken for interruptions in supply to be resolved.

For Bonthe the average time taken reduces from 52.5 days to 5.3 days and the time taken for 90% of cases of interruption of supply to be resolved from 90 days to 8 days.

For Koinadugu and Falaba the average time taken reduces from 13.1 days to 4.1 days and the time taken for 90% of cases of interruption of supply to be resolved from 30 days to 3.8 days.

Falaba & Koinadugu - 2020 UNICEF ASWA		
Recent Interruptions to WS		
Did your household experience interruptions in the drinking water supply from the main source during the last two weeks?		
Response	Frequency	%
Yes	20	24.1
No	59	71.1
Don't know	4	4.8
Total	83	100.0
Blanks	136	
Total (incl. blanks)	219	

Falaba & Koinadugu - 2020 UNICEF ASWA	
If interruption in supply within the last two weeks, how many days did it last?	
Days	Frequency
0	2
1	2
2	5
3	1
4	1
30	1
Total	12
Average (days)	4.1
Cumul. %	
0	16.7
1	33.3
2	75.0
3	83.3
4	91.7
30	8.3

6. Reason for breakdown

Bonthe - 2016 baseline		
Reason for breakdown		
If WS interrupted in last two weeks what was the reason?		
Response	Frequency	%
Dry due to seasonality	53	61.6
Interruption in water supply	20	23.3
Water point damaged or broken	2	2.3
Other	11	12.8
Total	86	100.0

Koinadugu - 2016 baseline		
Reason for breakdown		
If WS interrupted in last two weeks what was the reason?		
Response	Frequency	%
Dry due to seasonality	34	51.5
Interruption in water supply	19	28.8
Water point damaged or broken	8	12.1
Other	4	6.1
Don't know	1	1.5
Total	66	100.0
Blanks	523	
Total (incl. blanks)	589	

Bonthe - 2020 UNICEF ASWA		
Reason for breakdown		
If WS interrupted in last two weeks what was the reason?		
Response	Frequency	%
Dry due to seasonality	19	57.6
Interruption in water supply	5	15.2
Water point damaged or broken	7	21.2
Don't know	2	6.1
Total	33	100.0
Blanks	248	
Total (incl. blanks)	281	

Falaba & Koinadugu - 2020 UNICEF ASWA		
Reason for breakdown		
If WS interrupted in last two weeks what was the reason?		
Response	Frequency	%
Dry due to seasonality	22	59.5
Interruption in water supply	11	29.7
Water point damaged or broken	4	10.8
Don't know		
Total	37	100.0
Blanks	234	
Total (incl. blanks)	271	

Bonthe - 2020 UNICEF ASWA		
Reason for breakdown		
If WS interrupted in last two weeks what was the reason?		
Response	Frequency	%
Dry due to seasonality	10	45.5
Interruption in water supply	4	18.2
Water point damaged or broken	7	31.8
Don't know	1	4.5
Total	22	100.0
Blanks	203	
Total (incl. blanks)	225	

Falaba & Koinadugu - 2020 UNICEF ASWA		
Reason for breakdown		
If WS interrupted in last two weeks what was the reason?		
Response	Frequency	%
Dry due to seasonality	11	55.0
Interruption in water supply	6	30.0
Water point damaged or broken	3	15.0
Don't know		
Total	20	100.0
Blanks	136	
Total (incl. blanks)	156	

Seasonality has remained the main cause of water supply failure over the period 2016 to 2020.

7. Payment for water services

<u>Bonthe - 2016 baseline</u>		
Payment for water services		
	No.	%
Yes, payment made	9	1.5
No payment made	585	96.0
Total	594	97.5

<u>Koinadugu - 2016 baseline</u>		
Payment for water services		
	No.	%
Yes, payment made	46	7.9
No payment made	534	92.1
Total	580	100.0

<u>Bonthe - 2016 baseline</u>		
Monthly payment for water services		
If yes, how much do you pay per month? (Leones)?		
Amount (SLL)	Frequency	%
500		
1,000	2	28.6
2,000	2	28.6
4,000		
5,000	3	42.9
6,000		
Total	7	100.0
Average monthly payment for water services	SLL	
		3,000

<u>Koinadugu - 2016 baseline</u>		
Monthly payment for water services		
If yes, how much do you pay per month? (Leones)?		
Amount (SLL)	Frequency	%
500	5	11.1
1,000	11	24.4
2,000	15	33.3
4,000	9	20.0
5,000	4	8.9
6,000	1	2.2
Total	45	100.0
Average monthly payment for water services	SLL	
		2,344

<u>Bonthe - 2020 UNICEF ASWA</u>		
Payment for water services		
	No.	%
Yes, payment made	17	4.1
No payment made	393	95.9
Total	410	100.0
Amount of payment		
Too few positive responses and 15/17 positive responses from one locality		

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Payment for water services		
	No.	%
Yes, payment made	10	4.6
No payment made	209	95.4
Total	219	100.0
Amount of payment		
Too few positive responses		

The proportion of water users making no payment for the service is consistently over 90% and there has been no significant change between 2016 and 2020.

8.1. Amount willing to pay for water services (2016 baseline)

<u>Bonthe - 2016 baseline</u>		
If no payment, how much willing to pay?		
Amount (SLL)	Frequency	%
0	11	2.2
100	4	0.8
200	2	0.4
300		
400		
500	26	5.2
1,000	204	40.5
1,200		
1,500	6	1.2
2,000	138	27.4
2,500		
3,000	15	3.0
3,500		
4,000	3	0.6
6,000		
7,000		
10,000	59	11.7
15,000	2	0.4
20,000	26	5.2
25,000		
30,000		
50,000	8	1.6
Total	504	100.0
Willing to pay	493	97.8
Average amount for those willing to pay	SLL	
	4,166	

