

Namibia
National Sanitation Strategy
2010/11 – 2014/15

SECOND DRAFT

APRIL 2009

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Abbreviations & Acronyms

Acc	-	Accountability (for objective)
AF	-	Action Fiche
BL	-	Baseline (for targets)
BoQ	-	Bill of Quantities
BSC	-	Balanced Scorecard
BTC	-	Built Together Committee (for BTP)
BTP	-	Built Together Programme (decentralised housing programme)
CBM	-	Community-based Management
CBO	-	Community-based Organisation
CDC	-	Constituency Development Committee
CI	-	Continuous Improvement
CLTS	-	Community-Led Total Sanitation
C,O,M	-	Construction, Operation & Maintenance
Com	-	Community
Cons	-	Consultant
Cont	-	Contractor
Corps	-	Community Own Resource Persons (used by MoHSS)
CSF	-	Critical Success Factor(s)
CTQQ	-	Cost, Time, Quantity or Quality
DCC	-	District Community Committee (used by MoHSS)
DEWATS	-	Decentralised Waste Water Treatment System
DRM	-	Directorate of Resource Management
CSHV	-	Community Sanitation and Health Volunteer
DWSSC	-	Directorate of Water Supply and Sanitation Coordination
EC	-	European Commission
EDF	-	European Development Fund
EHI	-	Environmental Health Inspector (from MET or Resource Management in MAWF)
EHP	-	Environmental Health Practitioner (in MoHSS)
EIA	-	Environmental Impact Assessment
EMAA	-	Environmental Management and Assessment Act
EMP	-	Environmental Management Plan
EO	-	Extension Officer (for rural water and sanitation) from DWSSC
Eoi	-	Expression of Interest
EU	-	European Union
GRN	-	Government of the Republic of Namibia
GTZ	-	Deutsche Gesellschaft für Technische Zusammenarbeit
HR	-	Human resource(s)
HRD	-	Human resource development
HRDC	-	Habitat Research & Development Centre
HRDP	-	Human resource development plan (training plan)
HRM	-	Human resource management
HSS	-	Ministry of Health and Social Services (MoHSS)
ICT	-	Information and communication technology
IEC	-	Information, Education and Communication
Insp	-	Inspector
ito	-	in terms of
JAR	-	Joint Annual Review
KAP	-	Knowledge, Awareness and Perception / Knowledge, Attitude and Practice (surveys)
KM	-	Knowledge management
LA	-	Local Authority
LADC	-	Local Authority Development Committee
LC	-	Local Contractor
LM	-	Line Ministry

MAWF	-	Ministry of Agriculture, Water and Forestry
MDG	-	Millennium Development Goals
MER	-	Monitoring, Evaluation and Reporting
MERRIL	-	Measure, Evaluate and Report, Reward, Improve and Learn (performance management)
MET	-	Ministry of Environment and Tourism
Mgt	-	Management
MIS	-	Management Information System
MoE	-	Ministry of Education
MoF	-	Ministry of Finance
MoHSS	-	Ministry of Health and Social Services
MoJ	-	Ministry of Justice
MRL	-	MRLGHRD
MRLGHRD	-	Ministry of Regional and Local Government, Housing and Rural Development
MTEF	-	Medium Term Expenditure Framework (3 years)
MTP	-	Medium Term Plan (3 years)
MWT	-	Ministry of Works and Transport
NA	-	Not applicable
NAO	-	National Authorising Officer
NamWater	-	Namibian Water Corporation (parastatal for bulk water supply)
NCD	-	Non-communicable disease
NDP 3	-	National Development Plan 3
NGO	-	Non-Governmental Organisation
NHAG	-	Namibian Housing Action Group
NPC	-	National Planning Commission
NQA	-	Namibian Qualifications Authority
NR	-	Natural Resource(s)
NRCS	-	Namibian Red Cross Society
O	-	Objective
O&M	-	Operation and Maintenance
O/M/A	-	Office/Ministry/Agency
OPM	-	Office of the Prime Minister
PA	-	Performance Agreement (for an individual)
PEMP	-	Performance and Effectiveness Management Programme
PHAST	-	Participatory Hygiene and Sanitation Transformation
PI	-	Performance indicator (same as measure)
PIF	-	Project Identification Form (submitted to NPC)
PM	-	Project management
PMS	-	Performance Management System (of Namibia)
Pol	-	Police
PoN	-	Polytechnic of Namibia
PPP	-	Public-Private Partnership
Pr	-	Priority
PRA	-	Participatory Rural Appraisal
Priv	-	Private Sector
PS	-	Permanent Secretary
P/S	-	Private Sector
Q	-	Quarter
R	-	Rural
RC	-	Regional Council
R&D	-	Research and Development
RDCC	-	Regional Development Coordination Committee
Resp	-	Responsibility (for initiatives)
RPRP	-	Rural Poverty Reduction Programme
RWS	-	Directorate of Rural Water Supply

SADC	-	Southern African Development Community
SARAR	-	Self-esteem, Associative strength, Resourcefulness, Action planning, Responsibility)
SDFN	-	Shack Dwellers Federation of Namibia
SEA	-	Strategic Environmental Assessment
S-E-E	-	Socio-Economic-Environmental
SFA	-	Strategic Focus Area
SH	-	Stakeholder
SJO	-	Self/Jointly/Outsource
SMART	-	Specific, Measurable, Agreed to, Realistic and Time-bound
SME	-	Small and Medium Enterprises
SPSP	-	Sector Policy Support Programme
SWAp	-	Sector Wide Approach
SWAP	-	Sector Wide Approach Programme (the donor contribution to the sector)
SWH	-	Sanitation, Water & Health
SWOT	-	Strength-Weakness-Opportunity-Threat
TA	-	Traditional Authority
TBD	-	To be determined
TCQQ	-	Time, Cost, Quality and/or Quantity
TNA	-	Training Needs Assessment
ToR	-	Terms of Reference
ToT	-	Training of Trainers
U	-	Urban
UN	-	United Nations
UNAM	-	University of Namibia
V2030	-	Vision 2030
VDC	-	Village Development Committee
VIP	-	Ventilated Improved Pit latrine
WATSAN	-	Water and Sanitation
WBS	-	Waterborne Sanitation System
WPC	-	Water Point Committee
WSF	-	Water and Sanitation Forum (on central level)
wsf	-	Water and Sanitation Forum (on regional level)
WSSC	-	Directorate of Water Supply and Sanitation Coordination
WWTP	-	Waste Water Treatment Plant

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FOREWORD BY THE MINISTER

To be written by Minister:

EXECUTIVE SUMMARY

This **strategic plan for the period 2010/11 to 2014/15 (from 1 April 2010)** is a framework that outlines the approaches and activities that the Sanitation Sector intends to take in order to achieve sustainable success in the medium term. This Plan provides an integrated picture of where the Sanitation Sector is going over the next five years and to serve as a communication vehicle for conveying its direction. It will be used to demonstrate its focus areas, objectives, projects and allocation of resources in response to its mandate and challenges. This strategic plan is defining the Sanitation Sector's strategic focus areas, objectives and initiatives for this period. It was compiled in close collaboration with the role players. Based on the Balanced Scorecard, the strategic plan forms the basis for performance management. The strategy workshops and stakeholders consultations took place during the first half of 2009.

The Sanitation Sector **Mission** is: "To provide, with minimal impact on the environment, acceptable, affordable and sustainable sanitation services for urban and rural households, informal settlements and institutions through inter-sectoral coordination, integrated development and community based management with a Sector-Wide Approach in financial resource allocation."

The Sanitation Sector **Vision** is: "A healthy environment and improved quality of life for 66% of the (Namibian) population having adequate sanitation services with a high level of hygiene by 2015."

The **Core Values** represent the non-negotiable style in which the Sanitation Sector will provide services to customers and stakeholders. The Sanitation Sector cherishes good governance through the following core values: Integrity, comprising honesty, trust and transparency of the service providers; Commitment to a shared responsibility to improve quality of life and Collaboration and communication at all levels for effective services delivery.

If the Sanitation Sector wishes to achieve its vision, based on its mandate/mission, it has to perform in **6 Themes** (or Strategic Focus Areas), viz.:

Theme A: Watsan Sector Coordination

Theme B: Institutional Capacity Building

Theme C: Community Education & Participation

Theme D: Construction

Theme E: Operation & Maintenance, Performance Management & Enforcement

Theme F: Socio-Economic-Environmental Outputs & Outcomes

A total of **20 objectives** were identified through the consultation process. The hypothesis is that if the Sanitation Sector follows this path, by achieving these 20 objectives in these 6 Themes, it will realise its vision.

The Sanitation **Balanced Scorecard** takes the strategy map and gives it more detail. It includes the following:

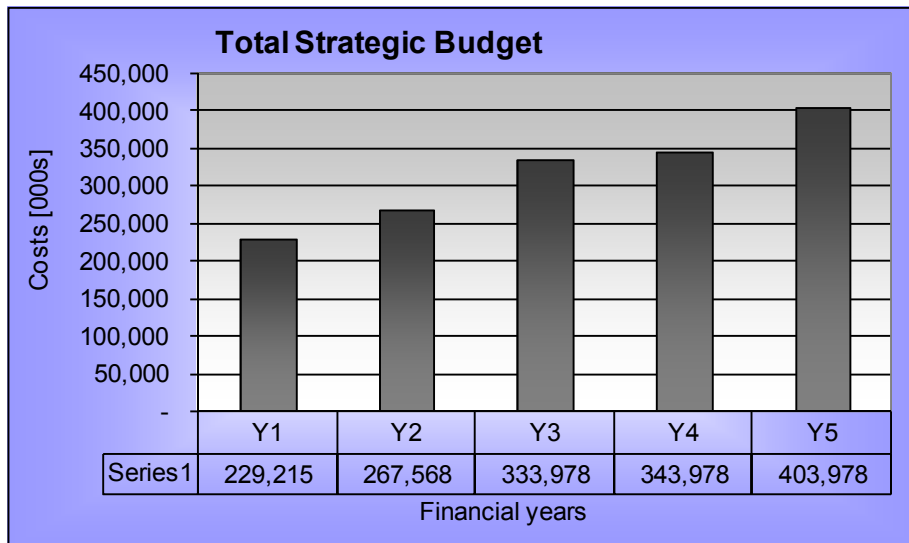
- The 6 SFAs/Themes
- The 20 Objectives with their priorities and accountabilities
- Performance Measures and Targets for each Objective
- Initiatives with their priorities and responsibilities
- Cost estimates of all initiatives (expected total cost over the 5 year period)
- Scheduling of these initiatives over the 5 year period

SMART objectives are achieved through **initiatives or projects**. Initiatives are defined as the current and future activities or projects the Sanitation Sector is engaged in to help ensure it meets or exceeds its performance targets, as stated in the PIs and Targets for each Objective. Initiatives drive strategic performance and are the means by which the Sanitation Sector will achieve its defined strategic objectives. The Sanitation Sector should apply its resources towards the highest value projects.

The initiatives supporting the 20 objectives, as described in the Scorecard, require resources – human, structural and financial. To ensure a realistic strategic plan, the required financial resources should be made available. Should resources be lacking, initiatives indicated by Priority 1 should receive preference.

The total required budget to implement all initiatives in the sanitation strategic plan is **N\$1.579 billion** over the five year period, with an average of N\$316 million per annum. Year 1 starts with **N\$229 million** and increases to **N\$404 million** in year 5, when increasing capacity would be able to absorb the increasing funding. (Note that these are just cost estimates and will have to be verified in future when project plans are developed per initiative/project.)

Theme D: Construction is expected to require 88% of the funding with the softer remaining themes requiring the remaining 12%.



N\$ [000s]		Y1	Y2	Y3	Y4	Y5
11,220	A	3,580	2,698	1,648	1,648	1,648
128,950	B	21,345	27,745	26,620	26,620	26,620
36,350	C	8,450	7,800	6,700	6,700	6,700
1,393,045	D	193,700	227,385	297,320	307,320	367,320
8,050	E	1,920	1,720	1,470	1,470	1,470
1,100	F	220	220	220	220	220
1,578,715	TOTAL	229,215	267,568	333,978	343,978	403,978

1. BACKGROUND & INTRODUCTION

1.1 Background

The need for potable water and basic sanitation services in Namibia was identified at Independence as one of the major basic essential needs of which the nation especially the people living in communal areas, had been deprived. Although, access to safe water for the rural population has increased from 43% in 1991 to 80% in 2001, sanitation coverage in rural areas has not progressed according to expectations. By 2009 only 13% of the rural population has access to improved sanitation with 61% of the urban population having access to improved sanitation.

The first Water Supply and Sanitation Policy (WASP) was adopted in 1993. The WASP allocated the rural sanitation function to the Ministry of Health and Social Services (MOHSS) together with other stakeholders providing supplementary roles. As required according to WASP, the Directorate of Rural Water Supply (DRWS) was established in the Ministry of Agriculture, Water and Rural Development to improve access to safe water for communities in rural, communal areas. The establishment of DRWS laid the foundation for the successful implementation of a dynamic strategy, known as Community Based Management (CBM). This strategy involved extensive user participation in water supply and management in the form of Water Point Associations, their representative Water Point Committees and Local Water Associations with Local Water Point Committees.

The current Water Supply and Sanitation Policy (WSASP) of 2008 replaces the policy of 1993.

This first National Sanitation Strategy is based on this WSASP policy as well as the situational analysis conducted early in 2009. The situational analysis consisted of desk studies, extensive stakeholder consultations and sites visits. The situational analysis with the key strategic issues is presented in a separate report.

The methodology used for strategy development is the Balanced Scorecard (BSC), adopted by the Government of the Republic of Namibia (GRN). The initial strategy workshop was held between 3 and 5 March 2009 with the final stakeholder workshop held on 18 June 2009. The process of preparing this strategic plan for sanitation was consultative with the involvement of the relevant sanitation sector stakeholders.

1.2 Definitions

Sanitation:

Sanitation is the management of **human excreta** and **grey water**.

Human excreta is human bodily waste which is excreted from the body, such as urine and faeces.

Grey water (or sullage) is the dirty water that comes from washing in bathrooms and the kitchen. It can also be heavily contaminated, e.g. when washing the clothing and nappies of babies.

A wide range of sanitation systems exists to properly and safely manage excreta. All these systems generally follow the human excreta management cycle, incl.:

- disposal (user interface and storage)
- collection
- treatment (on site or off site)
- transfer and
- re-use (sludge or treated effluent)

Figure 1 shows the management cycle of excreta in the case of on site dry sanitation pit latrine.

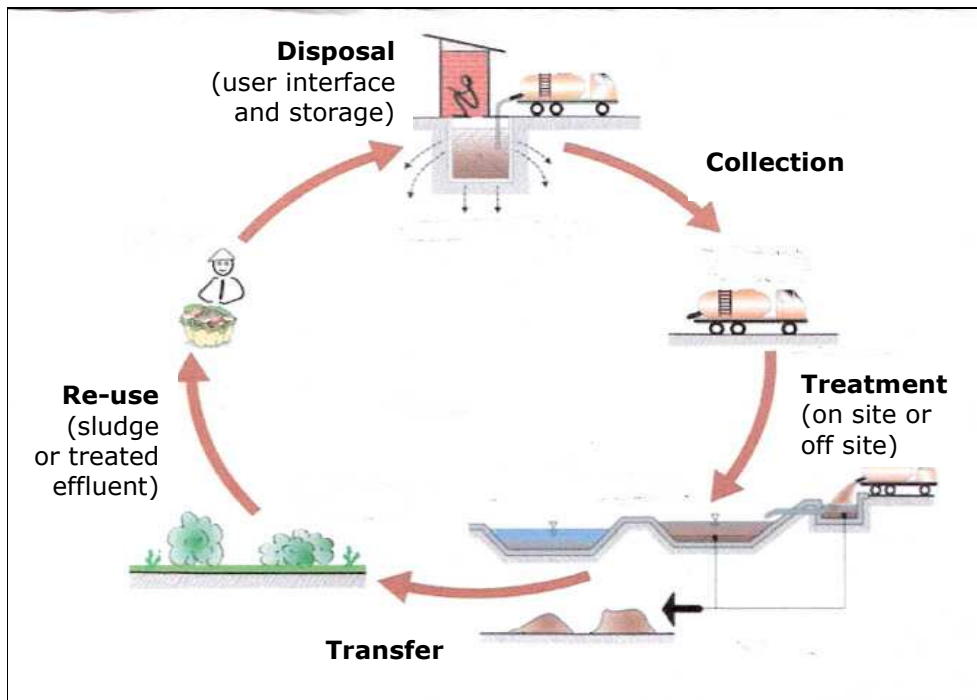


Figure 1: Sanitation cycle

Hygiene:

Hygiene refers to practices associated with ensuring good health and cleanliness. Although such practices may vary from culture to culture, hygiene always promotes health and quality of life, as hygiene practices prevent illness and maintain health. As human excreta and grey water are daily sources of potential human contamination, hygiene often starts with the washing of hands after visiting the toilet and before eating or preparing food. Hygiene practices therefore include maintaining personal, toilet and kitchen cleanliness that helps maintain health in the absence of disease-producing microbes. Hygiene conditions include clean air and a clean environment.

More specifically, sanitation hygiene includes all practices adopted by all individuals in a community to stop the transmission of faecal oral diseases. Faeces of an infected individual are transmitted to the mouth of a new host through at least 5 major routes described **Figure 2**.

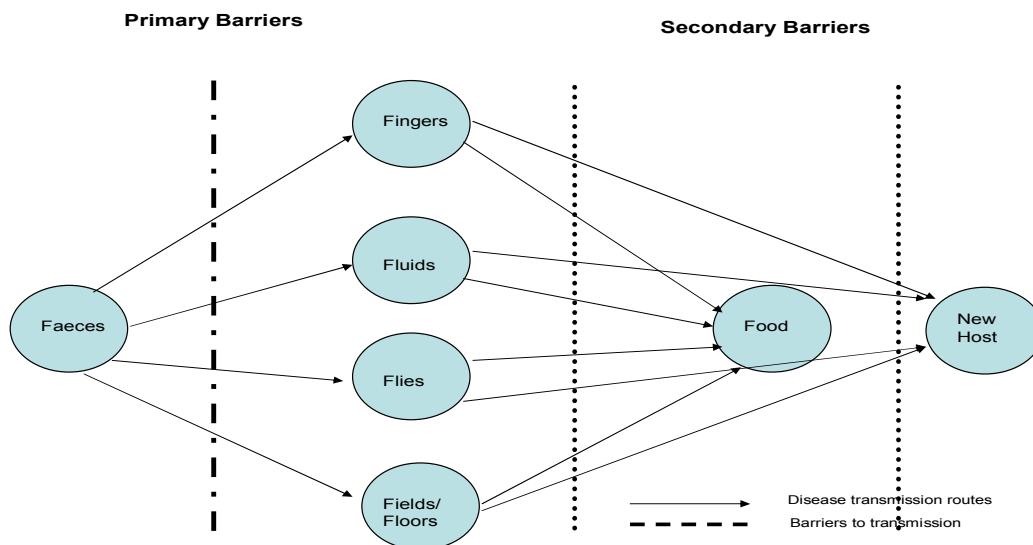


Figure 2: The F-diagram of disease transmission and control (Wagner & Lanoix)

Key safe hygiene practices include the following:

- Use of improved toilet and definitively stop open defecation
- Hand washing with soap after using toilet,
- Safe disposal of children stools and hand washing with soap after handling children stools
- Protecting food against flies
- Proper storage of water in house, etc...

The adoption of safe hygiene practices requires individuals to change their behaviours. A wide range of participatory approaches and education tools exist to make changes happening faster and make changes sustainable.

Sanitation and hygiene therefore always go together. Sanitation can also not be managed in isolation from water, habitat, housing and the surrounding natural environment (see Figure 1).

The *sanitation package* in this strategic plan therefore includes water, hygiene, the natural environment and the habitat / housing. See **Figure 3**.