<u>Koinadugu - 2016 baseline</u>		
If no payment, how much willing to pay?		
Amount (SLL)	Frequency	%
0	41	7.1
100	3	0.5
200	7	1.2
300	2	0.3
400	1	0.2
500	63	10.9
600	2	0.3
800	1	0.2
1,000	148	25.5
1,200	4	0.7
1,500	23	4.0
2,000	139	24.0
2,500	5	0.9
3,000	14	2.4
3,500	2	0.3
4,000	4	0.7
5,000	70	12.1
6,000	2	0.3
7,000	1	0.2
10,000	29	5.0
15,000	2	0.3
20,000	7	1.2
25,000	2	0.3
30,000	3	0.5
50,000	5	0.9
Total	580	100.0
Willing to pay	539	92.9
Average amount for those willing to pay	SLL	
	3,100	

8.2. Amount willing to pay for water services (2020 end line)

Bonthe - 2020 UNICEF ASWA		
If no payment, how much willing to pay?		
Amount (SLL)	Frequency	%
0	265	67.4
500	3	0.8
1,000	26	6.6
1,500		
2,000	49	12.5
2,500		
3,000	5	1.3
3,500		
4,000	4	1.0
5,000	38	9.7
6,000		
7,000		
8,000		
9,000		
10,000	1	0.3
12,000		
14,000		
15,000		
20,000		
25,000		
30,000	2	0.5
50,000		
60,000		
100,000		
600,000		
Total	393	100.0
Willing to pay	128	32.6
Average amount for those willing to pay	SLL	
		3,254

Falaba & Koinadugu - 2020 UNICEF ASWA		
If no payment, how much willing to pay?		
Amount (SLL)	Frequency	%
0	86	41.3
500	1	0.5
1,000	17	8.2
1,500		
2,000	35	16.8
2,500	2	1.0
3,000	14	6.7
3,500	1	0.5
4,000	3	1.4
5,000	23	11.1
6,000	6	2.9
7,000	1	0.5
8,000		
9,000	2	1.0
10,000	5	2.4
12,000	1	0.5
14,000		
15,000	1	0.5
20,000	4	1.9
25,000	1	0.5
30,000		
50,000	2	1.0
60,000	1	0.5
100,000	1	0.5
600,000	1	0.5
Total	208	100.0
Willing to pay	122	58.7
Average amount for those willing to pay	SLL	
		11,213

Although over 90% of water users say they make no contribution to the service they receive, when asked how much they would be willing to pay the situation is different. The proportion of water users who said they would be willing to pay in 2016 was greater than 90% but this decreased very markedly in 2020 to 33% for Bonthe and 59% for Falaba and Koinadugu.

The amount which households would be willing to pay monthly (excluding those unwilling or unable to pay) was between 3,100 and 4,166 Leones, except for the 2020 survey in Falaba and Koinadugu where the amount was 11,213 Leones. This higher amount is due to a few households for which the

amount they would be willing to pay was very high. To reduce the effect of these outliers the median amount was calculated which was 2,000 Leones.

9. Willingness to contribute to water supply improvements

<u>Bonthe - 2016 baseline</u>		
Willingness to Contribute to WS Improvements		
Description	Frequency	%
Yes, willing to contribute financially	528	88.9
No, not willing to contribute financially	66	11.1
Total	594	100.0

<u>Koinadugu - 2016 baseline</u>		
Willingness to Contribute to WS Improvements		
Description	Frequency	%
Yes, willing to contribute financially	529	91.2
No, not willing to contribute financially	51	8.8
Total	580	100.0

<u>Bonthe - 2020 UNICEF ASWA</u>		
Willingness to Contribute to WS Improvements		
Description	Frequency	%
Yes, willing to contribute	257	62.7
No, not willing to contribute	153	37.3
Total	410	100.0

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Willingness to Contribute to WS Improvements		
Description	Frequency	%
Yes, willing to contribute	188	85.8
No, not willing to contribute	31	14.2
Total	219	100.0

There was a high willingness to contribute financially to water supply improvements (85.8 – 91.2%) except for Bonthe 2020 where this had fallen to 62.7% from 88.9% in 2016.

10. Types of WS improvements wanted

Bonthe - 2016 baseline		
Types of WS Improvements		
What improvements would you like to make?		
Description	Frequency	%
Improve water quality	443	54.9
Water source well protected	366	45.4
Source provides water reliably	348	43.1
Provide protected water point	84	10.4
Provide HP for existing HDW	5	0.6
Maintenance	3	0.4
Provide more water points	1	0.1
Improve existing piped WS		
Improve existing water point		
Provide piped WS		
HH connections		
Chlorinate the well		
Total	807	100.0

Koinadugu - 2016 baseline		
Types of WS Improvements		
What improvements would you like to make?		
Description	Frequency	%
Water source well protected	490	34.4
Improve water quality	477	33.5
Source provides water reliably	367	25.7
Provide protected water point	42	2.9
Maintenance	14	1.0
Provide HP for existing HDW	11	0.8
Improve existing piped WS	7	0.5
Improve existing water point	5	0.4
Provide more water points	5	0.4
Provide piped WS	4	0.3
HH connections	3	0.2
Chlorinate the well	1	0.1
Total	1,426	100.0

Bonthe - 2020 UNICEF ASWA		
Types of WS Improvements		
Description	Frequency	%
Improve water quality	196	47.8
Source provides water reliably	130	31.7
Water source well protected	84	20.5
Total	410	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA		
Types of WS Improvements		
Description	Frequency	%
Source provides water reliably	93	42.5
Water source well protected	76	34.7
Improve water quality	50	22.8
Total	219	100.0

In both the 2016 and 2020 surveys the water supply improvement given the highest priority in Bonthe was improved water quality while in Falaba and Koinadugu the preferred improvement indicated in the 2016 survey was water source protection, but this had changed to water system reliability in 2020. The priority given to source reliability also increased in Bonthe, from third to second place.

11. Perceptions about WS management

<u>Bonthe - 2016 baseline</u>		
Perceptions about WS Management		

Is there a wash management committee in the community that manages and maintains the water facilities?