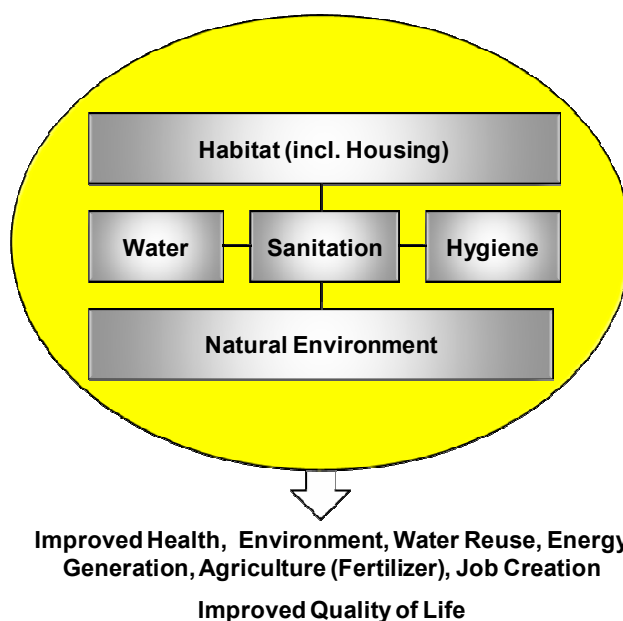


Figure 3: The Sanitation Package

Sanitation Gap / Sanitation Coverage:

Sanitation coverage is the indicator internationally used to measure progress in achieving the Millennium Development Goals (MDGs). This indicator measures access to sanitation in terms of types of technology and levels of service afforded. The Government of Namibia uses the definition of the Joint Monitoring Programme for Water and Sanitation (UNICEF/WHO) which defines the access to adequate sanitation facilities as the percentage of the population **using "improved" sanitation**. **Table 1** presents the type of sanitation systems that are improved and non-improved. Excreta disposal systems are considered adequate if they are private and if they separate human excreta from human contact.

Improved sanitation facilities	Non-improved facilities
<ul style="list-style-type: none"> • Flush, pour flush to waterborne sewerage • Flush, pour flush to septic tanks and drains • Flush, pour flush to pit latrine • Ventilated Improved Pit latrines and pit latrine with slab • Composting toilet 	<ul style="list-style-type: none"> • Shared toilet (public and shared between HH) • Bucket • Pit latrine without slab/open pit • Open defecation

Table 1: Improved and Non-improved Systems

Sanitation and hygiene improvement are also measured with the proportion of population adopting safe hygiene practices and the reduction of faecal oral diseases.

1.3 Sanitation & Hygiene Benefits

Improving safe excreta disposal and safe hygiene practices has a great health impact. But Sanitation and Hygiene is also more than health and environmental protection. Sanitation brings additional benefits such as:

Social benefits: dignity; convenience; privacy; social prestige; security for women (women get assaulted when they go to the bush); increase school enrolment for girls

Job creation: construction of individual latrines;

Economic benefits: re-use of treated effluents for irrigation; re-use of bio solids (composted sludge) as fertiliser for agriculture; production of biogas as source of energy

1.4 Water & Sanitation Policy

The current Water Supply and Sanitation Policy (WSASP) of 2008 replaces the policy of 1993.

The policy principles could be summarised as follows:

1. Essential water supply and sanitation services should become available to all Namibians, and should be acceptable and accessible at a cost which is affordable to the country as a whole.
2. This equitable improvement of water and sanitation services should be achieved by the combined efforts of the government and the beneficiaries, based on community involvement and participation, the acceptance of a mutual responsibility and by outsourcing services where necessary and appropriate, under the control and supervision of government.
3. Communities should have the right, with due regard for environmental needs and the resources and information available, to determine which water and sanitation solutions and service levels are acceptable to them within the boundaries of the national guidelines. Beneficiaries should contribute towards the cost of the water and sanitation services they desire at increasing rates for standards of living exceeding the levels required for providing basic needs.
4. Environmentally sustainable development and efficient utilisation of the water resources of the country and environmentally sustainable development of sanitation services should be pursued in addressing the various needs, and should be strongly supported by information campaigns and continuous educational interventions at all levels.

WSASP recommends the following for strategy development:

- 1 Benefits of the provision of sanitation are promoted as a public good and include health, environment, energy generation (biogas) and food production (waste water re use and treated excreta re use).
- 2 Technology options should be Accessible, Acceptable (social and cultural), Affordable, Environmentally sustainable and Appropriate.
- 3 Full cost recovery is the general rule. In low income rural and urban areas, it is essential to recover at least the operational and maintenance costs with support from government subsidies or cross-subsidies amongst consumers. Subsidies for the poor and marginalised have to be allocated according to strict criteria and transparent mechanisms.
- 4 The WSASP rules also the transfer of mandate for the coordination in the sanitation sub-sector to the Directorate of Water Supply and Sanitation Coordination (DWSSC) in MAWF. A broad multi-sectoral forum for Sector Coordination on the operational level is to be established to support DWSSC activities. WSASP defines roles and responsibilities of key stakeholders.
- 5 Human resources development is a crucial element in the assumption of responsibilities and in the implementation of WSASP. WSS should ensure that human resources are developed to suit continuing and new requirements. Technical capacity and human resource

development, as well as, arrangements for suitable technical support must be strongly promoted within Regional Councils and Local Authorities for implementation of WSS services.

1.5 Water Sector Strategy

The five year Water Sector Strategic Plan for the period 2007/8 to 2011/12 was finalised in April 2007. This period is therefore not the same as for this Sanitation Strategic Plan which is from 2010/11 to 2014/15.

The Water Sector spans various institutions, but falls under the control or authority of the Ministry of Agriculture, Water and Forestry (MAWF). The Water Development Forum (WDF) was established in 2005 to oversee the development of water in Namibia. For the purpose of this document, the water sector consists of four sub-sectors, viz. Irrigation, Rural Water, Urban-Industrial Water and Mining Water.

Vision: “To have achieved equitable access to sufficient, appropriate, safe, sustainable and affordable water for all Namibian users for improved quality of life”.

Mission: “To use and jointly manage water in an equitable, efficient and sustainable manner for optimum long term social and economic benefits for all users in Namibia”

Values: Sustainability (respect for sustainability of resources & institution), teamwork & Communication (we are in it together, for ever) and integrity - honesty, trust and transparency

The Water Sector strategy consists of seven themes and 34 objectives. The total amount required to realise all initiatives of the strategic plan over the five year period is almost N\$5.5 billion, with an annual funding requirement of approximately N\$1 billion.

Two of the objectives in the Water Sector Strategic Plan refer to sanitation, viz.

D3. Appropriate sanitation in rural areas (with total cost of initiatives under this objective N\$100 million)

E3. Appropriate sanitation in urban areas (with total cost of initiatives under this objective N\$300 million)

The total cost of N\$400 million therefore belongs in this sanitation strategy. It is envisaged that a combined WATSAN strategy will be developed during 2011.

1.6 Sanitation Stakeholders

The key sanitation stakeholders are depicted below in *Figure 4*.

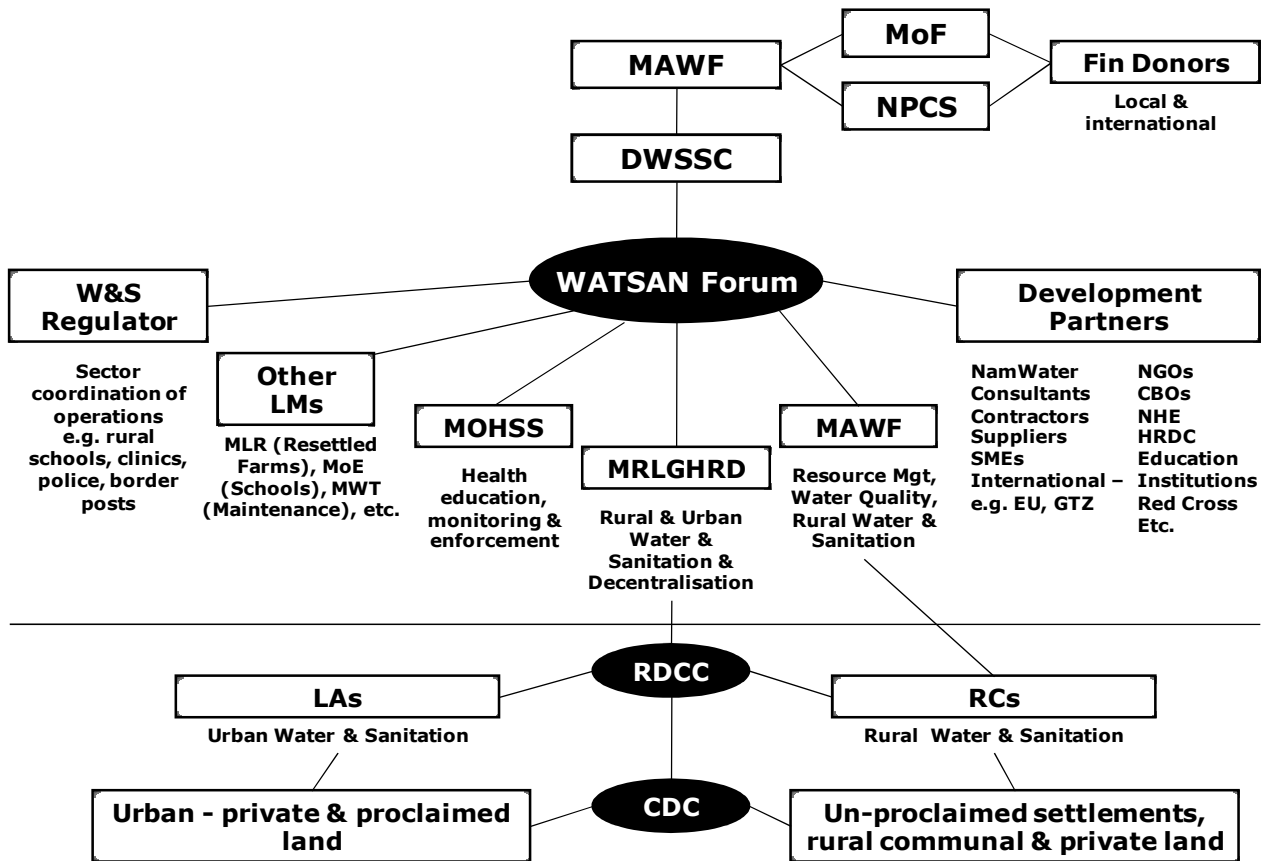


Figure 4: Sanitation Stakeholders

1.7 Strategic Planning Methodology

Strategy starts with the present and moves the organisation (the sanitation sector in this case) to the future. Strategy asks four questions:

“Where are we now?”

“Where do we want to be?”

“How do we want to get there?”

“How do we monitor our progress?”

A strategy map is constructed linking the various strategic objectives together in a clear manner for everybody to understand. It is summarising the organisation’s strategy. *Figure 5* depicts the strategy formulation methodology with the vision in the centre and moving outwards with more and more detail. To realise the vision, the Strategic Focus Areas (SFAs) or Strategic Themes are chosen. Then more detail per Theme is added by means of objectives (O). Finally, for each objective, initiatives (I) (projects or activities) are identified to be executed to achieve the objective. Details of the objectives and initiatives are presented in the balanced scorecard.

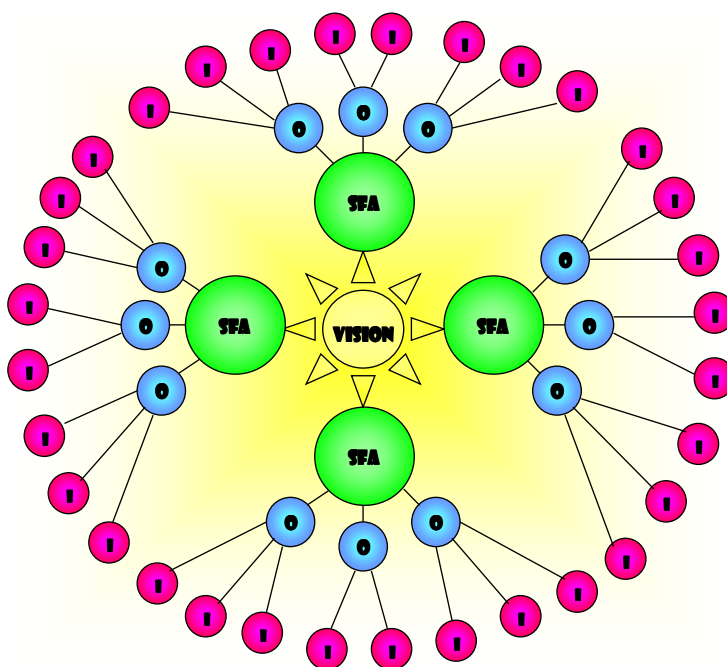


Figure 5: 'Strategy Mind Map'

1.8 Links with National High Level Statements

Namibian Constitution

The Constitution as the supreme law of the country provides guidelines which the Ministry must follow as stated in articles 95 (j), (l) and 100 which call for the maintenance of ecosystems, essential ecological processes, biological diversities of Namibia and the utilisation of living natural resources on sustainable basis for the benefit of all Namibians both present and future.

Vision 2030

Vision 2030 provides a policy framework for long-term national development. The elements that are the essence of Vision 2030 are prosperity, harmony, peace and political stability. The Sanitation Sector has aligned itself with these and is committed to the overall goal of Vision 2030.

Targets: In the Vision 2030 for Namibia, 100% sanitation coverage is foreseen by 2030.

NDP 3

National Development Plan 3 (2007/2008 – 2011/12), with its main theme of Accelerated Economic Growth and Deepening Rural Development, is regarded as the first medium-term strategic implementing tool towards systematic achievement of Vision 2030.

Targets: By 2012, national sanitation coverage should reach 65%, urban coverage: 92.6% and rural coverage: 50%.

Millennium Development Goals (MDGs)

GRN is committed to realising four (4) of the MDGs. These are as follows:

- To eradicate extreme poverty and hunger
- To promote gender equality and empower women
- To ensure environmental sustainability
- To develop a global partnership for development

Targets: MDG target (Goal 7 and Target 7.C) is to halve by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

Recommendations from the 2008 Cabinet Retreat

The Office of the Prime Minister (OPM) recommendations of 10 June 2008 are:

- Item 3: That all Cabinet submissions on proposed capital and development projects must specify the *employment creation* potential
- Item 6: That the Government should provide materials for the construction of *VIP latrines*
- That the MRLGHRD expedite the *review* of Water Assistance Support Policy (*WASP*); and
- That *subsidy* is given to *Wet Services* and that the *bucket system be eradicated*
- Item 9: That *central government should take the lead in funding* projects in the Regional and Local Authorities and that all Donor and Government driven programmes and projects targeting *rural areas should include sanitation components*
- Item 10: That *information* on sanitation and *monitoring* systems should be made available and implemented by the *MRLHRD*
- Item 11: That Urban Development Schemes should ensure that all *shopping and public complexes* make provision for ablution facilities
- Item 12: That *regulations* should be developed to regulate the use of toilets at e.g. filling stations where people are forced to *pay for using toilets*
- Item 13: That the Regional Councils and Local Authorities should be empowered to ensure semi-purification of sewage water before its disposal in terms of septic ablution facilities and that regulations should be developed to *regulate the sewage disposal* by individuals
- Item 14: That *open sewerage ponds* should be designed and managed in such a way that they do not overflow into open planes and residential areas and that construction of effluent treatment plants by LA should be undertaken

Employment creation strategies Association of Regional Councils (ARC)

- Item 2: That *VIP latrine toilet* should be constructed through the *food for work or cash for work programmes* and that sewerage networks be constructed in settlements areas
- Item 5: That *flood water which can be used during the dry season* for human consumption (shall be dammed/collected).

SWAPO Party Manifesto

The SWAPO Party Election Manifesto (2004) clearly pledges the SWAPO Party Government's commitment to building a vibrant economy and strengthening the productive sectors. The sanitation sector is associated with initiatives that address poverty reduction, job creation, SME development, civil service efficiency and the decentralisation of rural water and sanitation services.

Swapo Election Manifesto, 2009

To be added later in the final version

2. HIGH LEVEL STATEMENTS

2.1 Mission

“To provide, with minimal impact on the environment, acceptable, affordable and sustainable sanitation services for urban and rural households, informal settlements and institutions through inter-sectoral coordination, integrated development and community based management with a Sector-Wide Approach in financial resource allocation.”

2.2 Vision

“A healthy environment and improved quality of life for 66% of the (Namibian) population having adequate sanitation services with a high level of hygiene by 2015.”

2.3 Core Values

The core values represent the non-negotiable style in which the Sanitation Sector will provide services.

The Sanitation Sector cherishes good governance through the following core values:

- Integrity comprising honesty, trust and transparency of the service providers.
- Commitment to a shared responsibility to improve quality of life.
- Collaboration and communication at all levels for effective services delivery.

2.4 Slogan

Sanitation for an Improved Quality of Life

or

Sanitation for all by all - for improved Quality of Life

or

Sanitation, our National Priority and my Responsibility

or

Sanitation - the Key to Healthy Communities

or

Sanitation for Health and Dignity

Note: A competition could be launched for the best slogan and logo.

This will raise awareness and improve buy-in.

3. KEY STRATEGIC ISSUES

3.1 Key Strategic Issues

The situational analysis (stakeholder analysis, external and internal analysis) revealed the major threats, opportunities, strengths and weaknesses faced by the Sanitation Sector today. From this the key strategic issues were revealed. These major issues of strategic importance are depicted in **Figure 6**. The scores in brackets indicate the magnitude of the issues, as agreed upon in the strategy workshop. A maximum score of **4** translates as a most major issue.

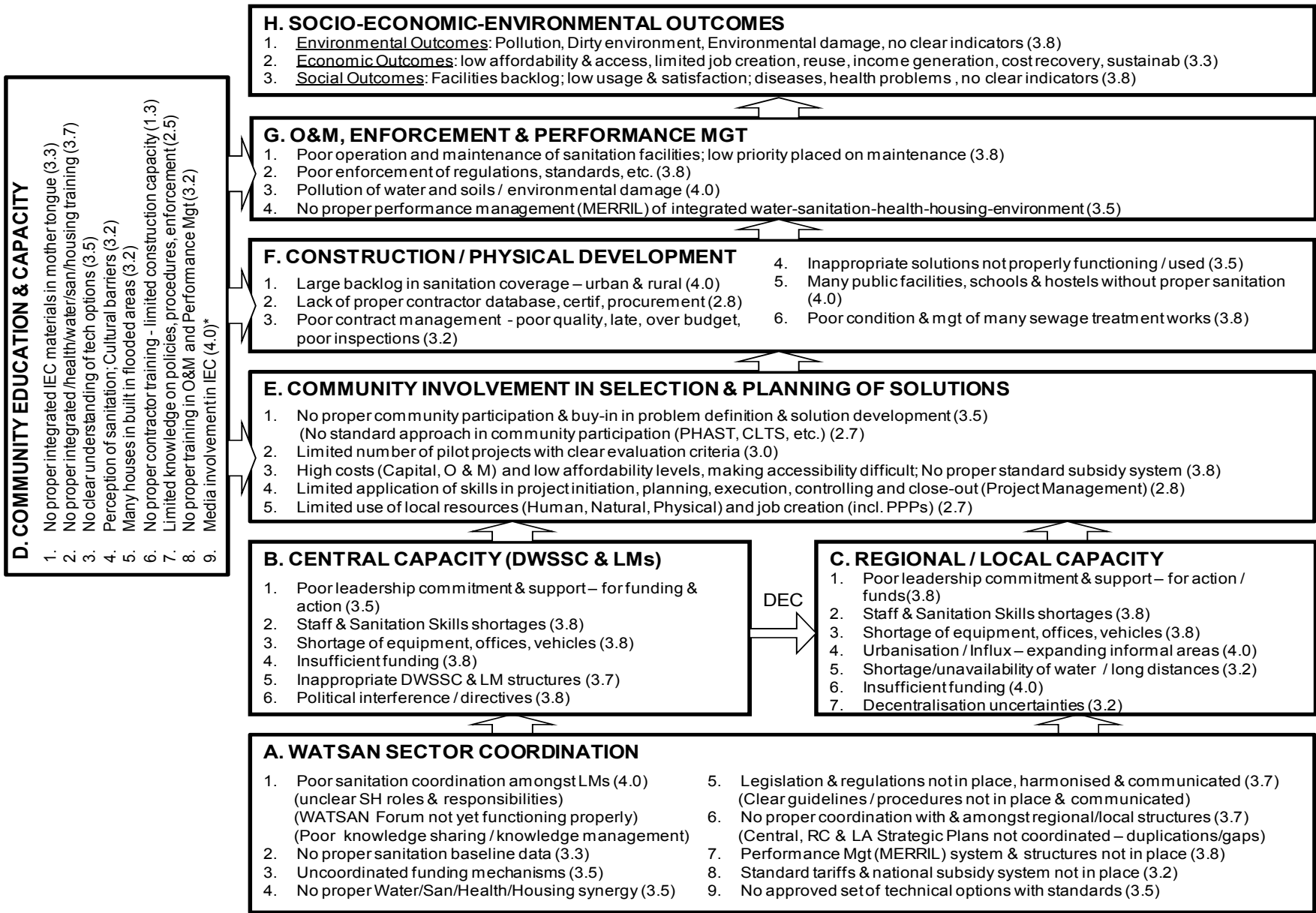


Figure 6: Summary of Key Strategic Issues

4. STRATEGIC RESPONSE

In response to the identified key strategic issues (as listed in the previous section), the sanitation sector needs to develop an appropriate strategy to counter the challenges and grasp the development opportunities. Ultimately the sanitation sector needs to achieve the desired socio-economic and environmental outputs and outcomes if it wants to reach its vision.