Response	Frequency	%
Yes	95	16.0
No	401	67.5
Don't know	98	16.5
Total	594	100.0

<u>Bonthe - 2016 baseline</u>		
If operation and maintenance is by a community group, is the group functioning		

Response	Frequency	%
Yes	64	67.4
No	31	32.6
Don't know		
Total	95	100.0

<u>Bonthe - 2020 UNICEF ASWA</u>		
Perceptions about WS Management		

Who is Managing WS	Frequency	%
No-one	136	33.2
Don't know	113	27.6
WASH/Water Committee	104	25.4
Community	29	7.1
Community Leaders	19	4.6
Other	9	2.2
Total	410	100.0

<u>Bonthe - 2020 UNICEF ASWA</u>		
Investigating community maintenance		

Question	Yes	No	Don't know
Are you or any member of your household a member of this committee?	48	56	
Do you or any member of your household contribute financially to the savings of the committee for its role in water management?	36	12	
Water Supply/If operation and maintenance is by a community group, is the group functioning?	3	118	128

<u>Koinadugu - 2016 baseline</u>		
Perceptions about WS Management		

Is there a wash management committee in the community that manages and maintains the water facilities?

Response	Frequency	%
Yes	233	40.2
No	304	52.4
Don't know	43	7.4
Total	580	100.0

<u>Koinadugu - 2016 baseline</u>		
If operation and maintenance is by a community group, is the group functioning		

Response	Frequency	%
Yes	231	99.1
No	1	0.4
Don't know	1	0.4
Total	233	100.0

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Perceptions about WS Management		

Who is Managing WS	Frequency	%
No-one	32	14.6
Don't know	14	6.4
WASH/Water Committee	31	14.2
Community	30	13.7
Community Leaders	108	49.3
Other	4	1.8
Total	219	100.0

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Investigating community maintenance		

Question	Yes	No	Don't know
Are you or any member of your household a member of this committee?	14	17	
Do you or any member of your household contribute financially to the savings of the committee for its role in water management?	14		
Water Supply/If operation and maintenance is by a community group, is the group functioning?	1	26	19

12. Productive use of water

<u>Bonthe - 2016 baseline</u>		
Productive use of water		
Do you use water for any productive or commercial purposes?		
Response	Frequency	%
Yes	86	14.5
No	508	85.5
Total	594	100.0
<u>Bonthe - 2016 baseline</u>		
If yes, which of the following are you engaged in?		
Description	Frequency	%
Irrigation of garden/farm	81	85.3
Animal/poultry rearing	10	10.5
Sale of water to the public	1	1.1
Palm oil processing	1	1.1
Car/bike/vehicle washing	1	1.1
Laundering clothes	1	1.1
Total	95	100.0

<u>Koinadugu - 2016 baseline</u>		
Productive use of water		
Do you use water for any productive or commercial purposes?		
Response	Frequency	%
Yes	3	0.5
No	576	99.5
Total	579	100.0
<u>Koinadugu - 2016 baseline</u>		
If yes, which of the following are you engaged in?		
Description	Frequency	
Sale of water to the public		3

<u>Bonthe - 2020 UNISEF ASWA</u>		
Productive use of water		
Do you use water for any productive or commercial purposes?		
Response	Frequency	%
Yes	70	27.2
No	187	72.8
Total	257	100.0
<u>Bonthe - 2020 UNISEF ASWA</u>		
If yes, which of the following are you engaged		
Description	Frequency	%
Animal/poultry rearing	6	8.6
Car/bike/vehicle washing	1	1.4
Irrigation of garden/farm	62	88.6
Sale of water to the public	1	1.4
Total	70	100

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Productive use of water		
Do you use water for any productive or commercial purposes?		
Response	Frequency	%
Yes		4 1.8
No		215 98.2
Total	219	100.0
<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
If yes, which of the following are you engaged		
Description	Frequency	%
Animal/poultry rearing		
Car/bike/vehicle washing		
Irrigation of garden/farm	4	100.0
Sale of water to the public		
Total	4	100

13.1. Seasonality of main source of drinking water (2016 baseline)

Bonthe - 2016 baseline		
Are there some months where your household cannot use the main source of drinking water?		
Response	Frequency	%
Yes	254	42.8
No	241	40.6
Don't know	99	16.7
Total	594	100.0

Bonthe - 2016 baseline		
If so, which months?		
Response	Frequency	%
January	26	3.8
February	75	11.0
March	236	34.6
April	222	32.6
May	115	16.9
June	2	0.3
July		
August		
September		
October		
November	3	0.4
December	3	0.4
Total months without water	682	100.0

Bonthe - 2016 baseline		
For how many months does the main source of drinking water not provide water?		
Response (months)	Frequency	%
1	24	9.4
2	76	29.9
3	118	46.5
4	30	11.8
5	4	1.6
6	2	0.8
Total	254	100.0

Koinadugu - 2016 baseline		
Are there some months where your household cannot use the main source of drinking water?		
Response	Frequency	%
Yes	406	70.0
No	170	29.3
Don't know	4	0.7
Total	580	100.0

Koinadugu - 2016 baseline		
If so, which months?		
Response	Frequency	%
January	7	0.7
February	125	12.4
March	398	39.5
April	334	33.2
May	101	10.0
June	8	0.8
July	12	1.2
August	11	1.1
September	6	0.6
October	2	0.2
November		
December	3	0.3
Total months without water	1007	100.0

Koinadugu - 2016 baseline		
For how many months does the main source of drinking water not provide water?		
Response (months)	Frequency	%
1	44	10.8
2	167	41.1
3	162	39.9
4	25	6.2
5	5	1.2
6	3	0.7
Total	406	100.0

13.2. Seasonality of main source of drinking water (2020 end line)

Bonthe - 2020 UNICEF ASWA		
Are there some months where your household cannot use the main source of drinking water?		
Response	Frequency	%
Yes	291	71.0
No	112	27.3
Don't know	7	1.7
Total	410	100.0