The strategic responses are presented in this section. It includes the general strategic approaches and methodologies to be followed in executing the strategic plan.

4.1 General Strategic Approach

The strategic approach is based on key principles and recommendations developed in the WSASP and also on lessons learnt from successful and unsuccessful sanitation projects in Namibia.

The proposed approach for sanitation improvement in Namibia is based on the concept of *Hygiene Framework* and includes four main components:

1 *Enabling Environment*

An enabling environment will be obtained with the following:

- adequate coordination mechanisms
- clear roles and responsibilities for stakeholders
- harmonised policies and regulations
- adequate funding
- transparent subsidy mechanism and harmonised tariff structure

2 *Sustainable hygiene and sanitation behaviour changes*

Sustainable hygiene and behaviour changes will be obtained through strong communication and social mobilisation, associated with community participation in project cycle management and community awareness/education leading to demand creation for sanitation and for safe hygiene practices. Beneficiaries are well informed and can choose the most appropriate sanitation system that matches their needs. National guideline on participatory approaches leading to behaviour changes and IEC materials are to be developed for rural areas and informal settlements.

3 *A range of Sanitation Systems for all*

A set of improved sanitation systems adapted to the environmental and cultural context and affordability level of the beneficiaries will be developed.

4 *Schools sanitation*

Promotion of sanitation facilities and safe hygiene practices should not be limited to households but should also be implemented in schools and school hostels.

4.2 Sanitation Delivery Process

Projects are implemented by RC and LA staff with technical support from Line Ministries, according to Ministerial Strategic Plans, national standards and regulations. Successful and sustainable sanitation projects can only be achieved through a multidisciplinary approach with good collaboration amongst the community/beneficiaries, the community mobiliser, community volunteer, extension officer, health officer, water and sanitation engineer and town planners.

A local structure composed of Rural Sanitation Extension Officers (EOs) will be in charge of implementing sanitation projects in rural communities. The number of EOs required will depend on sanitation needs in each Region. Depending on local conditions (e.g. settlement patterns) and available resources (e.g. vehicles) one EO could manage up to 10 projects in rural areas. In urban areas, LAs should set up multi-disciplinary teams with a minimum of two persons trained in the harder and softer sanitation issues for project implementation.

Note that initially a more top down approach will be followed in the identification of projects, but as community capacities and participation improve, the process will incrementally become more bottom-up. The proposed initial sanitation delivery process is described in **Annexure B** with an illustration of the structure in **Figure 7** below.

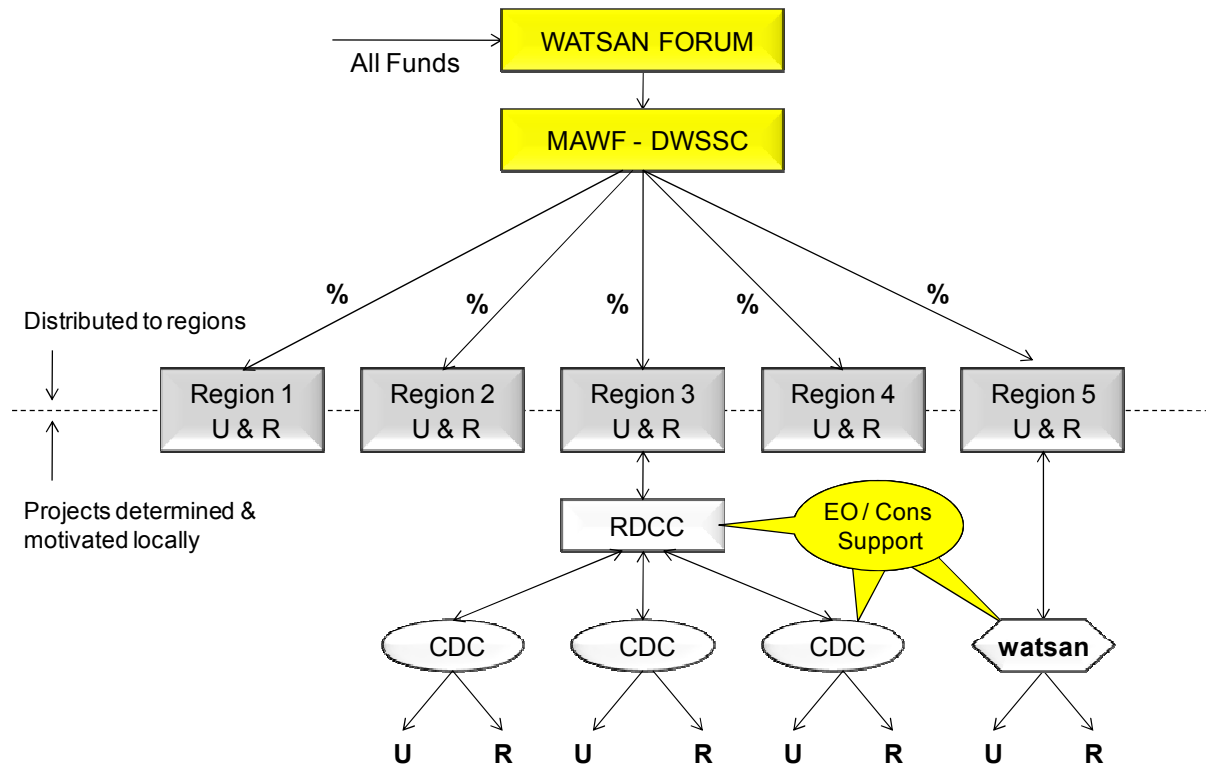


Figure 7: Sanitation delivery structure

4.3 Delivery Rate

Due to the critical importance of community participation and education up front, physical sanitation delivery / construction is expected to be slow initially but faster in years 4 and 5 of this strategic planning period. This is illustrated in **Figure 8**.

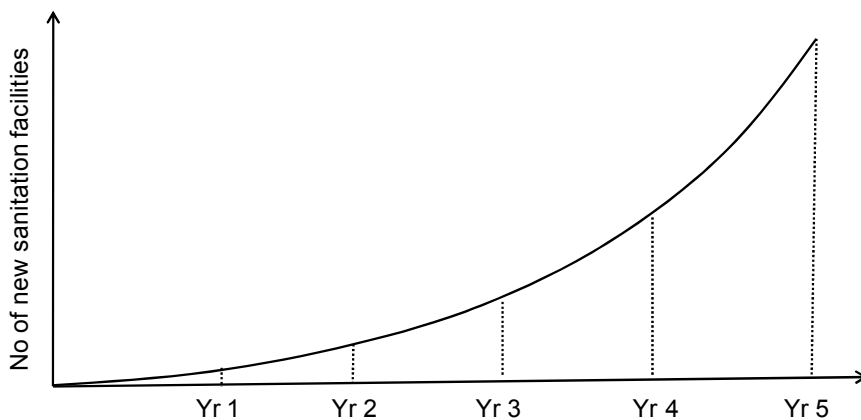


Figure 8: Increasing sanitation delivery

4.4 Sanitation Systems & Selection Criteria

WSASP clearly states that "communities should have the right, with due regard for environmental needs and the resources and information available, to determine which water and sanitation solutions and service levels are acceptable to them within the boundaries of the national guideline".

A range of sanitation systems for all - The range of sanitation systems currently used in country is quite limited and does not satisfy consumer's expectations and needs. More sanitation systems are tested by HDRC, but are not yet promoted.

Sanitation systems	Centralised systems	Individual Onsite systems
Wet systems	<ul style="list-style-type: none"> • Conventional waterborne sanitation system and treatment plants • Vacuum / small bore sewer system and treatment plants 	<ul style="list-style-type: none"> • Septic tanks and drains system
Dry systems	<ul style="list-style-type: none"> • <i>biogas systems</i> 	<ul style="list-style-type: none"> • Dry system (VIP pit toilet) • Ecosan toilet (Enviroloo, Otjitoilet, UDS) • <i>Composting toilets</i> • <i>Enviroflush-type system</i>

In bold: used in country; *in italic: tested by HRDC*

Table 2: Sanitation systems tested or in use in country

The range of technology options has to be expanded and information mechanisms have to be put in place to ensure that beneficiaries are approached and well informed. **Figure 9** identifies the different criteria for the selection of sanitation systems. These are grouped into 5 categories.

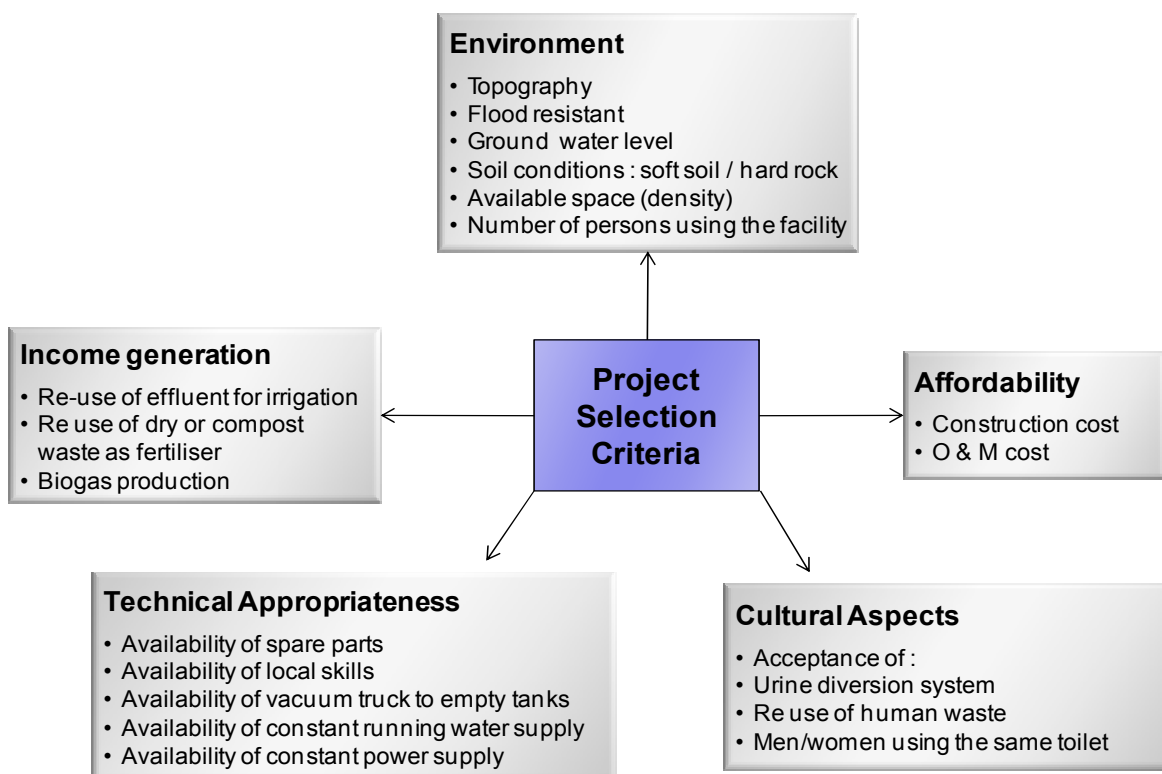


Figure 9: Selection criteria for technical solutions

The water and sanitation situation prevailing in the country is characterised by scarce water resources, poor access to running water in rural areas and large percentage of population living in vulnerable conditions in informal settlements *requires to accelerate research and development for the development of dry sanitation systems and affordable solutions for low income population* in order to facilitate access to sanitation for all and drastically reduce open defecation. Designers should consider that systems could be upgraded over time when income level increases.

Funds should be allocated to support the following axis of research and development:

- finalise testing of existing sanitation system currently in use in Namibia (specifically to evaluate the sanitary risks of sludge from dry systems) and develop technical documents,
- conduct R&D on low cost sanitation systems (use of local materials matching with the habitat), biogas production, excreta re use and water re use,
- develop systems for difficult environmental circumstances (flooded areas),
- test all new imported sanitation systems through pilot projects,
- design "grey water" disposal systems and hand washing systems

The development of technical guidelines for professionals and promotional guidelines/leaflets to inform beneficiaries on advantages and disadvantages, O&M including sludge management and cost for each system is a key component of hardware development.

Construction of sanitation facilities – public-private partnership

The involvement of local artisans trained on sanitation facilities construction and marketing (e.g. at the Sani Centre where slabs and seats are build by local artisans and sold to households) and the participation of communities in the construction of facilities should be encouraged to rapidly increase building capacity at community level, to create employment and satisfy the demand.

4.5 Subsidies and Tariffs

WSASP provides clear directions for sanitation sector financing:

- One major key objective is to achieve water supply and sanitation sector self-sufficiency. To reach this objective, full cost recovery is a prerequisite.
- For low income rural and urban areas, at least the O&M costs should be recovered with support from government subsidies or cross-subsidies amongst consumers (§ 2.5.3)
- In urban area and with the growing lower income urban target group in mind, efforts should also be aimed at making low cost solutions for urban sanitation more attractive along with the augmentation of existing sewerage capacities for those who can afford it (§ 2.5.1).
- For those who still cannot afford to pay, assistance should be given in a transparent manner by the authority responsible for social services (§ 2.5.1).

The MAWF is responsible to establish, in consultation with partners, transparent subsidies mechanisms and an equitable and harmonised tariff policy.

Full cost recovery means that users of both centralised systems and on site sanitation systems pay for construction, operation and maintenance costs. This implies that sanitation services costs are precisely identified and well known. Guidelines might be provided by government and services providers should have an analytical accountancy system in place (water and sanitation expenses should be separated). Enforcement and control systems should be put in place.

In case of centralised sanitation systems, capital cost can be advanced by government or banks but reimbursed by users through a sanitation tariff. In case of on site sanitation systems, owners pay directly to contractors and service providers; government plays a facilitator role.

A major goal of the sanitation strategy is to enable a large proportion of households to pay for capital cost. This should be achieved:

- if social mobilisation and sanitation and hygiene education are extensively conducted and if households recognise the importance of sanitation and decide to direct a small part of their revenue to the construction of sanitation facilities. Willingness to pay studies have to be

conducted to assess the amount of money, households are willing and able to invest in sanitation and hygiene.

- if a range of technology options covering different services levels and affordability by all is made available to the population and if, at LA level, comprehensive economical and environmental studies are conducted to identify the most appropriate and sustainable systems.
- If households are well informed and are given the chance to choose according to their financial capacity

Subsidies

For low income rural and urban areas at least the O&M costs should be paid by users.

This option implies that capital cost is subsidised through Taxes (government) or Transfers (donors) or Tariffs when cross subsidisation amongst users is in place. Except for the construction of shared facilities (dry or wet) in reception areas or informal settlements or emergency situation which have to be fully subsidised, in all other cases, and when families own (or lease) a plot of land, subsidies should represent only a percentage of the total cost of the construction. In line with WSASP, it is foreseen that sewerage systems will not be subsidised.

The implementation of targeted subsidies requires strict selection criteria, transparent subsidy allocation and control mechanisms and sufficient budget allocation for the whole implementation period. Subsidies should address a well defined objective which can be:

- Option 1: to encourage low income families to acquire their own toilet facility. Criteria used to identify beneficiary households are related to income level (e.g. the Build Together Programme and criteria for loan allocation).
- Option 2: to promote a specific type of sanitation system. The proposed option is to allocate subsidies for the construction of dry sanitation systems only. This option is in line with WSASP and addresses the specific need of low income population in urban and rural areas who does not have access to running water. Subsidy can be given in the form of material (slabs, seats, cement bags, etc.) to individual or to community group.
- Option 3: to support households living in difficult environmental conditions and for which the construction cost of toilets will be higher than the average "normal" cost. Again clear criteria have to be identified for the allocation of these subsidies.

For those who cannot pay, assistance should be given in a transparent manner by the authority responsible for social services.

Tariff structure

A Tariff concerns centralised sanitation systems. In line with WSASP, a sanitation tariff should be linked to the water consumption on the relevant property (and no more on flat rates). Transparent cross subsidy mechanisms among users should be established through block tariffs (rising fix charges or rising volumetric rates).

The proportion of the population able to pay all or part of capital cost is currently not known and should rapidly be estimated through willingness to pay studies¹ among different population groups. This proportion of population is expected to increase over time thanks to awareness campaigns and social mobilisation effects.

The following estimates are proposed for the calculation of the budget required to close the infrastructure gap by 2015:

- 30% of urban sanitation facilities will be connected to sewerage and will not receive subsidies
- 10% of urban sanitation facilities will be connected to sewerage and will be 100% subsidised (shared toilets in informal settlements)*

¹ The objective of willingness-to-pay studies is to find out people's willingness and ability to pay for different service-levels)

- 10% of urban sanitation facilities will be equipped with on site dry systems and will be 100% subsidised (shared toilets in informal settlements)*
- 50% of urban sanitation facilities will be equipped with on site dry systems and will receive 50% subsidies
- 100% of rural sanitation facilities will be equipped with dry sanitation systems and will receive 50% subsidies

* shared toilets among 4 families are not improved facilities but a temporary solution better than open defecation

Areas	Estimated number of facilities		Average Cost/connec tion N\$	Capital cost	Subsidy	Budget required N\$
Urban	15,750	Water borne sewerage and wet systems	20 000	315 000 000	No subsidy	0
	5,250	Waterborne shared toilets	20 000	105 000 000	100%	105 000 000
	5,250	On site shared toilets	6 000	31 500 000	100%	31 500 000
	26,250	Dry sanitation systems	6 000	157 500 000	50%	78 750 000
Rural	97,500	Dry sanitation systems	6 000	585 000 000	50%	292 500 000
Total	150,000			1 194 000 000		507 750 000

Table 3: Possible scenario considering subsidies

4.6 Schools sanitation

Clearing the sanitation backlog

According to the 2009 MOE report, 370 new sanitation facilities have to be built to clear the sanitation backlog in schools. The estimated number required by 2015 has to be assessed.

But, improving sanitation in schools does not refer to the construction of new facilities only it requires additional actions such as:

- to rehabilitated the existing facilities if needed
- to make sure the number of learners per toilet complies with national standard
- to make sure that boys and girls have access to separate toilets
- to provide hand washing facilities with water and soap
- to set up a sanitation facility cleaning system.

Addressing sanitation in school together with sanitation in communities

Use of schools, parent-teacher associations and children themselves, are powerful tools in promoting changed behaviours and greater awareness of hygiene issues.

Hygiene promotion and education courses are not sufficient to achieve behavioural changes. The development and piloting of initiatives such a Health Club or Healthy Schools where learners, teachers and parents are mobilised is a key component of the sanitation strategy.

5. STRATEGIC THEMES & OBJECTIVES

5.1 Strategic Themes

The Sanitation Sector, in order to achieve its vision, based on its mandate, key strategic issues and strategic response, has to perform in **6 Themes** (or Strategic Focus Areas). **Figure 10** on the following page illustrates the 4 BSC perspectives and 6 Themes.

Strategy maps describe a model of value creation through cause-and-effect linkages among the strategic objectives in the four Balanced Scorecard perspectives.

By using strategic themes as the building blocks of strategy maps, organisations can clarify their strategic message and simplify decision making, governance, and other strategy execution tasks.

A strategic theme is a subset of the overall strategy consisting of a distinct set of related strategic objectives. Themes provide clarity to the strategy by clustering a strategy map's multiple objectives into a number of value-creating components.

The sanitation sector believes that it will realise its vision when focusing on 6 Themes. These six themes comprise the main components of the balanced 'Sanitation House' as depicted in **Figure 10**. These six themes or building components to be put in place, starting from the bottom, are:

THEME A: WATSAN SECTOR COORDINATION

This theme includes the building of good relations and partnerships in the Water & Sanitation Sector and represents the required relational resources. It includes coordination at central/national and regional levels. This theme is part of the BSC perspective of "Learning and Growth" and could be regarded as the foundation of the sanitation strategy.

THEME B: INSTITUTIONAL CAPACITY BUILDING

In this theme capacity is built in central, regional and local government structure to properly manage sanitation. Capacity is built by putting the various resources in place, viz. human, physical, structural and monetary resources. This is part of the BSC perspectives of "Learning and Growth" as well as "Financial". This theme is built on the foundation of Theme A and could be regarded as the floor of the 'Sanitation House'.

THEME C: COMMUNITY EDUCATION & PARTICIPATION

This is one of three themes in the BSC perspective of "Internal Processes" and built on Themes A and B. Here the community is being educated in all hygiene and sanitation related aspects through effective community participation. This theme could be regarded as the bottom wall of the 'Sanitation House'.

THEME D: CONSTRUCTION

In this theme the physical development or construction of sanitation facilities and systems take place. It is also part of the BSC perspective of "Internal Processes". This theme could be regarded as the middle wall of the 'Sanitation House'.

THEME E: OPERATION & MAINTENANCE, PERFORMANCE MANAGEMENT & ENFORCEMENT

Built on Theme D, this is also part of the BSC perspective of "Internal Processes" and covers the proper operation and maintenance of sanitation facilities and systems as well as performance management and enforcement of all policies, legislation, regulations, standards, procedures and other requirements. This theme could be regarded as the top wall of the 'Sanitation House'.

THEME F: SOCIO-ECONOMIC-ENVIRONMENTAL OUTPUTS & OUTCOMES

This last strategic theme reflects the desired hygiene and sanitation outputs and outcomes. These are achieved as a result of performance in the foundation, floor and walls of the 'Sanitation House'. This "Customer or Citizen Perspective" includes the desired social, economic and environmental

outputs and outcomes/impacts the sanitation sector needs to make towards achieving its vision. This theme could be regarded as the roof of the 'Sanitation House'.

So the 'Sanitation House' consists of a foundation (Theme A), floor (Theme B), lower wall (Theme C), middle wall (Theme D), top wall (Theme E) and roof (Theme F). The hypothesis is that if these themes or house components are put in place, from bottom up, the 'Sanitation House' will be successful and sustainable, reaching the vision (sun). The relation between these six themes and the four traditional Balanced Scorecard (BSC) perspectives are shown on the left of the 'House'.

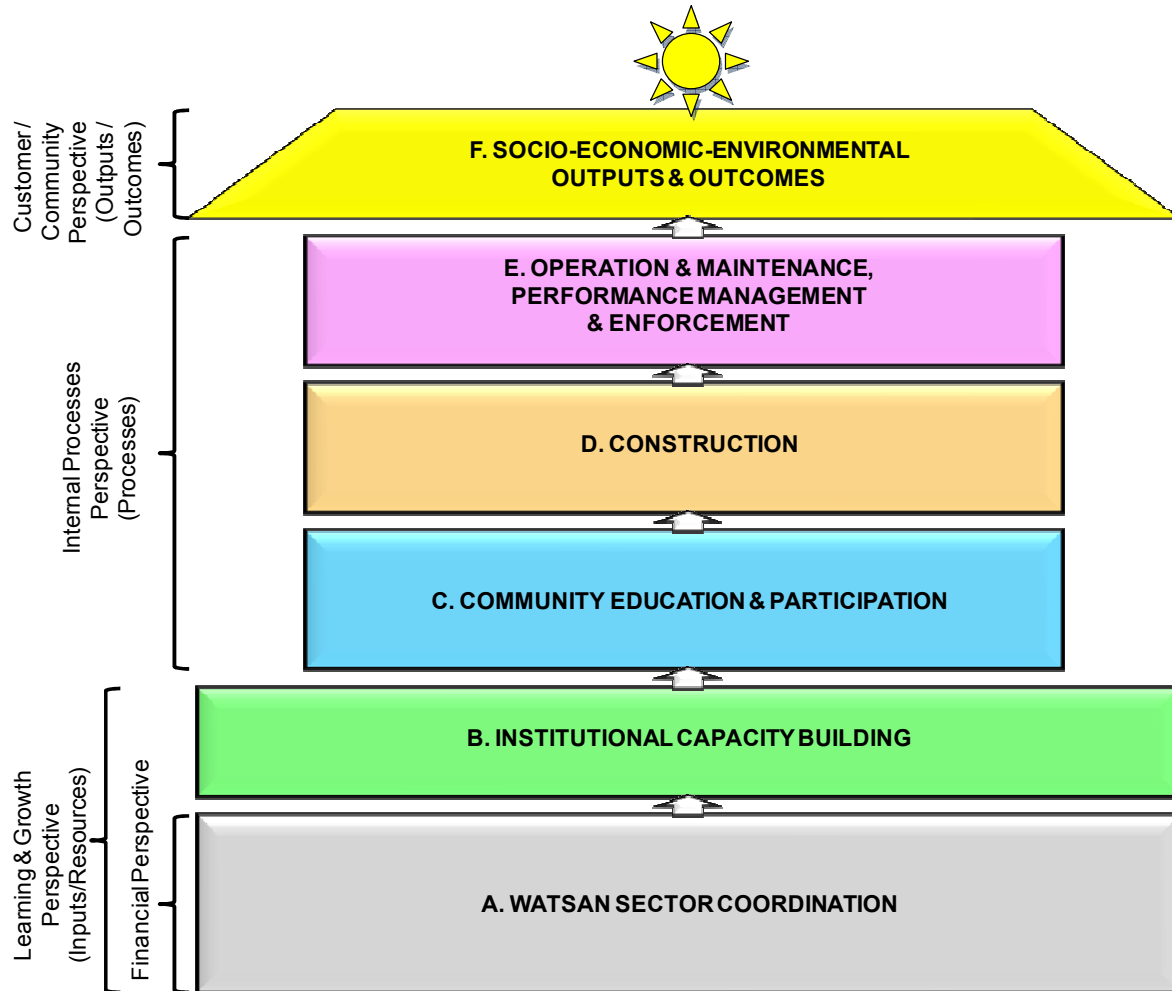


Figure 10: The 6 Strategic Focus Areas & 4 BSC Perspectives

5.2 Strategic Objectives per Theme

The strategic objectives are the essential building blocks or value creators in the six Themes. Where the Themes represented the main building components of the 'Sanitation House', the objectives can be regarded as the building blocks/bricks in each component or Theme. Objectives are often referred to as value drivers and are arranged in a lead-lag relationship in **Figure 11**, called the strategy map.

Twenty (20) strategic objectives were selected and are listed below. It is believed that all 20 building blocks are required and need to be put in place in the five year period to achieve a successful and sustainable 'Sanitation House' reaching its vision ('sun').

(Note that these objectives are made 'SMART' (Specific, Measurable, Agreed to, Realistic and Time-bound) in the scorecards through measures and targets.)

THEME A: WATSAN SECTOR COORDINATION

A1. Improved Coordination amongst all Sanitation Stakeholders at Central, Regional and Local Levels – including horizontal cooperation and coordination of all LMs on central level through the WSF, horizontal cooperation and coordination of all stakeholders on regional and local level, as well as the vertical coordination between national, regional and local levels.

A2. Legislative and Regulatory Frameworks Developed, Harmonised and Communicated – All laws and regulations related to sanitation (incl. water, health, environment and hygiene), based on gap analysis; regulations related to health and environmental protection are harmonised and developed and a transparent and equitable sanitation tariff and subsidy system is established.

A3. Developed Set of Technical Sanitation Guidelines, incl. Options with BoQs, Specifications, Standards, Application Areas and C,O,M Costs – These options (say 5-10 options) including the range of acceptable sanitation systems, from VIPs to WBSs. New improved sanitation systems are explored and a large range of options including grey water disposal facilities and hand washing facilities that match population needs and affordability is developed. Technical guidelines and comprehensive information documents are made available

A4. Appropriate Performance Management System and Structures in Place, based on Proper Baselines – a PMS based on this sanitation strategic plan (especially the scorecard), including all MERRIL elements (Measure, Evaluate, Report, Reward, Improve and Learn).

THEME B: INSTITUTIONAL CAPACITY BUILDING

B1. Strong Leadership Commitment and Support at Central, Regional and Local Levels – Committed political and executive leaders are required, with solid knowledge of hygiene and sanitation, approving and allocating required resources to the sector, acting as project champions and sponsors. Leaders are mobilised on sanitation issues through advocacy and effective information and communication.

B2. Sufficient and Competent Staff in Place at Central, Regional and Local Levels – Sufficient staff are appointed at all levels (based on a proper sanitation staffing needs assessment) and trained according to training needs assessments and HR development plans, specifically at DWSSC, MoHSS, MRLGHRD, RCs and LAs.

B3. Sufficient Physical Resources Provided at Central, Regional and Local Levels – including vehicles, offices, furniture, equipment, tools and materials, at all levels, based on needs assessments.

B4. Sufficient Sanitation Sector Funding – Sufficient and available funding for the execution of all initiatives in this sanitation strategic plan. Project proposals are developed, funding sources identified and funding allocated according to strict criteria

THEME C: COMMUNITY EDUCATION AND PARTICIPATION

C1. Effective and Integrated Community Awareness, Education and Training in Sanitation – This is the first building block in the *Internal Processes* perspective. Here the general public as well as project communities are educated and trained from basic to more detailed aspects in hygiene and sanitation. IEC materials are developed and community trained on sanitation and management issues.

C2. Effective Community Participation and Buy-in - Participatory methods for hygiene behaviour changes are developed and implemented. Beneficiaries are involved in project cycle management, from defining of needs to developing of sanitation solutions. This goes hand in hand with the previous objective. Community structures are consulted on a regular basis to reach agreement on the nature and extent of the sanitation gap and on the most appropriate sanitation solution(s) for each project area. Signed project contracts between the RCs/LAs and communities should demonstrate the required buy-in and commitment for action.

C3. Local Practical Skills in Construction, Operation and Maintenance of all Sanitation Facilities – training is targeted on the local project communities to transfer practical skills required during the whole project lifecycle. The focus is on the beneficiaries, with support to local contractors / artisans.

THEME D: CONSTRUCTION

D1. Maximum Use of Local Resources – built on Theme C, the locally identified resources (labour, contractors, suppliers, materials, etc.) can be maximised by planning and designing them into the projects.

D2. Improved Sanitation Coverage – the construction or physical development of sanitation facilities / systems countrywide in rural and urban areas - at residential, educational, health, commercial and other public sites, according to national standards and guidelines

D3. Improved Capacities, Conditions and Functioning of Water Borne Sewerage Systems – the many WBSs not properly functioning in the urban areas, improving the operation and maintenance of sewerage treatment works with their oxidation ponds. LA capacity for the selection, construction and proper management of waterborne sewerage and treatment plants are strengthened.

THEME E: OPERATION & MAINTENANCE, PERFORMANCE MANAGEMENT AND ENFORCEMENT

E1. Efficient Operation and Maintenance of all Sanitation Facilities, based on clear guidelines – New and existing sanitation systems need to be well operated and maintained, firstly by the beneficiaries and secondly by the RC/LA with contractor support.

E2. Functional Performance Management (MERRIL) – Measurement, Evaluation, Reporting, Rewarding, Improvement and Learning taking place on a continued basis, but formalised at least quarterly through the WSF, enabling the WSF to know the progress it is making towards achieving each objective and its overall vision.

E3. Enforcement of Standards and Regulations for Compliance – Legislation, regulations and required standards formulated and communicated are now enforced through regular and proper inspections. Resources are available to conduct these required inspections and to enforce compliance. All LMs, RCs and LAs have roles to play in monitoring and enforcement.

THEME F: SOCIO-ECONOMIC-ENVIRONMENTAL OUTPUTS AND OUTCOMES

Indicators are collected on regular basis to assess projects outputs and outcomes.

F1. Social Improvements – improved health and quality of life.

F2. Economic Improvements – improved job creation, income generation and cost recovery.

F3. Environmental Improvements – protection and improvement of the natural environment.

5.3 Strategy Map

The strategy map is a one page summary of the strategy, linking all objectives in the different themes. The Themes and Objectives are linked towards achieving the national sanitation vision as illustrated in **Figure 11**. The strategy map shows how the 20 objectives (or essential building blocks) are dependent on one another (leading and lagging value drivers and indicators) over the six different themes. This chain of causes and effects is created that is believed to lead to the desired outcome (a hypothesis). The strategy map is sometimes called a 'value creation map' or 'success map'.

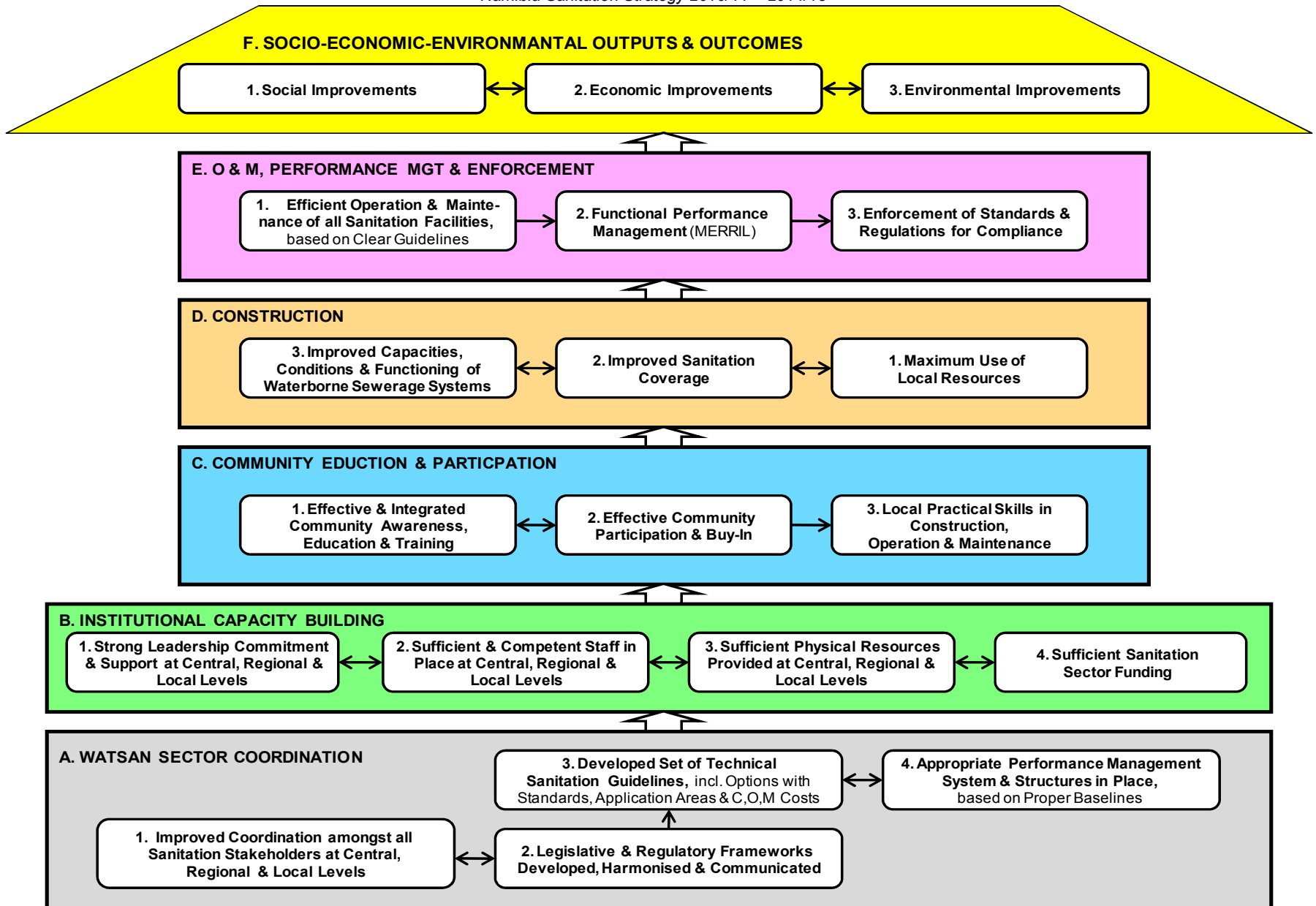


Figure 11: Sanitation Strategy Map 30

6. THE BALANCED SCORECARD

6.1 Balanced Scorecard Components

While the strategy map summarises the strategy, the scorecard takes the strategy map and gives it more detail. The scorecard (or balanced scorecard, as it contains all four perspectives) is therefore the detailed strategy. The Sanitation Scorecard includes the following:

- The 6 SFAs / Themes
- The 20 Objectives with their priorities and accountabilities
- Measures and Targets for each objective
- Initiatives (projects) with their priorities and responsibilities
- Cost estimates of all initiatives (expected total cost over the 5 year period)
- Scheduling of these initiatives over the 5 year period (Note that year 1 is 2010/11)

6.2 Measures and Targets

Performance measures will reflect progress against objectives. The measure and its target should be regarded as part of the objective, making it specific and measurable. A measure is an agreed indicator to be used to determine progress made, or the lack thereof, towards achieving each objective. Measures make objectives **SMART** – **S**pecific, **M**easurable, **A**greed to, **R**ealistic and **T**ime-bound. Measures could be classified in terms of **TCQQ** – **T**ime (date/duration/frequency), **C**ost (N\$), **Q**uality (Satisfaction index or %) and/or **Q**uantity (number or %).

A target is a quantifiable standard for each measure. Performance targets are the expected levels or standards of performance to be reached within specific timeframes for each objective. Targets have to be challenging and be raised over time, but to remain achievable. Initially targets may be estimated guesses, but over time these targets have to conform to best practices by comparing what are the benchmark targets in the industry. Industry refers to similar types of services offered by others in the region or globally.

It should be noted that the measures and targets in this strategic plan should be regarded as provisional, due to the limited information available at this stage.

These measures and targets should be revised and finalised during the first few months of implementation. In the scorecard the baseline (BL) reflects the current situation in 2009. Yr1, e.g., is the target at the end of year 1.

6.3 Initiatives and Project Management

Objectives are achieved through initiatives or projects. Initiatives are defined as current and future projects or activities to be executed to meet or exceed the performance targets, as stated in the measures and targets for each objective. Initiatives drive strategic performance. Initiatives are not ends in themselves, but means by which the Sanitation Sector will achieve its defined strategic objectives. Initiatives are where the action is and require resources: financial, human, structural, physical, etc.