Bonthe - 2020 UNICEF ASWA		
If so, which months?		
Response	Frequency	%
January	52	6.2
February	88	10.5
March	275	32.8
April	239	28.5
May	105	12.5
June	9	1.1
July	1	0.1
August		
September		
October	7	0.8
November	21	2.5
December	42	5.0
Total months without water	839	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA		
Are there some months where your household cannot use the main source of drinking water?		
Response	Frequency	%
Yes	131	59.8
No	88	40.2
Don't know		
Total	219	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA		
If so, which months?		
Response	Frequency	%
January	34	10.0
February	70	20.6
March	122	36.0
April	73	21.5
May	25	7.4
June	4	1.2
July	1	0.3
August		
September		
October		
November	2	0.6
December	8	2.4
Total months without water	339	100.0

Bonthe - 2020 UNICEF ASWA		
For how many months does the main source of drinking water not provide water?		
Response (months)	Frequency	%
1	20	6.8
2	112	38.4
3	101	34.6
4	21	7.2
5	18	6.2
6	15	5.1
7	5	1.7
Total	292	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA		
For how many months does the main source of drinking water not provide water?		
Response (months)	Frequency	%
1	30	22.9
2	39	29.8
3	28	21.4
4	25	19.1
5	7	5.3
6	2	1.5
7		
Total	131	100.0

Respondents clearly recognise seasonality as a major problem and while the responses in 2016 and 2020 show an improvement (70% to 60% respectively) there was a clear increase in the response in Bonthe, from 43% to 71.0% reporting months when the main drinking water source was not available.

14.1. Alternative drinking water sources (2016 baseline)

<u>Bonthe - 2016 baseline</u>		
Response	Frequency	%
Piped into dwelling		
Piped into compound- yard or plot		
Piped to neighbour	1	0.4
Public tap / standpipe	4	1.6
Protected spring	1	0.4
Tube Well- Borehole	1	0.4
Protected well	23	9.1
Rainwater collection	8	3.2
Tanker-truck	3	1.2
Unprotected spring	21	8.3
Unprotected well	22	8.7
Cart with small tank*	8	3.2
Surface water*	132	52.2
Other	29	11.5
Total	253	100

<u>Bonthe - 2016 baseline</u>		
Response	Frequency	%
Safely managed		
Basic	24	9.8
Limited	10	4.1
Unimproved	51	20.8
No service	160	65.3
Total	245	100.0

<u>Koinadugu - 2016 baseline</u>		
Response	Frequency	%
Piped into dwelling		
Piped into compound*		
Piped to neighbour		
Public tap / standpipe	6	4.3
Protected spring	1	0.7
Tube Well- Borehole	2	1.4
Protected well	24	17.0
Rainwater collection	3	2.1
Tanker-truck		
Unprotected spring	15	10.6
Unprotected well	37	26.2
Cart with small tank		
Surface water		
Other	53	37.6
Total	141	100

<u>Koinadugu - 2016 baseline</u>		
Response	Frequency	%
Safely managed		
Basic	21	5.3
Limited	6	1.5
Unimproved	75	18.9
No service	295	74.3
Total	397	100.0

14.2. Alternative drinking water sources (2020 end line)

<u>Bonthe - 2020 UNICEF ASWA</u>		
Response	Frequency	%
Piped into dwelling		
Piped into compound	2	0.7
Piped to neighbour	1	0.3
Public tap / standpipe	12	4.1
Tube Well- Borehole	4	1.4
Protected spring	9	3.1
Protected well	25	8.6
Unprotected spring	128	44.0
Unprotected well	59	20.3
Surface water	51	17.5
Total	291	100.0

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Response	Frequency	%
Piped into dwelling		
Piped into compound- yard or plot		
Piped to neighbour	1	0.8
Public tap / standpipe	4	3.1
Tube Well- Borehole	34	26.0
Protected spring	2	1.5
Protected well	10	7.6
Unprotected spring	49	37.4
Unprotected well	16	12.2
Surface water	15	11.5
Total	131	100.0

<u>Bonthe - 2020 UNICEF ASWA</u>		
Response	Frequency	%
Safely managed	1	0.3
Basic	46	15.8
Limited	6	2.1
Unimproved	187	64.3
No service	51	17.5
Total	291	100.0

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>		
Response	Frequency	%
Safely managed		
Basic	34	26.0
Limited	17	13.0
Unimproved	65	49.6
No service	15	11.5
Total	131	100.0

15. Changes in SDG water supply service level with season

<u>Bonthe - 2016 baseline</u>				
What is the main source of drinking water for your household (by SDG category and by season).				
Response	Wet season		Dry season	
	Frequency	%	Frequency	%
Safely managed	1	0.2	1	0.2
Basic	98	19.8	63	12.7
Limited	7	1.4	14	2.8
Unimproved	120	24.2	98	19.8
No service	269	54.3	310	62.6
Insufficient data			9	1.8
Total	495	100.0	495	100.0

<u>Koinadugu - 2016 baseline</u>				
What is the main source of drinking water for your household (by SDG category and by season).				
Response	Wet season		Dry season	
	Frequency	%	Frequency	%
Safely managed				
Basic	249	42.9	73	12.6
Limited	45	7.8	14	2.4
Unimproved	160	27.6	143	24.7
No service	126	21.7	337	58.1
Total	580	100.0	580	97.8

<u>Bonthe - 2020 UNICEF ASWA</u>				
What is the main source of drinking water for your household (by SDG category and by season).				
Response	Wet season		Dry season	
	Frequency	%	Frequency	%
Safely managed				
Basic	211	51.5	103	25.1
Limited	6	1.5	8	2.0
Unimproved	145	35.4	236	57.6
No service	48	11.7	54	13.2
Don't know			9	2.2
Total	410	100.0	410	100.0

<u>Falaba & Koinadugu - 2020 UNICEF ASWA</u>				
What is the main source of drinking water for your household (by SDG category and by season).				
Response	Wet season		Dry season	
	Frequency	%	Frequency	%
Safely managed				
Basic	136	62.1	95	43.4
Limited	2	0.9	18	8.2
Unimproved	38	17.4	79	36.1
No service	39	17.8	26	11.9
Total	219	100.0	219	100.0

There has been a marked general increase in the SDG water supply service levels in the wet season between 2016 and 2020. In Bonthe the proportion of households having a safely managed or basic service has increased from 20.0% to 51.5%. In Falaba and Koinadugu this proportion has increased from 42.9% to 63.9%. The fall in the SDG service level during the dry season is still clear but in the 2016 survey these users mainly resorted to surface sources (no service), whereas in 2020 the increase as mainly in the use of unimproved sources, which are safer than surface sources.