An initiative is normally regarded as a project – a unique endeavour with a specific start and end date to create a specific benefit / to achieve a specific objective. Initiatives / projects need to be managed by means of **project management** principles, tools and techniques. Refer to the Project Management Body of Knowledge (PMBOK) from the Project Management Institute (www.pmi.org).

Initiatives included in this 5 year strategic plan are only the major key projects of strategic importance. The challenge was to **select** the right projects or best projects to achieve the strategic objectives. Initiatives are **prioritised**, because the Sanitation Sector, with its given capacity at any stage, can physically only handle so many projects at a time due to limited resources and the inter-dependencies of projects. The Sanitation Sector should apply its resources towards the highest value projects. A well-defined process for project selection and prioritisation is required to maximise the chances of projects contributing to the achievement of these strategic objectives. Criteria include strategic importance and project urgency.

Note that projects / initiatives are only identified / initiated in the scorecard / strategic plan. **Detailed project plans** have to be developed for many of these initiatives before they should be implemented. Business plans differ from project plans due to its income generation potential. Note that many related initiatives / projects could be combined in programmes – normally in the same objective and theme.

In the scorecard that follows, each initiative is being described in terms of:

- Its **priority** (1= very important and very urgent; 2= less important and could be delayed).
- Whether it is a **current / approved** (Yes) or **new** (No) project
- **Responsibility** – who is taking responsibility (Resp) to execute the project as project manager and what significant individuals / organisations need to support (Supp) the project manager. Note the distinction between objective ‘accountability’ and project ‘responsibility’.
- How the project will be executed and whether **procurement** of services and/or products is involved. S= Done by Self; J= Done Jointly with external party; O=Outsourced. This S/J/O directly influence the project cost.
- **Total estimated cost** per initiative. These are estimated project costs and are indicated in thousands. These cost estimates will have to be verified in future when project plans are developed. Note that some initiatives show zero costs in the total cost estimate column. This does not mean that a project is less important or without funding, but that an initiative is probably done internally (by ‘Self’) and that the operational budget should be sufficient to allow implementation. Note also that the initiatives in Theme F are mostly to measure and evaluate the results from actions / initiatives in the preceding Themes. This is why the costs of strategic initiatives in SFAs are minimal.

(Currently the Namibian public sector is used to the operational/recurrent budget, capital budget and NDP budget. The new **strategic budget** or strategy expenditure is now introduced. The strategic budget in this document has been defined as follows: The cost of the portfolio of all strategic initiatives (projects and programmes) in the strategic plan on top of the operational budget. It is separate to and excludes operational/recurrent costs, such as salaries and expenses to keep the business running, to maintain the status quo. The strategic budget is to fund strategic initiatives which will lift organisation to a higher performance level towards its vision. There is a close relation, but no overlap or duplication between the strategic and operational budgets. Normal salaries, e.g., should only appear in the operational budget. Additional human resources (for projects) could appear in the strategic budget. The strategic budget is the cost of all strategic initiatives, independent of the source of possible funding. Strategic initiatives could be funded by own sources, from GRN sources or external loans or grants. The strategic budget serves as reality check, to make the strategic plan realistic and implementable. Strategic Budget = Capital Budget + Non-capital strategic initiatives. Strategic initiatives are all of strategic importance to take the Sanitation Sector to a higher level. These initiatives can include infrastructure development, HR development (training) and improvement in business processes. With this definition some strategic projects/initiatives could have a zero cost, should it be done internally in the Ministry/RC/LA, as salaries are not included in the strategic budget, but only under the operational budget.

- Project **timing and duration** – The crosses indicate the financial year(s) in which the projects should be executed. The first year starts on 1 April 2010.

The Sanitation Balanced Scorecard:

THEME A: WATSAN SECTOR COORDINATION

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5		
<p>1. Improved Coordination amongst all Sanitation Stakeholders at all Levels</p> <p>based on clear roles and responsibilities at all levels</p> <p>based on good knowledge management</p> <p>incl. supporting organisational structures in DWSSC, LMs, RCs, LAs, etc.</p> <p>incl. central coordinated funding mechanism</p>	1	WSSC	a) Attendance at quarterly WATSAN Forums based on % of SHs required represented at meetings - WATSAN - watsans	BL = NA Yr1 = 80% Yr2 = 100% Yr 3 = 100% Yr 4 = 100% Yr 5 = 100%	1. Develop and adopt a ToR for the WATSAN Forum , with clear roles and responsibilities	1	Y	WSSC	WSF	S	10	X						
			b) % of institutions actively participating in central WATSAN & regional watsan forums - WATSAN - watsans	BL = 10 Yr1 = 15 Yr2 = 20 Yr 3 = 20 Yr 4 = 20 Yr 5 = 20	2. Set up and manage a WATSAN secretariat and helpdesk	1	N	WSSC	WSF	J	500	X	X	X	X	X		
			c) Effective collaboration as demonstrated by willingness, respect, trust, support, open & frequent communication, information & knowledge sharing & team building as measured by quarterly questionnaire	BL = NA Yr1 = 70% Yr2 = 80% Yr 3 = 90% Yr 4 = 90% Yr 5 = 90%	3. Properly preparing, managing and follow up of WATSAN meetings (incl. agendas, minutes, schedule of meetings, follow up decisions, submission of reports)	2	N	WSSC	WSF	S	100	X	X	X	X	X		
			d) Date SWAP / Sector MTEF sanitation funding mechanism in place and functional	April 2010	4. Strengthen RDCCs / Regional watsan Committees to have regular effective watsan meetings with good communication with WATSAN	1	N	MRL	RC LA	J	200	X	X	X	X	X		
			e) % of WATSAN resolutions implemented within the timeframe	BL =TBD Yr1 =80% Yr2 =90% Yr 3 =100% Yr 4 =100% Yr 5 =100%	5. Set up and manage supporting ICT and knowledge management system for good knowledge sharing and learning	1	N	WSSC	OPM	J	500	X	X	X	X	X		
					6. Make RDCC sanitation functions mandatory by including it in Decentralisation Enabling Act	1	N	MRL	WSF	S	0	X						
					7. Provide effective vertical links between central WATSAN and regional watsan committees through a standardised communication & reporting system	1	N	WSF	MRL RC LA	J	0	X	X	X	X	X		
					8. Develop and maintain a sanitation website similar to www.dwaf.gov.za	2	N	OPM	WSSC	O	500	X	X	X	X	X		
					9. Develop a Sanitation Sector MTEF funding mechanism based on the Sector-Wide Approach (SWAP) – coordinating sector wide funding from GRN, Donors, Private Sector and Civil Society and resource allocation	1	N	WSF	NPC WSSC	J	150	X						
					10. Train SHs in proper use of new central coordinated funding mechanism	2	N	WSSC		J	100		X	X	X	X		

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Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5			
2. Legislative & Regulatory Frameworks Developed, Harmonised & Communicated standards, tariffs, procedures national subsidy system	1	WSS C	a) No of legislation amended / harmonised	BL= TBD Y1= 2 Y2= 4 Y3= 8 Y4= 10 Y5= 12	1. Identify & analyse laws, policies etc. that are relevant to sanitation & determine aspects / gaps to be harmonised / improved b y means of working group and workshop	1	N	WSSC	HSS MRL MoJ	J	400	X							
						2. Make improvements according to identified needs in policies	1	Y	WSSC	All	J	600	X	X	X	X	X		
			b) No of regulations developed / amended	BL= TBD Y1= 2 Y2= 4 Y3= 8 Y4= 10 Y5= 12	3. Make improvements according to identified needs in legislation , e.g. Public Health Act. Incorporate sanitation into the Water Resources Management Act, and rename it if need be (Alternatively develop a new Sanitation Act)	1	Y	WSSC	MoJ	J	800	X	X	X	X	X			
			c) No of legislation and regulations communicated through awareness campaigns and other means of information dissemination in all regions	BL= TBD Y1= 10 Y2= 20 Y3= 40 Y4= 80 Y5=100	4. Make improvements according to identified needs in regulations , incl. regulations based on Water Act 2004 and improved Public Health Act	1	Y	WSSC	MRL RC LA	J	800	X	X	X	X	X			
						5. Make improvements according to identified needs in guidelines/ manuals/ procedures	1	N	WSSC	All	J	1000	X	X	X	X	X		
			d) Date subsidy system approved and operational	Nov 2010	6. Enact EMAA and put in place implementation instruments and structures	1	N	MET	MoJ		200	X	X						
						7. Agree upon an appropriate tariffs and subsidy system for water and sanitation	1	N	WSF	MRL RC LA	J	500	X	X					
						8. Determine appropriate communication media (radio, TV, leaflets, etc.), plan communication campaigns & conduct awareness campaigns on legislation, regulations, procedures & subsidy system, incl. one day information sessions with all RCs and LAs on policies, legislation and procedures	2	N	WSF	MRL RC LA	S	250	X	X	X	X	X		

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5	
3. Developed Set of Technical Sanitation Guidelines Manual incl. options with BoQ, standards, specifications, application areas, C,O,M costs & benefits with selection criteria	1	WSSC	a) No of technical options developed with detailed illustrations/drawings, & descriptions of Construction, O & M, Application areas, Costs, Benefits, etc. b) No of guidelines developed on technical options <i>The nine initial options to be developed under Initiative 3.4 are:</i> i. Conventional waterborne sanitation system ii. Vacuum / small bore sewer system iii. Biogas system iv. DEWATS modular system v. Septic tanks and drains system vi. Enviroflush-type system vii. Dry system (VIP pit toilet) viii. Ecosan toilet (Enviroloo, Otjitoilet, UDS) ix. Composting toilets	BL= 0 Y1= 9 Y2= 10 Y3= 11 Y4= 12 Y5= 13 BL= 0 Y1= 3 Y2= 4 Y3= 5 Y4= 5 Y5= 5	1. Investigate appropriate ‘improved’ sanitation technologies through site visits, PoN, web sites and available literature and prepare a 5 year R&D plan	1	N	HRDC	WSSC Cons	J	200	X					
					2. Do research & development according to the approved 5 year R&D Plan	1	N	HRDC	WSSC Cons	J	400		X	X	X	X	
					3. Advertise / invite suppliers and contractors to express their interests for participating in providing sanitation products / systems	2	N	HRDC	WSF	S	200	X					
					4. Develop and improve user friendly guidelines / manuals (for RCs, LAs, Communities) on selected appropriate technologies, incl. BoQ, specifications, minimum standards, application areas, construction, operation and maintenance consideration, costs & benefits, based on affordability levels and subsidy system; with clear criteria for the selection of these technical sanitation options.	1	N	HRDC	WSSC Cons	O	1000	X	X				
					5. Develop guidelines for the construction of sanitation facilities in difficult circumstances (collapsible sand, rock, high ground water table, etc)	1	N	HRDC	WSSC Cons	O	200	X	X	X	X	X	
					6. Develop code of practices for dry sanitation systems for professionals (similar to the ones developed by DRM)	1	N	HRDC	All	J	50	X					
					7. Disseminate manuals/guidelines to all stakeholders	2	N	WSF	WSSC RC LA	S	50	X	X	X	X	X	
					8. Get regular feedback from all stakeholders and improve annually or when needed	2	N	WSF	WSSC RC LA	S	10		X	X	X	X	
					9. Test new technologies (at HRDC and in communities) proposed by manufacturers and give approval for use in country	1	Y	HRDC	All	J	100	X	X	X	X	X	

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Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5			
4. Appropriate Performance Management System & Structures in Place for sanitation strategy execution based on proper baselines PMS incl. Measure, Evaluate, Report, Reward, Improve & Learn (MERRIL)	1	WSSC	a) % of Baselines (BLs) accurately determined	BL= TBD Y1= 75% Y2= 85% Y3= 100% Y4= 100% Y5= 100%	1. Determine / Improve all baselines in this strategic plan; Improve measures and targets, based on baseline studies	1	N	WSSC	All	J	100	X	X						
					2. Define method of calculating NDP3 indicators and collect them through national census and surveys	2	Y	NPC	WSSC	J	0	X	X	X	X	X			
					3. Harmonise EMIS (education statistics) indicators	2	N	MOE	WSSC	S	0	X							
					b) Date Sanitation PMS/MERRIL System approved & launched	Nov 2010	4. Harmonise Health Information Systems	2	N	HSS	WSSC	S	0	X					
					c) Percentage of MERRIL System competent people in all structures	BL= TBD Y1= 60% Y2= 80% Y3= 100% Y4= 100% Y5= 100%	5. Agree on performance management system to be used in execution of this sanitation strategic plan	1	N	WSSC	All	J	0	X					
							6. Develop and approve an appropriate sanitation PMS (MERRIL) system; incl. updating of the strategic plan when needed (Objectives, Measures, Targets, Initiatives, Responsibilities, etc.).	1	N	WSF	WSSC Cons	J	300	X	X				
							7. Put structures, systems and people in place to implement the Sanitation PMS; Ensure dedicated staff and time available for the inspections, monitoring, reporting, capturing and updating the scorecards and completion of monthly objective Reports; put in place enforcement structures and systems	1	N	WSSC	LM RC LA Cons	J	1000	X	X	X	X	X	
							8. Train people in all structures to implement the Sanitation PMS. Include aspects of attitude and behavioral change / change management	1	N	WSSC	LM RC LA Cons	J	1000	X	X	X	X	X	

THEME B: INSTITUTIONAL CAPACITY BUILDING

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5		
1. Strong Leadership Commitment & Support as shown by available resources and action at Central, Regional and Local Levels	1	WSS C	a) No of national/ regional/ local seminars / meetings/ workshops focusing on sanitation	BL= NA Y1= 13 Y2= 26 Y3= 39 Y4= 52 Y5= 65	1. Organise 1 national and 13 regional sanitation strategy launching seminars/workshops	1	N	WSSC	MRL RC LA	J	150	X						
			b) Percentage of RCs & LAs regularly submitting sanitation progress reports	BL=TBD Y1= 75% Y2= 90% Y3= 100% Y4= 100% Y5= 100%	2. Organise one-day sensitisation workshops for regional leaders/LAs	1	N	WSSC	MRL RC LA	S	100	X	X	X	X	X		
			c) Percentage of RCs and LAs where sanitation activities or projects are undertaken	BL= NA Y1=50% Y2=60% Y3=70% Y4=80% Y5=90%	3. Train TAs, RC and LA leaders in sanitation (technical, administrative, financial, health, community participation, etc.) and sanitation performance management	2	N	WSSC	MRL RC LA	J	1000	X	X	X	X	X		
			d) Attendance of Joint Annual WATSAN review meeting in June every year - attended by all leadership	BL= 10% Y1= 70% Y2= 90% Y3= 90% Y4= Y5=	4. Train TAs, RC and LA leaders in participating and communicating with CDCs and RDCCs	1	N	MRL	RC LA Cons	J	1000	X	X	X	X	X		
								5. Train TAs, RC and LA leaders in Project Management and Performance Management	1	Y	WSSC	Cons	O	1000	X	X	X	X

Objective	Pt	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5					
2. Sufficient and Competent Staff at all Levels skilled in sanitation related areas at central, regional and local levels incl. technical, financial, administration, project management (incl. contract mgt) and PMS	1	WSSC	a) Percentage of sanitation positions filled at all levels and all regions MAWF MRLGHRD MoHSS RCs LAs b) Percentage of all institution staff appropriately trained in sanitation, according to HRDP, incl. extension and maintenance staff MAWF MRLGHRD MoHSS RCs LAs	BL= 60% Y1= 60% Y2= 80% Y3= 90% Y4= 100% Y5= 100% BL= 0 Y1= 60% Y2= 80% Y3= 100% Y4= 100% Y5= 100%	1. Do sanitation staffing & training needs assessment (TNA) at central, regional and local levels	1	N	WSSC	All	J	300	X									
					2. Develop a Staffing Plan and HRDP , based on TNA for central, regional and local levels (and based on new DWSSC structure)	1	N	WSSC	All	J	300	X									
					3. Appoint DWSSC staff (Mgt, sanitation experts and EOs) according staffing plan (part of operational budget)	1	N	WSSC	All	S	0	X	X	X	X	X					
					4. Appoint MoHSS staff (Mgt, sanitation experts and EHPs) according staffing plan – say average 8 EHPs per region (part of operational budget)	1	N	HSS	All	S	0	X	X	X	X	X					
					5. Appoint MET staff (Mgt and EHIs) according staffing plan (part of operational budget)	1	N	MET	All	S	0	X	X	X	X	X					
					6. Appoint MRLGH staff (Mgt, sanitation experts and EHPs) according staffing plan (part of operational budget)	1	N	MRL	All	S	0	X	X	X	X	X					
					7. Appoint RC and LA health/sanitation staff according staffing plan (part of operational budget)	1	N	RC LA	All	S	0	X	X	X	X	X					
					8. Develop a sanitation curriculum / training programmes based on developed options; covering hygiene, participatory approaches, C,O,M, technical, chemical, biological, financial and admin aspects - for central, regional and local levels – basic and advanced; obtain NQA certification of courses	1	N	HRDC	WSSC HSS MRL MET MoE	O	2000	X	X								
					9. Appoint trainers from e.g. existing training institutions and consultants to train staff according to the sanitation curriculum (link with the MRLGHRD Skills Development Centres to be developed in 12 regions if available)	2	N	MRL	MoE	J	200	X	X								
					10. Set up informal training institutions by integrating sanitation training with internal training sections in LMs; also	2	N	LMs	HRDC	J	50	X	X								

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				based on the developed curriculum														
				11. Train Mgt and EOs in MAWF/DWSSC in sanitation and hygiene related matters, according to the HRD plan	1	N	WSSC	HRDC Cons	J	20000	X	X	X	X	X			
				12. Train Mgt and staff in MRLGHRD in sanitation and hygiene related matters, according to the HRD plan	1	N	MRL	HRDC Cons	J	5000	X	X	X	X	X			
				13. Train Mgt and EHPs in MoHSS in sanitation and hygiene related matters, according to the HRD plan	1	N	HSS	HRDC Cons	J	25000	X	X	X	X	X			
				14. Train Mgt and EHIs in MET on sanitation aspects, according to the HRD plan	1	N	MET	HRDC Cons	J	5000	X	X	X	X	X			
				15. Train Mgt and staff at RCs and LAs on sanitation and hygiene aspects, according to the HRD plans	1	N	MET	HRDC Cons	J	25000	X	X	X	X	X			
				16. Educate and train School principles and teachers on hygiene and sanitation – to enable them to educate learners	1	N	MoE	HSS	J	1000	X	X	X	X	X			
				17. Train Trainers (ToT) to train at regional training centres	1	N	All	WSSC	J	1000	X	X	X	X	X			
				18. Offer scholarships / bursaries for formal studies regionally and abroad (incl. B and M degree levels for staff at WSSC, HSS an MRL)	2	N	WSF	WSSC HSS MRL	S	1000	X	X	X	X	X			
				19. Liase with donors / development partners (e.g. GTZ) for training	2	N	WSF	WSSC	S	0	X	X	X	X	X			
				20. Train staff in project management and performance management (PMS / MERRIL)	1	N	WSSC	OPM Cons	O	1000	X	X	X	X	X			
				21. Develop individual performance agreements (PAs) and do bi-annual performance assessments according to the GRN PMS (part of normal management duties, supported by OPM)	2	N	LMs	OPM Cons	J	0		X	X	X	X			

Objective	Pt	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
3. Sufficient Physical Resources at all Levels sanitation related equipment, materials, vehicles, etc at central, regional and local levels	1	WSSC	a) Percentage of offices / staff equipped (tools. Materials, equipment) according to plan – at central, regional and local levels b) Percentage of offices / staff with sufficient transport – at central, regional and local levels	BL = 0 Y1=70% Y2=90% Y3=100% Y4=100% Y5=100% BL = 0 Y1=70% Y2=90% Y3=100% Y4=100% Y5=100%	1. Do needs assessment of equipment, materials and vehicles, etc at central, regional and local levels for proper sanitation service delivery	1	N	WSF	All Cons	O	300	X				
					2. Reach agreement with LMs, RCs and LAs to assist / make available / share vehicles, plant, equipment, tools, etc.; assist with bulk purchases of sheets, steel, cement, etc.	2	N	RC LA	MRL	J	0	X	X	X	X	X
					3. Assess all institutions (public and private) doing water and sanitation tests, e.g. UNAM, Neudam & NamWater where pathogens are tested; develop a plan for laboratory use – locally and in South Africa	1	N	WSSC	Cons	J	150	X				
					4. Develop / equip local laboratories	2	N	WSSC	WSF	J	1000		X	X	X	X
					5. Prepare physical resources procurement plan	1	N	WSSC	WSF	O	200	X				
					6. Prepare physical resources maintenance plans	1	N	WSSC	WSF	O	200	X				
					7. Procure physical resources according to plan, considering vehicles, offices, furniture, notice boards, graphic tables and ICT for EOs and EHPs, jack hammers, generators, sampling equipment, spades, wheel barrows, hose pipes, cements and bricks)	2	N	WSSC	LM RC LA	J	25000		X	X	X	X
					8. Ensure all office equipment are fully functional through proper operation and maintenance	2	N		WSF wsf	J	2000		X	X	X	X
					9. Ensure sufficient vehicles available & fully operational for extension officers and other staff (fleets in all regions)	2	N	LM	WSF	J	4000		X	X	X	X

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Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
4. Sufficient Sanitation Sector Funding linked to NPC, NDPs	1	WSS C	a) Percentage of funding availability compared to strategic budget requirements	BL = TBD Y1= 70% Y2= 80% Y3= 90% Y4= 90% Y5= 90%	1. Ensure proper project plans are developed and presented for all sanitation projects in this strategic plan	1	N	WSSC	LM RC LA Cons	J	6000	X	X	X	X	X
			b) Sufficiency of O&M budget allocation in terms of % (O&M) / C on all types of sanitation systems	BL: TBD Yr1= 40% Yr2= 40% Yr3= 40% Yr4= 40% Yr5= 40%	2. Obtain funding for strategic initiatives	1	Y	WSF	All	J	0	X	X	X	X	X
			c) Percentage of national GRN funds & Donor/Development Partner funds allocated to the sanitation sector	BL = 0 Y1= 10% Y2=10% Y3=10% Y4=10% Y5=10%	3. WATSAN forum allocates the funds according to clear evaluation and selection criteria to the regions	1	N	WSF		J	0	X	X	X	X	X
			d) Percentage of national GRN funds & Donor/Development Partner funds correctly spent in sanitation sector according to plan	BL = TBD Y1= 90% Y2= 90% Y3= 90% Y4= 90% Y5= 90%	4. Regions allocate funds to projects in region	1	N	RC	RDCC	J	0	X	X	X	X	X
								5. Monitor, control & report on expenditure of all funds	2	N	WSF	All	J	0	X	X

THEME C: COMMUNITY EDUCATION & PARTICIPATION

Objective	Pf	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5			
<p>1. Effective & Integrated Awareness, Education & Training</p> <p>Based on sanitation IEC materials in local languages</p> <p>General hygiene / health / sanitation / environment / habitat awareness and education for behavioural change</p> <p>as well as project specific training, covering legal, policy, technical & financial and management aspects</p>	1	WSS C	a) No of new IEC materials (incl. Hygiene & Sanitation) developed or existing materials updated / reviewed and disseminated	BL= TBD Y1= Y2= Y3= Y4= Y5=	1. Agree on IEC approach and methodology (incl. communication channels and venues); agree on themes and content (risk practices) for all types of awareness & education campaigns, based on wide stakeholder/ community consultations, incl. media	1	N	WSF	HSS WSSC	J	100	X							
			b) No of languages included in IEC materials	BL= TBD Y1= Y2= Y3= Y4= Y5=	2. Develop general IEC materials, incl. all media, e.g. pamphlets, posters, radio and TV programmes, booklets and manuals (tech & health); Translate IEC materials in local languages (considering illiterate communities)	1	N	HSS	WSSC Cons	J	5000	X	X	X	X	X			
			c) Percentage of total population reached with general awareness and education campaigns	BL= NA Y1= 70% Y2= 75% Y3= 80% Y4= 85% Y5= 90%	3. Develop project specific technical IEC materials, incl. drawings, pamphlets, booklets and step-by-step manuals on C.O.M (combined or separately coordinated technical & health) based on options developed in Objective A3; translate IEC materials in local languages; incl. adaption of existing manuals	1	N	WSSC	HSS Priv Cons	J	1000	X	X						
			d) Percentage of project communities reached with project specific sanitation training, incl. sation system options	BL= NA Y1= 80% Y2= 100% Y3= 100% Y4= 100% Y5= 100%	4. Develop evaluation criteria for all awareness & education campaigns	1	N	WSSC	WSF	J	0	X							
					5. Pilot IEC materials in say two regions and test success based on agreed upon evaluation criteria	1	N	WSSC	HSS	J	100		X						
					6. Disseminate & launch IEC materials nationwide	1	N	WSSC	HSS	J	100		X						
					7. Do continual performance assessments and improve IEC materials as and when required (costs included in other initiatives)	2	N	WSSC	HSS		0		X	X	X	X	X		
					8. EOs & EHPs train community mobilisers/CSHVs in the local communities for training of local communities in hygiene and sanitation (ToT)	1	N	WSSC HSS	RC LA	J	1000	X	X	X	X	X			

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				9. Train RDCCs and CDCs in Sanitation and participatory approaches	1	N	WSSC	MRL RC LA	J	1000	X	X	X	X	X
				10. Plan and conduct awareness & education campaigns in health and hygiene – can be national and/or focused in specific regions, schools and health centres.	1	N	HSS	WSSC RC LA	J	10000	X	X	X	X	X
				11. Train project communities in technical & financial sanitation matters , incl. general sanitation options, systems, construction, operation, maintenance and financial considerations	1	N	WSSC	HSS RC LA	J	10000	X	X	X	X	X
				12. Establish an Exhibition Site - one structure of each sanitation type / option for awareness raising	2	N	WSSC	RC LA	J	800	X	X			
				13. Do regular KAP surveys to determine success and sustainability of education and training; monitor and evaluate responses to campaigns / training sessions and respond with continuous improvement	1	N	WSSC	HSS RC LA	J	400		X	X	X	X

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5	
2. Effective Community Participation & Buy-in based on an agreed upon standard community participation approach for participation in problem definition, solution selection and planning to reach agreements on affordable & community accepted sanitation systems based on local tariffs and national subsidy system	1	WSS C	a) Extent to which at least 2 people per community (man and woman) in all target communities are trained in the participatory methodology b) Percentage representation at regional / local watsan meetings / CDCs / RDCCs c) Percentage community representation at project meetings d) Number of project contracts signed e) Percentage of sanitation projects complying to all selection criteria for the selected sanitation system (incl. affordability)	BL= NA Y1= 70% Y2= 85% Y3= 100% Y4= 100% Y5= 100% BL= NA Y1= 100% Y2= 100% Y3= 100% Y4= 100% Y5= 100% BL= TBD Y1= 70% Y2= 80% Y3= 90% Y4= 90% Y5= 90% BL= TBD Y1= 5 Y2= 10 Y3= 20 Y4= 40 Y5= 60 BL= NA Y1= 70% Y2= 80% Y3= 90% Y4= 90% Y5= 90%	1. Assess existing participatory approaches used in Namibia for hygiene behavioral changes; agree on a common approach	1		WSSC	HSS Cons	J	100	X					
					2. Develop participatory guidelines and IEC tools for rural and urban areas (design and languages for local context)	1		WSSC	HSS Cons	O	300	X					
					3. Pilot new approach for Namibia (e.g. CLTS or PHAST already used) & test the set of participatory tools Should come before developing the participatory approach (2)	2		WSSC	HSS Cons	J	150	X					
					4. Develop a guideline for conducting KAP surveys			WSSC	HSS Cons	O	100	X					
					5. Communities select CSHVs based on clear selection criteria (one man and one woman) as Community Hygiene Volunteers to spread messages and to act as a relay with EO; Support CHVs with transport & administration (say N\$100/m)	1		Com EO	RC LA	S	0	X	X	X	X	X	
					6. Train local community leaders / members in participation approaches; train CHV on baseline data, health and hygiene participatory tools, progress monitoring	1		HSS	WSSC	J	1000	X	X	X	X	X	
					7. Set up / strengthen community structures , train community volunteers, hold regular and participating project meetings and implement projects in Urban areas - according to guidelines; work with SDFN, BTC and other local structures	1		MRL	LA EO EHP	J	500	X	X	X	X	X	
					8. Set up / strengthen community structures , train community volunteers, hold regular and participating project meetings and implement projects in Rural areas - according to guidelines	1		MRL	RC EO EHP	J	500	X	X	X	X	X	

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				9. Conduct surveys in the local communities to establish local coverage, KAP, environmental & socio-economic baselines & report /present survey results to all stakeholders - demographics, affordability levels, perceptions, preferences, etc.	1	N	WSSC	RC LA	J	1000	X	X	X	X	X
				10. Regularly meet with project communities/committees to reach agreement on the sanitation gap and local sanitation issues & discuss various technical options/solutions with the help of supporting IEC materials; use criteria to evaluate all options / systems	1	N	Com RC LA EO EHP	WSSC Cons	J	0	X	X	X	X	X
				11. Design pro forma project contract documents to be amended and used for all sanitation projects		N	WSF	MoJ Cons		50	X				
				12. Reach agreement on the most appropriate local sanitation system ; assist communities to make wisely select the most appropriate sanitation system, based on clearly understood selection criteria	1	N	Com EO	WSSC	J	0	X	X	X	X	X
				13. Sign project contracts – RC/LA and project committee agree & sign contract in which the project scope , time, cost and responsibilities are clearly described	1	N	Com EO	WSSC RC LA	J	250	X	X	X	X	X

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Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
3. Local Practical Skills in Construction, Operation & Maintenance of all Sanitation Facilities Mostly in rural areas Good community & contractor understanding of various technical options and their Construction, Operation & Maintenance (C,O,M)	1	WSS C	a) Availability of local skills (C,O,M) amongst communities compared to required skills (community members and contractors) b) No of local (indigenous) SMEs trained in C,O,M aspects of sanitation	BL= TBD Y1= 70% Y2= 80% Y3= 90% Y4= 100% Y5= 100% BL= TBD Y1= Y2= Y3= Y4= Y5=	1. Identify all local entrepreneurs / SMEs who could get involved in sanitation projects; develop local skills registers per region and LA of all contractors in Sanitation C,O,M categories	1	N	RDCC CDC EO	RC LA HRDC	J	0	X	X	X	X	X
					2. Identify all institutions doing related training in C,O,M in Namibia; approach them and sign partnerships	1	N	HRDC	WSF	O	150	X				
					3. Equip / train (ToT) local staff and/or community members in C,O,M skills to train local contractors – step by step C,O,M	1	N	RC LA	Priv Cons	J	1000	X	X	X	X	X
					4. Pilot the selected option(s) locally for practical measurement, evaluation, learning, improvement and final selection	2	N	RC LA	WSSC	J	500	X	X	X	X	X
					5. Local trainers train contractors (incl. beneficiaries) in C,O,M, incl. marketing, financial and administrative aspects; Test, monitor and evaluate contractor knowledge and skills before and after training – step by step C,O,M	1	N	RC LA	Priv	J	1000	X	X	X	X	X
					6. Annually test, monitor and evaluate national sanitation C,O,M training material, methods and share lessons learnt and improve continuously	2	N	HRDC	WSF	J	250	X	X	X	X	X

THEME D: CONSTRUCTION / PHYSICAL DEVELOPMENT

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
1. Maximum Use of Local Resources Expertise, Manufacturers, Contractors, Labourers, Materials, Tools, etc.	1	WSS C	a) No of local contractors/ entrepreneurs used in C,O,M	BL= TBD Y1= Y2= Y3= Y4= Y5=	1. Do physical survey of project environment and assess all locally available natural resources for appropriateness, based on project scope and requirements	1	N	RC LA	WSSC Cons	J	1000	X	X	X	X	X
			b) Percentage of local natural resources used in construction of sanitation systems	BL= TBD Y1= 70% Y2= Y3= Y4= Y5=	2. Based on contractor registers, consult and evaluate all contractors for appropriateness, based on project scope and requirements	1	N	RC LA	WSSC Cons	J	0	X	X	X	X	X
			c) Percentage of total sanitation project funds paid to local contractors	BL= TBD Y1= 50% Y2= Y3= Y4= Y5=	3. Present findings of locally available resources to the local structures (RC / LA / RDCC / CDC) & reach agreement on procurement of local resources	1	N	RC LA	WSSC Cons	J	0	X	X	X	X	X
			4. Train RC / LA / Communities in optimal use of local resources	1	N	Priv Cons Cont	WSF	J	1000	X	X	X	X	X		
			5. Include selected local resources in the project plan	1	N	RC LA	WSSC Cons	J	0	X	X	X	X	X		
			6. Put systems / measures in place to ensure efficient use of local resources	1	N	RC LA	WSSC Cons	J	0	X	X	X	X	X		

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5				
<p>2. Improved Sanitation Coverage</p> <p>Coverage as defined by MDGs</p> <p>The appropriate and selected sanitation systems are constructed</p> <p>For residential households and institutions such as schools and border posts</p> <p><i>Considering beneficiary contribution, mostly in labour of 20% of total cost:</i></p> <p>MDG Urban: With cost per unit = N\$20,00, the cost for 52,500 units = N\$1.05b (full subsidy)</p> <p>MDG Rural: With cost per unit = N\$6,000, the cost for 97,500 units = N\$585m (full subsidy)</p>	1	WSSC	a) Number of urban households with access to improved sanitation (urban access 71.1% in 2012)	BL= 0 Yr1=4000 Yr2=10000 Yr3=19000 Yr4=33000 Yr5=52500	1. Carry out feasibility & viability studies on the selected sanitation system(s) for urban and rural areas	1	N	WSSC	All	J	100	X	X	X	X	X				
			2. Do local demand analysis Regional (Urban & Rural) Technological Population Density Individual Spot Analysis	2	N	RC LA	WSSC LM	J	260	X										
			b) Number of rural households with access to improved sanitation (rural access 35% in 2012)	BL= 0 Yr1= 8000 Yr2= 20000 Yr3= 38000 Yr4= 62000 Yr5= 97500	3. Do EIAs and develop Environmental Management Plans before project implementation – for improved decision making and better management of natural resources	1	Y	MET	DRM	J	0	X	X	X	X	X	X	X	X	
			c) Percentage of public institutions with proper sanitation facilities (incl. schools, border posts, clinics, shops and service stations)	BL= TBD Yr1= 50% Yr2= 60% Yr3= 70% Yr4= 80% Yr5= 90%	4. Assist RCs and LAs with procurement / tender process	1	N	MRL	WSSC	S	0	X	X	X	X	X	X	X	X	
			(NDP3 & MDG: 62% of population to have access to adequate and safe sanitation in 2015)	5. MoHSS educational pilot project – waterless sanitation technology, based on Botswana sanitation: construction, evaluation and reporting of 25 units in Omaheke, Oshana, Caprivi, Kunene and Omusati (rural areas)	1	Y	HSS	RCs	J	1000	1	0	0	0						
				6. MRLGHRD educational pilot project – VIPs in 5 regions (rural areas)	1	Y	MRL	RCs	J	165	1	0	0	6	5					
				7. Develop rural sanitation facilities (various projects to be determined by RCs)	1	Y	WSSC	RCs	J	550000	7	0	9	0	1	3	0	1	2	14
				8. Service plots in urban areas (with water, sewerage, roads, etc): Bukalo, Katima Mulilo, Omaruru, Rehoboth, Assenkehr, Bethanie, Koes, Tses, Divundu, Kamanjab, Otuzemba, Eenhana, Okongo, Okahao, Eheke, Uukwangula, Omuthiyagwiipundi, etc.	1	Y	MRL	LAs	J	430000	6	5	7	5	8	5	9	5	11	0
				9. Construct sewerage networks at: Karasburg, Ariamsvlei, Aus, Warmbad, Noordoewer, Keetmanshoop, Outjo informal, Fransfontein, Okangwati, Omitara, Okalongo, Ones, etc.	1	Y	MRL	LAs	J	375000	5	0	5	5	7	5	8	5	11	0

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				10. Remove bucket systems in urban areas: Gibeon, Kalkrand, Aroab, Berseba	1	Y	MRL	NPC	J	20	X				
				11. Construct 6000 VIPs at schools and clinics in rural areas (single @ N\$2000 and block of 6 @N\$80,000)	1	Y	HSS MOE	Unicef WSSC	J	5000	X	X	X	X	X
				12. Construct new/improved sanitation facilities at schools in urban areas	1	Y	MoE		J	5000	X	X	X	X	X
				13. Construct new/improved sanitation systems / units at clinics / hospitals	1	Y	HSS		J	5000	X	X	X	X	X
				14. Construct new/improved sanitation systems / units at border posts	1	Y	MWT		J	5000	X	X	X	X	X
				15. Construct new/improved sanitation systems / units at other public GRN facilities	1	Y	MWT		J	5000	X	X	X	X	X
				16. Improved sanitation facilities at all National Parks	1	Y	MET		J	5000	X	X	X	X	X
				17. Ensure construction of new/improved sanitation systems / units at private public facilities , e.g. shops, service stations & shebeens / cuca shops	1	Y	LMs	RCs LAs	J	500	X	X	X	X	X
				18. Ensure good project/contract management through proper and regular inspections, quality control & financial management, incl. proper commissioning/handover and after sales service	2	Y	RC LA	MRL WSSC	J	500	X	X	X	X	X

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
3. Improved Capacities, Conditions & Functioning of WBS Systems Mostly oxidation ponds as part of waterborne systems in urban areas Excl. construction of new WBSs (included in D2)	1	WSS C	a) No of new WBS projects completed b) Percentage of all WBSs functioning properly according to minimum standards	BL= TBD Yr1= 5 Yr2=10 Yr3= 15 Yr4= 20 Yr5= 25 BL=TBD Yr1=5% Yr2=10% Yr3=21% Yr4=30% Yr5=66%	1. Assess the Capacities, Conditions & Functioning of all Waterborne Sewerage Systems in the country	1	N	MRL	WSSC DRM	J	1000	X	X	X	X	X
					2. Develop and agree on minimum standards for all types and components of WBS systems; Communicate the minimum standards for all types and components of WBS systems to all RCs and LAs	1	N	MRL	WSSC DRM	J	500	X	X	X	X	X
					3. Do EIAs where required for Wet & Dry Sewerage Systems	2	Y	MET	LA	J	0	X	X	X	X	X
					4. Train/capacitate LAs to properly operate and maintain waterborne sewerage systems	1	N	WSSC	NGO Cons Cont	J	1000	X	X	X	X	X
					5. Train small contractors and Communities in Operation & Maintenance of WBS systems	1	N	WSSC	NGO	J	500	X	X	X	X	X
					6. Offer support with applying for permits and to comply with conditions	1	N	WSSC	MET HSS	S	0	X	X	X	X	X
					7. Ensure good project/contract management through proper and regular inspections, quality control & financial management, incl. proper commissioning/handover	2	N	MRL RC LA	WSSC DRM	J	500	X	X	X	X	X