Annex – Analysis of household questionnaire data – Sanitation

1. Type of toilet used by household

Bonthe - 2016 baseline			
What kind of toilet facility do members of your household usually use?			
Response	Facility type	Frequency	%
Flush to septic tank	Improved	1	0.2
Flush to Pit (latrine)	Improved	10	1.7
Ventilated Improved Pit latrine (VIP)	Improved	3	0.5
Pit latrine with slab	Improved	68	11.4
Composting toilet	Improved	3	0.5
Pit latrine without slab/ open pit	Unimproved	50	8.4
Hanging toilet- Hanging latrine	Unimproved	14	2.4
Other	Unimproved	1	0.2
No facility- Bush- Field	Open defecation	444	74.7
Total		594	100.0

Koinadugu - 2016 baseline			
What kind of toilet facility do members of your household usually use?			
Response	Facility type	Frequency	%
Flush to septic tank	Improved	4	0.7
Flush to Pit (latrine)	Improved	4	0.7
Ventilated Improved Pit latrine (VIP)	Improved	11	1.9
Pit latrine with slab	Improved	174	30.1
Composting toilet	Improved	1	0.2
Pit latrine without slab/ open pit	Unimproved	233	40.2
Hanging toilet- Hanging latrine	Unimproved		
Other	Unimproved	8	1.4
No facility- Bush- Field	Open defecation	144	24.9
Total		579	100.0

Bonthe - 2020 UNICEF ASWA			
What kind of toilet facility do members of your household usually use?			
Response	Facility type	Frequency	%
Flush to piped sewer	Improved	1	0.2
Flush to septic tank	Improved	3	0.7
Flush to Pit (latrine)	Improved	7	1.7
Ventilated Improved Pit latrine (VIP)	Improved	5	1.2
Pit latrine with slab	Improved	50	12.2
Composting toilet	Improved	18	4.4
Pit latrine without slab / open pit	Unimproved	144	35.1
Hanging toilet- Hanging latrine	Unimproved	24	5.9
Bucket	Unimproved	2	0.5
No facility- Bush- Field	Open defecation	156	38.0
Total		410	100.0

Falaba & Koinadugu - 2020 UNICEF ASWA			
What kind of toilet facility do members of your household usually use?			
Response	Facility type	Frequency	%
Flush to piped sewer system	Improved	1	0.5
Flush to septic tank	Improved	1	0.5
Flush to Pit (latrine)	Improved	1	0.5
Ventilated Improved Pit latrine (VIP)	Improved		
Pit latrine with slab	Improved	23	10.5
Composting toilet	Improved		
Pit latrine without slab / open pit	Unimproved	180	82.2
Hanging toilet- Hanging latrine	Unimproved	1	0.5
No facility- Bush- Field	Open defecation	12	5.5
Total		219	100

2. Type of toilet used by household by SDG service level

Bonthe - 2016 baseline						
Sanitation provision by SDG Service Levels						
Response	Facility type	In own compound	Shared with other HHs	Hand wash facility	Frequency	%
Safely Managed	Improved	Yes	No	Yes	17	3
Basic	Improved	Yes	No	No	20	3
Limited	Improved		Yes		46	8
Unimproved	Unimproved				65	11
No Service	Open defecation				444	75
Total					592	100

Koinadugu - 2016 baseline						
Sanitation provision by SDG Service Levels						
Response	Facility type	In own compound	Shared with other HHs	Hand wash facility	Frequency	%
Safely Managed	Improved	Yes	No	Yes	22	4
Basic	Improved	Yes	No	No	63	11
Limited	Improved		Yes		109	19
Unimproved	Unimproved				241	42
No Service	Open defecation				144	25
Total					579	100

Bonthe - 2020 UNICEF ASWA						
Sanitation provision by SDG Service Levels						
Response	Facility type	In own compound	Shared with other HHs	Hand wash facility	Frequency	%
Safely Managed	Improved	Yes	No	Yes	2	0.5
Basic	Improved	Yes	No	No	19	4.6
Limited	Improved		Yes		63	15.4
Unimproved	Unimproved				170	41.5
No Service	Open defecation				156	38.0
Total					410	100

Sanitation provision by SDG Service Levels						
Response	Facility type	In own compound	Shared with other HHs	Hand wash facility	Frequency	%
Safely Managed	Improved	Yes	No	Yes	1	0
Basic	Improved	Yes	No	No	11	5
Limited	Improved		Yes		14	6
Unimproved	Unimproved				181	83
No Service	Open defecation				12	5
Total					219	100

3. Access to toilet facilities

Bonthe - 2016 baseline											
Access to Toilet Facilities											
Toilet type	Facility used by entire HH		Facility in own compound			Facility shared w/ other HHs		Disposal of children's faeces			
	Yes	No	Yes	No	%	Yes	No	%	Safe	Unsafe	% unsafe
Flush to septic tank	1		1		100		1	1	1		
Flush to Pit (latrine)	10		8	2	80	2	8	20	9	1	10
Ventilated Improved Pit latrine (VIP)	3		3		100		3		3		
Pit latrine with slab	68		52	16	76	41	27	60	63	5	7
Composting toilet	3		2	1	67	3		100	2	1	33
Pit latrine without slab / open pit	50		36	14	72	37	13	74	42	8	16
Hanging toilet- Hanging latrine	14		11	3	79	9	5	64	11	2	15
No facility- Bush- Field									119	182	60
Total	149		113	36		92	57		250	199	
Overall %					76			62			44