THEME E: OPERATION & MAINTENANCE, PERFORMANCE MANAGEMENT & ENFORCEMENT

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5		
1. Efficient Operation & Maintenance of all Sanitation Facilities Based on clear O&M guidelines With prime responsibility lying with beneficiaries	1	WSS C	a) No of all residential sanitation facilities well operated and maintained	BL= TBD Y1= 70% Y2= 80% Y3= 90% Y4= 100% Y5= 100%	1. Establish O&M baselines for proper performance management	1	N	WSSC	HSS	J	200	X						
			b) Percentage of all Public sanitation facilities fully functional and in use (WBS & Dry) Schools Border Clinics Shops Service stations	BL= TBD Yr1= 80% Yr2= 90% Yr3=100% Yr4=100% Yr5=100%	2. Develop and agree on minimum standards for O&M; Develop plans and manuals for sanitation facilities O&M; Communicate these minimum standards, plans & manuals to all RCs and LAs (for all options / systems)	1		MWT	MRL	O	500	X	X					
					3. Secure sufficient budgetary provisions for O&M in all LMs, RCs and LAs	1	Y	WSF	All	J	0	X	X	X	X	X		
			c) Number of complaints per year (blockages, pipe breaks, olfactory complaints – for WBS & Dry systems)	BL= TBD Yr1= 100 Yr2= 80 Yr3= 60 Yr4= 40 Yr5= 30	4. Strengthen link between public institutions (e.g. schools) and MWT	2	N	WSF	MWT	J	0	X	X	X	X	X		
					5. Establish and manage maintenance teams in schools, clinics and other institutions	1	N	MWT	LMs	J	0	X	X	X	X	X		
					6. Develop an appropriate inspection / monitoring system including procedures for reporting (incl. schools)	1	N	MWT	WSF	J	0	X	X	X	X	X		
					7. Train local O&M Teams on Wet and Dry Sanitation Systems (either LA staff or selected Community Members through cooperation with Local DC or CDC or outsourced to local contractors)	1	N	MWT	LA RC Cont	J	1000	X	X	X	X	X		
					8. Train customers/users on proper O&M of sanitation facilities	3	Y	RC LA	MWT	J	1000	X	X	X	X	X		
					9. Set up help desks at all RCs and LAs with customer service line and proper complaints handling system; with database, incl. GIS)	2	N	RC LA	WSF	J	1000	X	X	X	X	X		
					10. Regularly inspect & report on O&M effectiveness, efficiencies and costs of all sanitation systems	1	Y	RC LA	WSF	J	0	X	X	X	X	X		
					11. Recover costs for sustainability – according to standard & approved tariffs	1	Y	RC LA	WSF	J	0	X	X	X	X	X		

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
2. Functional Performance Management Measure, Evaluate, Report, Reward, Improve & Learn (MERRIL)	1	WSS C	a) Quarterly performance reports submitted by LAs, RCs and LMs to WATSAN Forum with quality information b) Percentage of performance measure targets achieved as included in this Strategic Plan; measured quarterly c) Mid-term expenditure framework (MTEF) in place within over/under-spending range	BL= NA Y1= 70% Y2= 80% Y3= 90% Y4= Y5= BL= NA Y1= 10% Y2= 25% Y3= 40% Y4= 75% Y5= 100% BL= 2% Y1= 2% Y2= 2% Y3= Y4= Y5=	1. Quarterly measure performance of all PIs and Initiatives (in terms of S,T,C,Q,H,C,R,P) as indicated in the latest updated strategic plan	1	N	WSF	All	J	0	X	X	X	X	X
					2. Quarterly evaluate performance of all measured PIs and Initiatives and report progress on PIs and all current Initiatives to the quarterly WATSAN Forum meetings	1	N	WSF	All	J	100	X	X	X	X	X
					3. Build a culture of continuous dialogue amongst team members to openly and informally discuss performance on a day to day basis and formally on a quarterly basis	1	N	WSF	All	J	500	X	X	X	X	X
					4. Prepare and hold annual JAR workshops in June and send performance reports to EU	2	Y	WSF	WSSC	J	250	X	X	X	X	X
					5. Bi-annually reward/penalise good/poor performance according to quarterly performance reports and bi-annual individual performance assessments (part of PMS/MERRIL)	1	N	WSF	LM RC LA	J	0	X	X	X	X	X
					6. Quarterly improve performance / take corrective measures based on reported PIs and Initiatives through strategic plan reviews; also see how the whole PMS could be improved (costs part of new strategic plan/scorecard)	1	N	WSF	All	J	0	X	X	X	X	X
					7. Update this strategic plan as and when required, generally quarterly – based on MERRIL	1	N	WSF	All	J	500	X	X	X	X	X

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
3. Enforcement of Standards & Regulations for Compliance	1	WSS C	a) Percentage of the total number of developed policies, regulations and legislation that are properly communicated & enforced	BL = TBD Yr1 = 50% Yr2 = 60% Yr3 = 70% Yr4 = 80% Yr5 = 90%	1. Ensure all standards and legal requirements are well understood by all stakeholders through good communication	1	Y	WSF	LMs RC LA	J	0	X	X	X	X	X
					2. Put in place coordinated structures with authority - sufficient and competent inspectors for monitoring, evaluation and reporting	1	N	WSF	LM RC LA	J	0	X	X	X	X	X
					5. Do regular inspections and effluent quality sampling and testing (incl. industry, mines, lodges, shops, service stations, SMEs, schools, clinics, border posts and lodges)	1	N	MAWF	DRM	J	1000	X	X	X	X	X
					3. Ensure all public facilities such as schools, service stations and shops have proper sanitation facilities at all times – through approval of building plans by EHPs and others and regular inspections	1	Y	All		J	500	X	X	X	X	X
					4. Inspect schools on a regular basis to check for diseases	1	Y	HSS	MoE	J	500	X	X	X	X	X
					6. Investigate disease outbreaks and take corrective action	2	Y	HSS		J	500	X	X	X	X	X
					5. Enforce compliance by means of fines, penalties, withdrawal of licenses and forced improvements	2	Y	LM RC LA	POL All	J	0	X	X	X	X	X
					7. Prosecute violators	1	Y	DRM	HSS	J	500	X	X	X	X	X
					8. Prepare annual reports on % compliance	2	N	WSF	All	J	0	X	X	X	X	X
								b) Compliance to sanitation standards and legal requirements (compliance of effluent with quality standards; compliance of sanitation facilities with technical and health standards)	BL= TBD Y1= 60% Y2= 70% Y3= 80% Y4= 90% Y5= 100%							
			c) Reported cases of violation of standards and regulations	BL= TBD Y1= Y2= Y3= Y4= Y5=												
			d) Total amount of fines recuperated by RCs and LAs	BL= TBD Y1= N\$ Y2= N\$ Y3= N\$ Y4= N\$ Y5= N\$												

THEME F: S-E-E OUTCOMES

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5	
1. Social Outputs & Outcomes Improved social conditions improved knowledge, health, reduced diseases, user satisfaction	1	WSS C	a) No of total diarrhea incidences reported	BL= 15000 Y1= 5000 Y2= 3000 Y3= 2000 Y4= 1000 Y5= 500	1. Measure, evaluate and report on statistics annually; Conduct customer use and satisfaction surveys	2	N	WSF	LM RC LA	J	500	X	X	X	X	X	
			b) Percentage of total diarrhea incidences reported with children <5 yrs	BL= 29% Y1= 27% Y2= 25% Y3= 20% Y4= 15% Y5= 10%													
			c) No of cholera cases reported	BL= 200 Y1= 50 Y2= 25 Y3= 15 Y4= 0 Y5= 0	2. Plan improvement measures based on results; revise strategic plan	2	N	WSF	LM RC LA	J	0	X	X	X	X	X	X
			d) No of deaths associated with diarrhea and cholera, compared to BL	BL= TBD Y1= -10% Y2= -20% Y3= -30% Y4= -40% Y5= -50%													
			e) Percentage of households accepting & using the selected sanitation system (based on annual surveys	BL= TBD Y1= 70% Y2= 80% Y3= 90% Y4= 90% Y5= 90%													

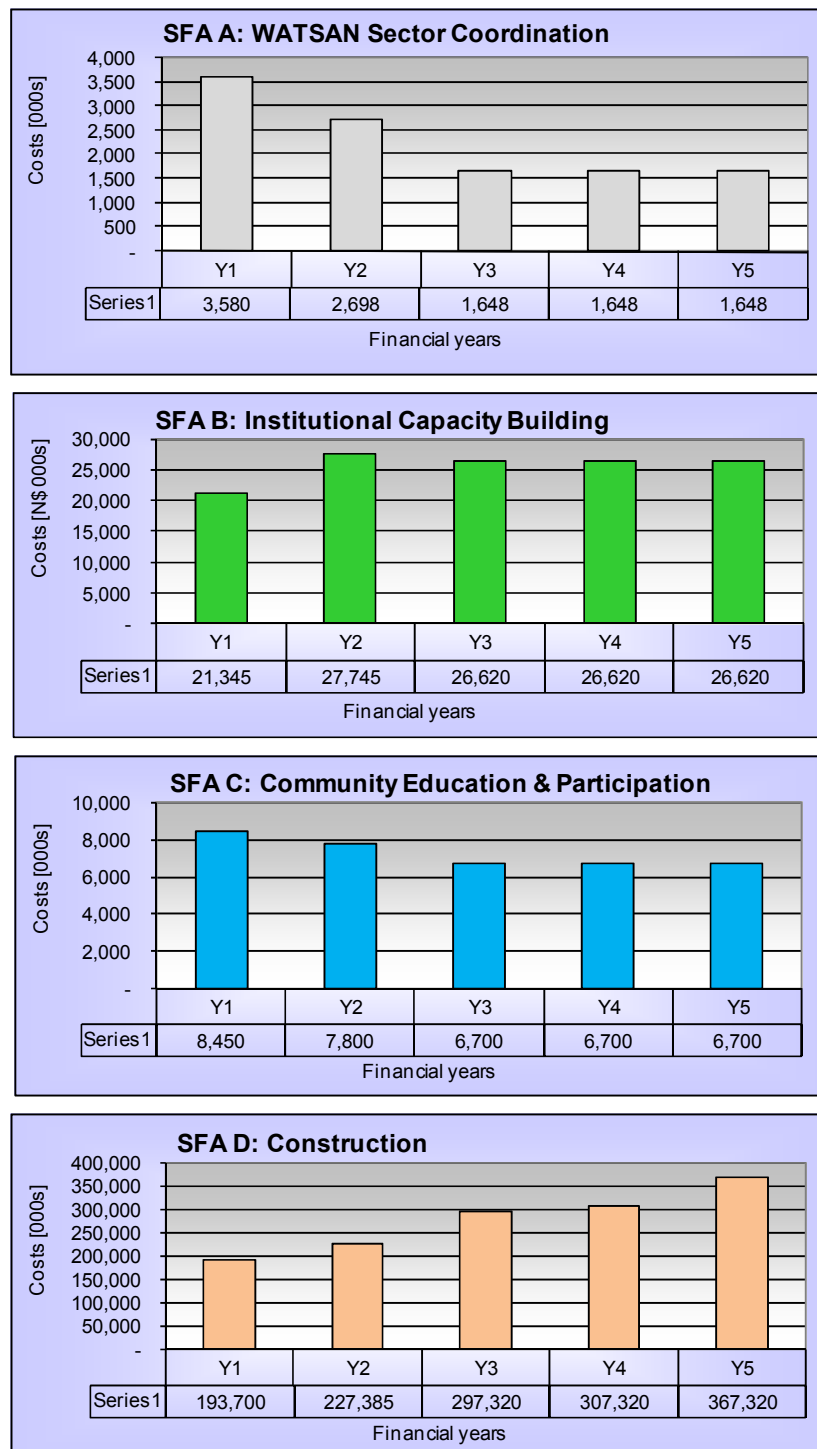
Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
2. Economic Outputs & Outcomes Improved economic conditions – job creation, re-use, additional income generation, cost recovery and sustainability	1	WSS C	a) No of jobs created in the sanitation sector	BL= TBD Yr1= 200 Yr2= 400 Yr3= 600 Yr4= 1000 Yr5= 1400	1. Measure, evaluate and report on statistics annually; Conduct annual economic surveys (combined)	2	N	WSF	LM RC LA	J	100	X	X	X	X	X
			b) Percentage of households re-using effluent/sanitation products (or areas in ha irrigated with recycled water)	BL= TBD Y1=BL+10% Y2= BL+20% Y3= BL+30% Y4= BL+40% Y5= BL+50%	2. Plan improvement measures based on results; revise strategic plan	2	N	WSF	LM RC LA	J	0	X	X	X	X	X
			c) Percentage Cost Recovery on all sanitation O&M (indication of affordability as well)	BL= TBD Y1=BL+10% Y2= BL+20% Y3= BL+30% Y4= BL+40% Y5= BL+50%												

Objective	Pr	Acc	PI (SMART ito CTQQ)	Target	Initiative	Pr	Y/N	Resp	Supp	SJO	Total Est Cost (000s)	Y 1	Y 2	Y 3	Y 4	Y 5
3. Environmental Outputs & Outcomes Improved environmental conditions – less pollution, improved environmental health, mitigated damages	1	WSS C	a) Percentage of Sanitation facilities constructed, operated & maintained according to required environmental standards & guidelines	BL= TBD Y1= 65% Y2= 70% Y3= 80% Y4= 90% Y5= 100%	1. Measure, evaluate and report on statistics annually; Conduct annual environmental surveys	2	N	WSF	LM RC LA	J	500	X	X	X	X	X
			b) No of cases of pollution recorded	BL= TBD Y1= -10% Y2= -20% Y3= -30% Y4= -40% Y5= -50%												
			c) Compliance with effluent quality and wastewater disposal permit conditions (as measured annually)	BL= TBD Y1= 15% Y2= 23% Y3= 30% Y4= 35% Y5= 40%	2. Plan improvement measures based on results; revise strategic plan	2	N	WSF	LM RC LA	J	0	X	X	X	X	X
			d) Compliance to Natural Resources policies and legislation	BL= TBD Y1= 90% Y2= 100% Y3= 100% Y4= 100% Y5= 100%												

7. COSTING & BUDGETING

The initiatives supporting the 20 objectives, as described in the Scorecard, require financial resources. The financial implications for all initiatives (priority 1 and 2) are herewith presented. Note that the financial year starts on 1 April. To ensure a realistic strategic plan, these financial resources should be made available. Should resources be lacking, initiatives indicated by Priority 1 should receive preference.

The strategic budget or estimated strategy expenditure (STRATEX) is presented below. **Figure 12** presents the required budgets for each of the six strategic themes.



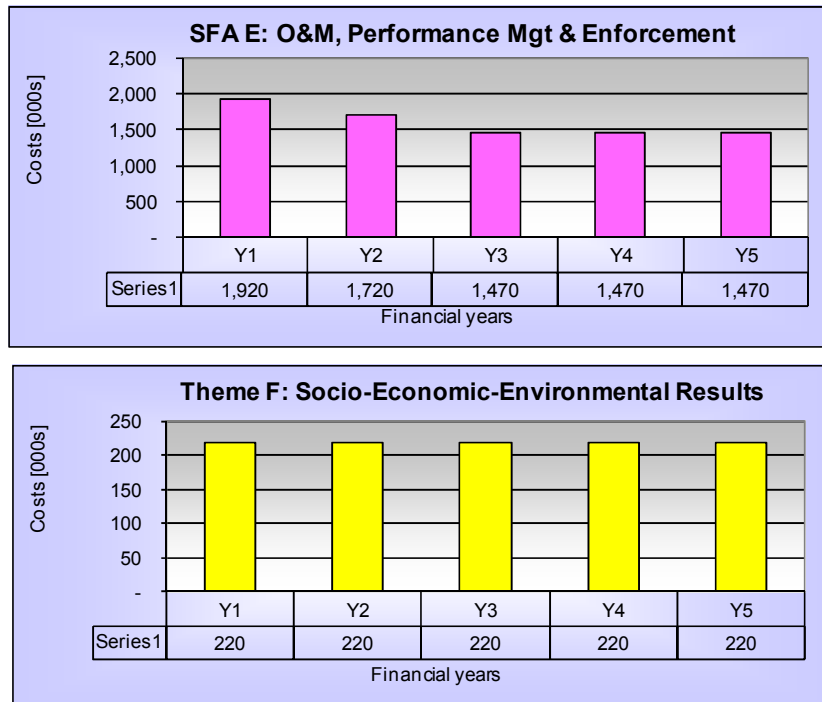
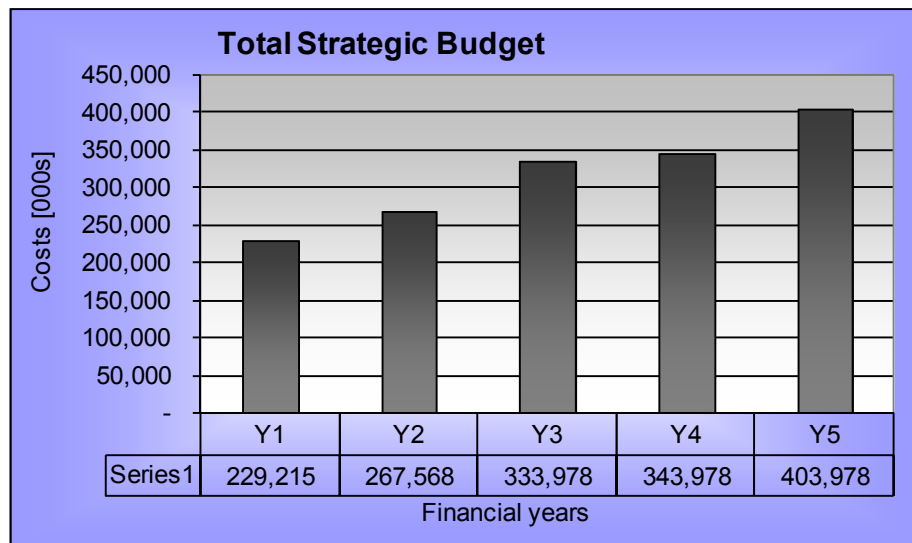


Figure 12: Budgets per strategic theme

The total required budget to implement all initiatives in the sanitation strategic plan is shown below in **Figure 13**. The total strategic budget is **N\$1.579 billion** over the five year period, with an average of N\$316 million per annum. Year 1 starts with **N\$229 million** and increases to **N\$404 million** in year 5, when increasing capacity would be able to absorb the increasing funding.



N\$ [000s]		Y1	Y2	Y3	Y4	Y5
11,220	A	3,580	2,698	1,648	1,648	1,648
128,950	B	21,345	27,745	26,620	26,620	26,620
36,350	C	8,450	7,800	6,700	6,700	6,700
1,393,045	D	193,700	227,385	297,320	307,320	367,320
8,050	E	1,920	1,720	1,470	1,470	1,470
1,100	F	220	220	220	220	220
1,578,715	TOTAL	229,215	267,568	333,978	343,978	403,978

Figure 13: Total Strategic Budget

The distribution of required funding per year is shown in **Figure 14**. **Figure 15** depicts the distribution of funding over the six themes during the strategic planning period. Theme D: Construction is expected to require 88% of the funding with the softer remaining themes requiring the remaining 12%.