Koinadugu - 2016 baseline											
Access to Toilet Facilities											
Toilet type	Facility used by entire HH		Facility in own compound			Facility shared w/ other HHs		Disposal of children's faeces			
	Yes	No	Yes	No	%	Yes	No	%	Safe	Unsafe	% unsafe
Flush to septic tank	4		4		100	1	3	25	3	1	25
Flush to Pit (latrine)	4		4		100	1	3	25	3	1	25
Ventilated Improved Pit latrine (VIP)	11		11		100	5	6	45	11		
Pit latrine with slab	173	1	158	16	91	101	73	58	162	12	7
Composting toilet	1		1		100	1		100	1		
Pit latrine without slab / open pit	233		210	23	90	178	55	76	201	32	14
Hanging toilet- Hanging latrine											
Other									5	3	38
No facility- Bush- Field									12	132	92
Total	185	1	380	39		285	134		392	179	
Overall %					91			68			31

Bonthe - 2020 UNICEF ASWA											
Access to Toilet Facilities											
Toilet type	Facility used by entire HH		Facility in own compound			Facility shared w/ other HHs		Disposal of children's faeces			
	Yes	No	Yes	No	%	Yes	No	%	Safe	Unsafe	% unsafe
Flush to piped sewer system	1		1					1			
Flush to septic tank	3		2	1	67	2	1	67			
Flush to Pit (latrine)	7		7		100	7		100			
Ventilated Improved Pit latrine (VIP)	5			5		5		100			
Pit latrine with slab	47	3	43	7	86	39	11	78	3		0
Composting toilet	18		13	5	72	10	8	56			
Pit latrine without slab / open pit	126	18	100	43	70	70	73	49	14	4	22
Hanging toilet- Hanging latrine	23	1	11	13		13	10		1		0
No facility- Bush- Field									5	1	17
Total	230	22	177	74		146	104		23	5	
Overall %					71			58			18

Falaba & Koinadugu - 2020 UNICEF ASWA											
Access to Toilet Facilities											
Toilet type	Facility used by entire HH		Facility in own compound			Facility shared w/ other HHs		Disposal of children's faeces			
	Yes	No	Yes	No	%	Yes	No	%	Safe	Unsafe	% unsafe
Flush to piped sewer system	1		1					1			
Flush to septic tank	1		1		100		1		1		
Flush to Pit (latrine)	1		1		100	1		100			
Ventilated Improved Pit latrine (VIP)											
Pit latrine with slab	23		23		100	13	10	57			
Composting toilet											
Pit latrine without slab / open pit	179	1	171	8	96	54	125	30			
Hanging toilet- Hanging latrine	1		1			1					
No facility- Bush- Field											
Total	25		25			14	11				
Overall %					100			56			
Disposal of children's faeces - unsufficient data											

4. Visible condition of toilet

<u>Bonthe - 2016 baseline</u>				
Visible Condition of Toilet				
Toilet type	No. of toilet	Good	Not good	% good
Flush to septic tank	1	1		100
Flush to Pit (latrine)	10	8	2	80
Ventilated Improved Pit latrine (VIP)	3	3		100
Pit latrine with slab	68	31	37	46
Composting toilet	3		3	
Pit latrine without slab / open pit	50	5	45	10
Hanging toilet- Hanging latrine	14	1	13	7
Other	1		1	
Total	150	49	101	49

<u>Koinadugu - 2016 baseline</u>				
Visible Condition of Toilet				
Toilet type	No. of toilets	Good	Bad	% good
Flush to septic tank	4	4		100
Flush to Pit (latrine)	4	3	1	75
Ventilated Improved Pit latrine (VIP)	11	4	7	36
Pit latrine with slab	174	58	116	33
Composting toilet	1		1	
Pit latrine without slab / open pit	233	11	222	5
Hanging toilet- Hanging latrine				
Other	8		8	
Total	435	80	355	
Overall %				

<u>Bonthe - 2020 UNICEF ASWA</u>				
Visible Condition of Toilet				
Toilet type	No. of toilets	Good	Total responses	% good
Flush to piped sewer system	1	1	1	100
Flush to septic tank	3	3	3	100
Flush to Pit (latrine)	7	2	7	29
Ventilated Improved Pit latrine (VIP)	5	2	3	67
Pit latrine with slab	50	23	48	48
Composting toilet	18	1	18	6
Pit latrine without slab / open pit	144	45	131	34
Hanging toilet- Hanging latrine	24	4	19	21
Total	259	79	237	
Overall %				33

Visible Condition of Toilet					
Toilet type	No. of toilets	Good	Total responses	% good	
Flush to piped sewer system	1	1	1	100	
Flush to septic tank	1	1	1	100	
Flush to Pit (latrine)	1	1	1	100	
Ventilated Improved Pit latrine (VIP)					
Pit latrine with slab	23	2	22	9	
Composting toilet					
Pit latrine without slab / open pit	180	20	159	13	
Hanging toilet- Hanging latrine	1		1		
Total	207	25	185		
Overall %				14	

5. Distance between toilet and nearest water source

Bonthe - 2016 baseline			
Distance between toilet and nearest water source			
Type	>30 m	<30 m	Don't know
Flush to septic tank			1
Flush to Pit (latrine)	2	4	4
Ventilated Improved Pit latrine (VIP)		1	2
Pit latrine with slab	32	30	6
Composting toilet		3	3
Pit latrine without slab/ open pit	26	22	2
Hanging toilet- Hanging latrine	5	5	4
Other		1	
No facility- Bush- Field			
Total	65	66	22
Overall %	100	42	43
			14

Koinadugu - 2016 baseline			
Distance between toilet and nearest water source			
Type	>30 m	<30 m	Don't know
Flush to septic tank		1	3
Flush to Pit (latrine)		1	3
Ventilated Improved Pit latrine (VIP)		4	7
Pit latrine with slab		80	91
Composting toilet		1	
Pit latrine without slab/ open pit		132	67
Hanging toilet- Hanging latrine			
Other		7	1
No facility- Bush- Field			
Total		226	172
Overall %		100	52
			40
			9

Bonthe - 2020 UNICEF ASWA			
Distance between toilet and nearest water source			
Type	>30 m	<30 m	Don't know
Flush to piped sewer system			1
Flush to septic tank		3	
Flush to Pit (latrine)		3	4
Ventilated Improved Pit latrine (VIP)	4	1	
Pit latrine with slab	33	13	4
Composting toilet	10	5	3
Pit latrine without slab / open pit	100	35	9
Hanging toilet- Hanging latrine	16	7	1
Bucket		1	1
No facility- Bush- Field			
Total		169	66
Overall %		100	26
			7

Falaba & Koinadugu - 2020 UNICEF ASWA			
Distance between toilet and nearest water source			
Type	>30 m	<30 m	Don't know
Flush to piped sewer system			1
Flush to septic tank			1
Flush to Pit (latrine)			1
Ventilated Improved Pit latrine (VIP)			
Pit latrine with slab		16	7
Composting toilet			
Pit latrine without slab / open pit		113	66
Hanging toilet- Hanging latrine		1	
No facility- Bush- Field			
Total			1
Overall %		100	64
			36
			0

6. Toilet construction materials

Bonthe - 2016 baseline									
What is the main material your toilet facility is constructed with?									
Type of toilet	No. of toilets	Asbestos sheets	Bamboo	Landcrete blocks	Sandcrete blocks	Tarpaulin	Thatch	Wood	Zinc sheets
Flush to septic tank	1				1				
Flush to Pit (latrine)	10			4	8			2	
Ventilated Improved Pit latrine (VIP)	3			1	3				
Pit latrine with slab	68	2	1	43	29		11	30	2
Composting toilet	3			1	1		2		
Pit latrine without slab / open pit	50		11	20	8	4	32	27	
Hanging toilet- Hanging latrine	14		3	7	2		3	2	
Other	1								

Koinadugu - 2016 baseline									
What is the main material your toilet facility is constructed with?									
Type of toilet	No. of toilets	Plastic sheets	Bamboo	Landcrete blocks	Sandcrete blocks	Tarpaulin	Thatch	Wood	Zinc sheets
Flush to septic tank	4			1	2			1	
Flush to Pit (latrine)	4			3	3			2	
Ventilated Improved Pit latrine (VIP)	11			3	9		1	9	1
Pit latrine with slab	174		27	75	67		68	136	9
Pit latrine without slab / open pit	233	1	49	26	43	1	142	178	7
Composting toilet	1			1				1	
Hanging toilet- Hanging latrine									
Other	8								

Bonthe - 2020 UNICEF ASWA									
What is the main material your toilet facility is constructed with?									
Type of toilet	No. of toilets	Plastic sheets	Bamboo	Landcrete blocks	Sandcrete blocks	Tarpaulin	Thatch	Wood	Zinc sheets
Flush to piped sewer system	1				1				
Flush to septic tank	3				3				
Flush to Pit (latrine)	7		1	3	2		1		
Ventilated Improved Pit latrine (VIP)	5				5				
Pit latrine with slab	50		4	30	7		8	1	
Composting toilet	18		4	4			3	7	
Pit latrine without slab / open pit	144		8	67	4		52	13	
Hanging toilet- Hanging latrine	24		5	2			8	9	
Bucket	2						1	1	
Total	254								

Falaba & Koinadugu - 2020 UNICEF ASWA									
What is the main material your toilet facility is constructed with?									
Type of toilet	No. of toilets	Plastic sheets	Bamboo	Landcrete blocks	Sandcrete blocks	Tarpaulin	Thatch	Wood	Zinc sheets
Flush to piped sewer system	1				1				
Flush to septic tank	1				1				
Flush to Pit (latrine)	1				1				
Ventilated Improved Pit latrine (VIP)									
Pit latrine with slab	23		4	14	2		2	1	
Composting toilet									
Pit latrine without slab / open pit	180		64	15	7		57	37	
Hanging toilet- Hanging latrine	1			1					
Bucket									
Total	207								

7. Costs of building and repair and cleaning of household toilets

Bonthe - 2016 baseline						
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What were the household's total expenses for building the toilet, including hired labour, materials etc.?

How much does your household approximately spend per year for repair and cleaning of the toilet?

Type of toilet	Cost of construction of toilets			Annual repair and cleaning costs		
	Costs known	Total cost	Average cost	Costs known	Total cost	Average cost
		SLL	SLL		SLL	SLL
Flush to septic tank						
Flush to Pit (latrine)						
Ventilated Improved Pit latrine (VIP)						
Pit latrine with slab	7	8,900,000	1,271,429	20	4,385,300	219,265
Composting toilet				1	150,000	150,000
Pit latrine without slab / open pit	1	100,000	100,000	7	1,975,000	282,143
Hanging toilet- Hanging latrine				3	665,000	221,667
Other						

Koinadugu - 2016 baseline						
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What were the household's total expenses for building the toilet, including hired labour, materials etc.?

How much does your household approximately spend per year for repair and cleaning of the toilet?

Type of toilet	Cost of construction of toilets			Annual repair and cleaning costs		
	Costs known	Total cost	Average cost	Costs known	Total cost	Average cost
	SLL	SLL		SLL	SLL	SLL
Flush to septic tank				1	50,000	50,000
Flush to Pit (latrine)	2	10,500,000	5,250,000			
Ventilated Improved Pit latrine (VIP)	2	3,000,000	1,500,000	3	2,500,000	833,333
Pit latrine with slab	9	6,270,000	696,667	41	8,456,000	206,244
Composting toilet						
Pit latrine without slab/ open pit						
Hanging toilet- Hanging latrine						
Other						

Bonthe - 2020 UNICEF ASWA						
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What were the household's total expenses for building the toilet, including hired labour, materials etc.?

How much does your household approximately spend per year for repair and cleaning of the toilet?

Type of toilet	Cost of construction of toilets			Annual repair and cleaning costs		
	Costs known	Total cost	Average cost	Costs known	Total cost	Average cost
		SLL	SLL		SLL	SLL
Flush to piped sewer system						
Flush to septic tank						
Flush to Pit (latrine)				2	300,000	150,000
Ventilated Improved Pit latrine (VIP)						
Pit latrine with slab	17	13,220,000	777,647	11	4,512,000	410,182
Composting toilet	1	40,000	40,000	2	200	100
Pit latrine without slab / open pit	33	15,216,800	461,115	12	5,140,000	428,333
Hanging toilet- Hanging latrine	11	8,225,000	747,727	5	680,000	136,000
Bucket		1		1		

Falaba & Koinadugu - 2020 UNICEF ASWA

What were the household's total expenses for building the toilet, including hired labour, materials etc.?

How much does your household approximately spend per year for repair and cleaning of the toilet?

Type of toilet	Cost of construction of toilets			Annual repair and cleaning costs		
	Costs known	Total cost	Average cost	Costs known	Total cost	Average cost
		SLL	SLL		SLL	SLL
Flush to piped sewer system						
Flush to septic tank	1	15,000,000	15,000,000	1	10,000,000	10,000,000
Flush to Pit (latrine)						
Ventilated Improved Pit latrine (VIP)						
Pit latrine with slab	7	8,700,000	1,242,857	3	1,300,000	433,333
Composting toilet						
Pit latrine without slab / open pit	74	51,290,000	693,108	61	16,825,000	275,820
Hanging toilet- Hanging latrine	1	600,000	600,000	1	500,000	500,000

8. Desire to improve toilet and willingness to pay for improvements

Bonthe - 2016 baseline				
How would you like to improve your toilet?				
Would you be willing to pay for these improvements?				
Type of improvement	Frequency	%	Willingness to pay for this	
			Yes	%
Install permanent superstructure	61	16	52	85
Install pour flush	48	13	43	90
Improve water supply	57	15	56	98
Replace slab	67	18	58	87
Add tiles	7	2	7	100
Improve ventilation	59	16	55	93
Install lockable door	46	12	41	89
Paint walls	32	8	29	91
Construct a new latrine	1	0	1	100
Total	378	100	342	90

Koinadugu - 2016 baseline				
How would you like to improve your toilet?				
Would you be willing to pay for these improvements?				
Type of improvement	Frequency	%	Willingness to pay for this	
			Yes	%
Install permanent superstructure	331	30	308	93
Install pour flush	35	3	31	89
Improve water supply	74	7	66	89
Replace slab	115	10	93	81
Add tiles	37	3	33	89
Improve ventilation	153	14	135	88
Install lockable door	261	23	228	87
Paint walls	109	10	102	94
Construct a new latrine	1	0	1	100
Total	1,116	100	997	89

Bonthe - 2020 UNICEF ASWA				
How would you like to improve your toilet?				
Would you be willing to pay for these improvements?				
Type of improvement	Frequency	%	Willingness to pay for this	
			Yes	%
Install permanent superstructure	350	22	215	61
Install pour flush	68	4	36	53
Improve water supply	184	12	147	80
Replace slab	129	8	83	64
Add tiles	103	7	90	87
Improve ventilation	267	17	173	65
Install lockable door	282	18	176	62
Paint walls	198	13	131	66
Construct a new latrine				
Total	1,581	100	1051	66

Falaba & Koinadugu - 2020 UNICEF ASWA				
How would you like to improve your toilet?				
Would you be willing to pay for these improvements?				
Type of improvement	Frequency	%	Willingness to pay for this	
			Yes	%
Install permanent superstructure	206	34	176	85
Install pour flush	48	8	42	88
Improve water supply	47	8	43	91
Replace slab	92	15	78	85
Add tiles	12	2	10	83
Improve ventilation	17	3	12	71
Install lockable door	117	19	105	90
Paint walls	69	11	63	91
Total	608	100	529	87.0

9. Knowledge of diseases related to poor sanitation (unclean toilets!)

Bonthe - 2016 baseline

Do you know of any diseases associated with the use of unclean toilets?

Response	Frequency	%
Yes	120	20
No	474	80
Total	594	100

Bonthe - 2016 baseline

If yes, please name them

Disease	Frequency	%
Diarrhoea	51	38
Typhoid	12	9
Cholera	57	42
Malaria	16	12
Total	136	100

Koinadugu - 2016 baseline

Do you know of any diseases associated with the use of unclean toilets?

Response	Frequency	%
Yes	200	34
No	380	66
Total	580	100

Koinadugu - 2016 baseline

If yes, please name them

Disease	Frequency	%
Diarrhoea	22	11
Typhoid	6	3
Cholera	87	42
Malaria	90	44
Total	205	100

Bonthe - 2020 UNICEF ASWA

Do you know of any diseases associated with the use of unclean toilets?

Response	Frequency	%
Yes	269	66
No	141	34
Total	410	100

Bonthe - 2020 UNICEF ASWA

If yes, please name them

Disease/symptom	Frequency	%
Diarrhoea	67	31
Typhoid	11	5
Cholera	124	57
Dysentery	4	2
Vomiting	8	4
Stomach ache	2	1
Running stomach	3	1
Total	219	100

Falaba & Koinadugu - 2020 UNICEF ASWA

Do you know of any diseases associated with the use of unclean toilets?

Response	Frequency	%
Yes	153	70
No	66	30
Total	219	100

Falaba & Koinadugu - 2020 UNICEF ASWA

If yes, please name them

Disease/symptom	Frequency	%
Diarrhoea	86	54
Typhoid	9	6
Cholera	38	24
Dysentery	18	11
Hepatitis	3	2
Vomiting		
Stomach ache	3	2
Running stomach	1	1
Total	158	100

Annex – Analysis of household questionnaire data – Hand Washing

District		Baseline (SDG 2016)		End line (2020)	
Type of hand washing	Indicator	%	No.	%	No.
Bonthe		n= 594		n= 410	
With water only	Water or hand washing device available at washing point	17.8	106	18.8	77
With water and soap	Water or hand washing device and soap available at washing point	10.1	60	11.2	46
Falaba and Koinadugu		n= 580		n= 219	
With water only	Water or hand washing device available at washing point	19.8	115	20.1	44
With water and soap	Water or hand washing device and soap available at washing point	11.4	66	16.9	37
Overall		n= 1,174		n= 629	
With water only	Water or hand washing device available at washing point	18.8	221	19.2	121
With water and soap	Water or hand washing device and soap available at washing point	10.7	126	13.2	83