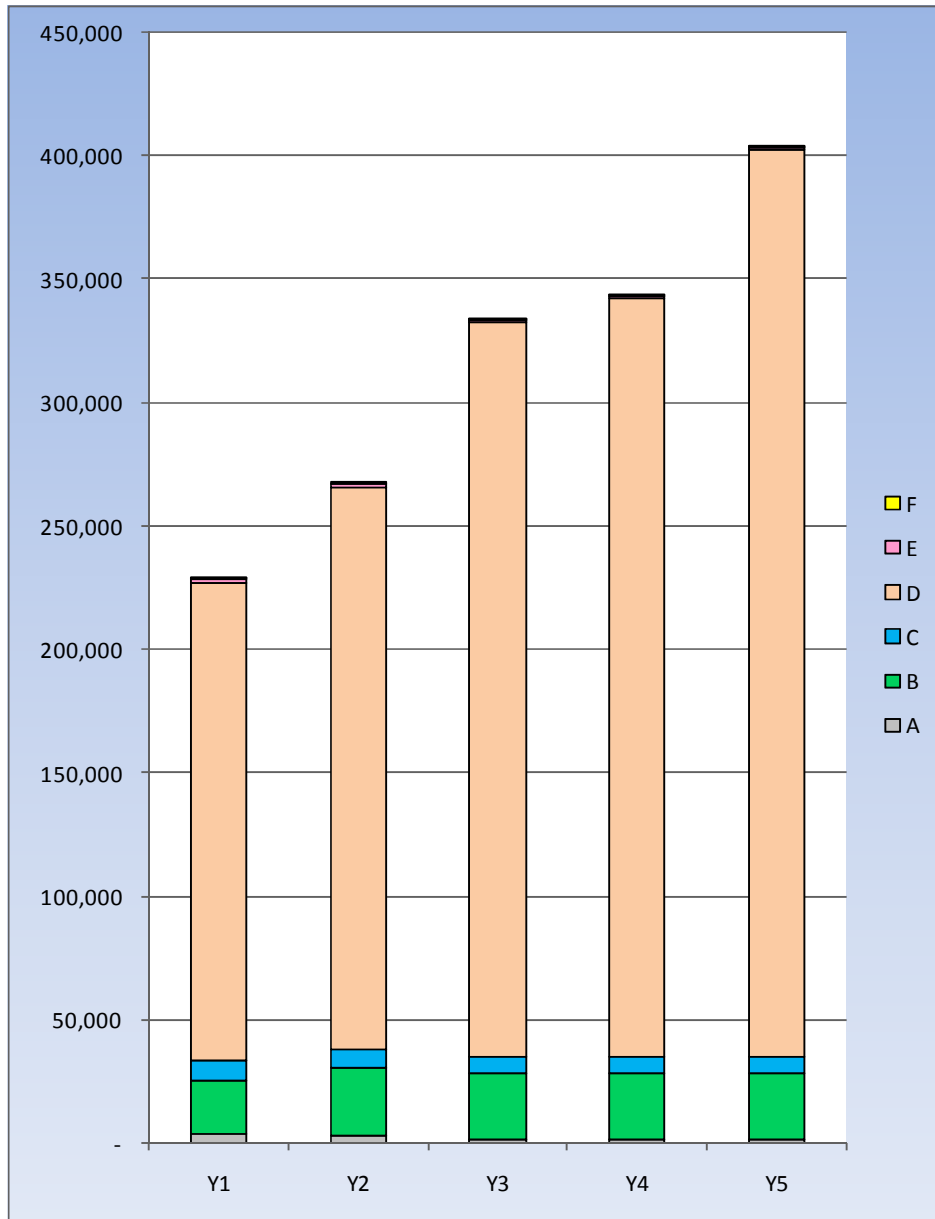


Figure: 14: Distribution of required funding per year

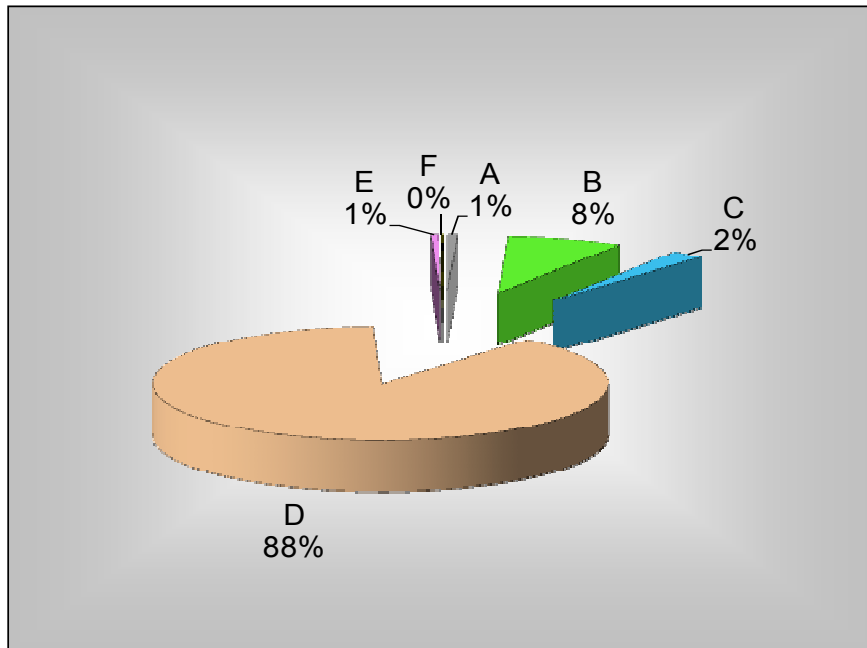


Figure: 15: Distribution of funding over the six themes

8. STRATEGY IMPLEMENTATION CONSIDERATIONS

8.1 Use of Local Structures for planning and coordination

RDCCs and CDCs are planning and coordinating structures in the Regions but they are not implementing structures.

The use of local structures remains an issue. As indicated in this strategic plan, the regional and local structures to be used for sanitation development are the RDCCs and CDCs. The RDCC is the right forum to discuss all sanitation matters. However, most of these RDCCs are not functioning as they should. The exceptions are in the Erongo, Kavango and Ohangwena regions, where they are functioning fairly well (according to the Directorate of Decentralisation, MRLGHRD). According to the decentralisation policy, RDCCs exist for effective regional development planning and coordination. In the same way, LADCs exist for effective development planning and coordination in local authorities and CDCs for effective development planning and coordination in the Regions on Constituency levels. The Permanent Secretary of MRLGHRD and more specifically, the Directorate of Decentralisation is accountable for the effective functioning of all these regional and local committees.

The RDCCs should consist of the Regional Officer (as chairperson), heads of departments of line ministries in the Region, representatives from traditional authorities, local authorities, NGOs and CBOs. They are supposed to meet at least 4 times per annum, but currently it is not mandatory, as the functioning of the RDCC is not yet included in the Decentralisation Enabling Act.

The **RDCC functions** according to the decentralisation policy include:

- Preparation and evaluation of development proposals / plans for the Region for approval by the Regional Council
- Monitoring and evaluation of implementation of projects approved / undertaken by the RC, NGOs, CBOs or central government
- Offering guidance to CDCs
- Coordination of development planning of the Region and integration of development proposals from CDCs
- Establishment and management of a sound regional MIS.

The **CDC functions** according to the decentralisation policy include:

- Identification and assessment of community needs / problems
- Preparation and evaluation of development proposals / plans for the Constituency for submission to the Regional Council
- Initiation, encouragement, support and participation in community self-help projects and mobilisation of people, material, financial and technical assistance in relation thereto
- Coordination, monitoring and evaluation of implementation of projects approved / undertaken by the RC, central government, CBOs or NGOs in the area
- Serve as the communication channel (two-way) between the RC and the people in the constituency
- Coordination of development planning of the Region and integration of development proposals from CDCs
- Establishment and management of a community based MIS in the area.

It is therefore recommended to use these structures, as they can effectively address all sanitation related issues but only if they are fully functional. Should these structures (RDCC and CDC) not be functional yet, a temporary **watsan forum** could be established to specifically address water and

sanitation issues in the Regions. In the meantime MLGHRD will continue building capacity in these structures.

8.2 Critical Success Factors

This section highlights the critical success factors for successful strategy execution. Without these critical building blocks in place, it would be impossible to successfully implement this Strategic Plan. All stakeholders in the sanitation sector have roles to play in implementing this strategy.

Critical success factors are :

1. Participation and buy-in

Understanding and buy-in of this strategic plan from all stakeholders is critical. Effective communication of the strategy is therefore very important.

2. External stakeholder support

The participation and collaboration of all stakeholders are of critical importance in the successful execution of this strategic plan.

3. High performance culture

Competency is defined as the combination of skills, knowledge, experience and attitude. Without a high performance culture in the Sanitation Sector (based on the new PMS being implemented in the Namibia Public Sector) it will be impossible to realise the required benefits (outputs and outcomes) as described in this strategic plan.

4. Sufficient funds

Sufficient funding for all strategic initiatives is required to enable the implementation of this strategic plan and achievement of its objectives. This strategic plan should be used, together with specific project plans, to approach funding agents for funding.

5. Inspirational Leadership and Change Management

A proper change management process should be put in place to ensure successful implementation. **Figure 16** offers a checklist of elements to be addressed in a change management plan. The new Strategic Plan will alter the way in which all sanitation related matters will be addressed.

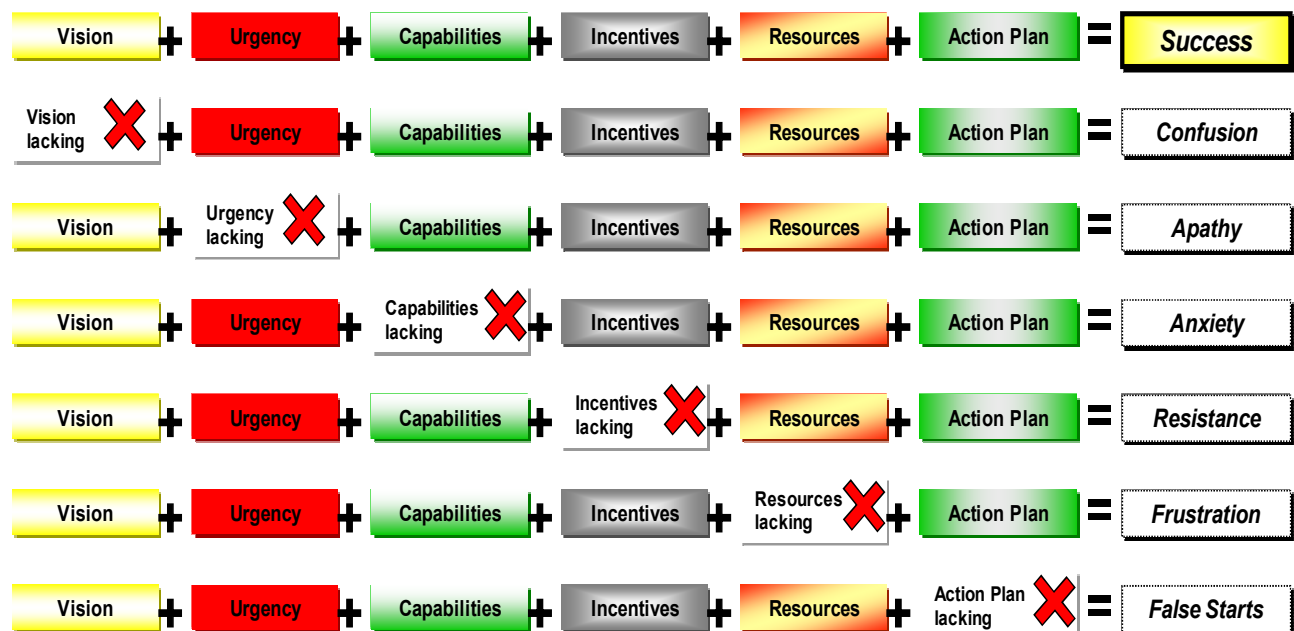


Figure 16: Elements of Strategy Execution and Change Management

ANNEXURE A: ROLES AND RESPONSIBILITIES OF MAIN STAKEHOLDERS

This Annexure describes the roles and responsibilities for sanitation delivery in urban and rural areas are listed below. Functions to be decentralised such as water supply and sanitation, primary education, primary health care are still implemented by LMs in collaboration with RCs. In urban areas, special attention will be given to informal settlements.

MAWF (overall coordination and rural sanitation)

National level

- ensure that financial resources are allocated according to plans for the provision of sanitation in urban and rural areas
- ensure that a transparent subsidy mechanism is in place
- ensure that human resources have been recruited and trained as planned (national, RC and LA levels for the implementation of rural and urban sanitation)
- ensure that transportation means are available at regional level for extension officers
- ensure that a national approach for hygiene education and education tools have been developed for informal settlements
- ensure that national approach for community hygiene education and education tools have been developed
- ensure that appropriate technology options have been developed, as well as guidelines and training manuals
- organise at national level awareness campaign and social mobilisation with stakeholders
- enforce Water Resource Management regulations

Regional level

- identify projects and prepare project proposals
- coordinate with stakeholders the implementation of sanitation in the selected community
- ensure stakeholders mobilisation
- in collaboration with stakeholders, adapt / select among the range of improved sanitation systems the most appropriate to local context
- identify contractor, local artisan, service providers
- organise tendering process
- organise and implement/contract (NGO or the training of local artisans)
- quality control of sanitation facilities construction
- organise and implement/contract the training of communities on operation and maintenance
- with the support of influential stakeholders mobilise community, develop community management structures and sign agreements
- with MET, identify areas for the safe disposal of sludge
- monitor progress

(when decentralisation will be effective, all tasks described above will be conducted by RCs)

MOHSS (hygiene education, enforcement and monitoring health and hygiene data)

National level

- develop with stakeholders a national Namibian approach for hygiene education and develop education materials adapted to rural areas and informal settlements.
- Develop guideline and training material and train staff at national, regional and LAs levels
- support MOE for the development of sanitation and hygiene approach in schools, health clubs, etc.
- develop guidelines for conducting KAP surveys
- measure, evaluate and report on health and hygiene
- ensure that financial resources are available to conduct hygiene education in rural areas and informal settlements

- ensure that staffs at regional and local levels have adequate resources to implement projects in rural and informal areas

Regional level

- organise with stakeholders awareness/education campaigns and events at regional and LA levels
- adapt with stakeholders education material to local context
- organise and implement/contract training of Community Hygiene and Sanitation Volunteers
- contract NGO/contractor for conducting baseline and KAP surveys and implementing hygiene education approach in communities
- monitor progress
- monitor health and hygiene data
- inspect hygiene and sanitation situation in schools, health structures, households

MOE

National level

- develop a national approach for sanitation and hygiene in schools and hostels (health clubs, healthy schools)
- develop curriculum
- monitor sanitation and hygiene sanitation in schools
- ensure that funds are available at regional level for hygiene and sanitation improvement in schools and hostels

Regional level

- implement with the support of Health staff, sanitation and hygiene in schools and hostels
- monitor sanitation and hygiene in schools
- responsible for the construction and maintenance of sanitation facilities

Ministry of Environment and Tourism

Regional level

- enforce environmental management regulations

MRLGHRD

National level

- strengthen RDCCs and CDCs
- develop housing policy
- provide support for the implementation of housing programmes
- provide technical support on sanitation issues to LAs on request

Regional level

- strengthen RDCCs and CDCs

RCs (elected members and executive staff)

- plan and coordinate actions with stakeholders
- facilitate social mobilisation
- when decentralisation is effective: budget management and project implementation
- provide technical support to LAs if required

LAs

- responsible for sanitation (hardware and software) in LAs – request support from MWT if required
- ensure stakeholders coordination around sanitation activities in LAs
- mobilise communities
- monitor and enforce

Development Committees (RDCCs, LADCs and CDCs)

When trained and capable

- submit and evaluate project proposals
- monitor and evaluate project approved
- facilitate project implementation in communities
- coordinate project implementation

NGOs and Private sector

Proposed functions that can be outsourced to private sector and/or NGOs:

- training
- hygiene education in communities and schools
- construction of sanitation facilities
- collection and safe disposal of sludge
- awareness campaign
- micro credit, saving schemes

Beneficiaries / Local Communities

- participate in all phases of project cycle management
- elect Community Sanitation and Hygiene Volunteers
- agree on sanitation gap and most appropriate local sanitation solution
- sign project contract with LA/RC
- contribute to construction of sanitation facilities
- responsible for good operation and maintenance of facilities
- pay for services as agreed

ANNEXURE B: SANITATION DELIVERY PROCESS

The proposed sanitation delivery process is described below.

Activities	Resp
1. Sector funding coordination: Sector MTEF sanitation funding mechanism (based on the Sector-Wide Approach) coordinates sector wide funding from GRN, Donors, Private Sector and Civil Society. All sanitation funds are channelled through DWSSC to the RCs and LAs. DWSSC annually determines national and regional sanitation gaps (for urban and rural areas in each region) and present it to the WSF.	WSSC
2. Annual funding allocations: Based on available funding and identified sanitation gaps per region, the WSF annually recommends funding allocations to the 13 Regions (for urban and rural sanitation). This annual funding allocation per region includes any subsidy amount, if applicable.	WSSC WSF
3. Project identification & planning: LMs, EOs and/or consultants assist Regions (RCs and their LAs) to identify areas with the greatest sanitation gaps and to prepare project plans and applications. (Initially, to speed up the delivery process.) Projects can be a combination of sanitation and hygiene or only health and hygiene education where infrastructure is already in place. In future EOs and/or consultants can also assist CDCs/RDCCs/regional watsan structures (with RCs and LAs) to identify, plan and apply for sanitation projects.	LM RC/LA EO CONS RDCC CDC
4. Project application and approval: RCs (with LA contributions) then submit their project applications to the WSF (via DWSSC) for approval. Consultants can assist where needed. The timing and frequency of applications have to be determined by the WSF. WSF approves projects submitted through DWSSC on their recommendations.	RC LA WSSC CONS WSF
5. Strengthening of institutional structures (parallel to activity 4): MRLGHRD, with the support of the EOs, EHPs and/or consultants mobilise / capacitate CDC / RDCC / regional watsan structures to include hygiene and sanitation on their agendas - to raise awareness on sanitation and hygiene and to increasingly getting involved in project identification, planning, execution and control.	MRL
6. General hygiene and sanitation awareness: MoHSS with the support of DWSSC and other stakeholders raise awareness on general hygiene and sanitation on national and regional levels.	HSS WSSC
7. Community mobilisation: RC/LA mobilises communities at where hygiene / sanitation projects have been approved by WSF. The proposed projects are explained to project communities, incl. roles and responsibilities for the community and the LAs/RCs. A project committee is established. Existing structures, e.g. Water Point Committees, are used and expanded to included sanitation. EOs and Consultants can give support where required.	RC LA
8. Selection of community volunteers (or local SMEs): The project communities (e.g. the expanded Water Point Committees) select two local sanitation and health volunteers (CSHVs) or local SMEs per project - one man and one woman to be trained in hygiene and sanitation. Agreement is reached on appropriate incentives.	COM
9. Training funding transfer: DWSSC (with WSF approval) physically transfers funds for hygiene and sanitation training purposes to the RC/LA for specific projects in each region.	WSSC
10. Training of volunteers/SMEs: RCs/LAs (with support from EHPs, EOs and/or consultants) train these volunteers/local SMEs in base line surveys, demand creation, hygiene and sanitation – both hard and soft elements of sanitation.	RC/LA
11. Baseline surveys: Baseline surveys are conducted in the community (incl. sanitation	RC/LA

<p>coverage, KAP and willingness to pay) by RC/LA. Risk practices and barriers (social, cultural, economic) are identified. Consultants, EOs and other can help where needed.</p>	
<p>12. Project specific training: RCs/LAs (with support from EOs, EHPs and/or consultants) provide sanitation education and training to the specific project communities, presenting the available technology options with their respective application areas, C,O,M costs, advantages and disadvantages. The activity is achieved when communities understand the importance of sanitation and safe hygiene practices and are ready for action</p>	RC/LA
<p>13. Community agreement: RCs/LAs (with support from EOs, EHPs, CSHVs and/or consultants) regularly meet with community / project committee to discuss the gap and possible solutions, testing the options with the given selection criteria (incl. the local environmental situation). Project feasibility and viability are also determined. The project committee reach agreement on the best solution and select the most appropriated option(s).</p>	RC/LA COM
<p>14. Signing of project contracts: The project committee signs the project contract with the RC / LA, witnessed by the Headman/Headwoman, as appropriate. The contract specifies the project scope, subsidies if applicable, payment, roles and responsibilities)</p>	RC/LA COM
<p>15. Project plan and tender document development: The RC / LA (with the support of consultants) develop detailed project plans and tender documents.</p>	RC/LA
<p>16. Contractor training: If skilled local contractors are not available, local artisans have to be identified and trained on toilet construction - to strengthen local capacity, creating employment and making sure that skilled artisans are available in close proximity of the project area (for proper maintenance of the installations). Training should include marketing and tendering – how to prepare and submit technical and financial proposals. After successful training the RC/LA validate the ability of the contractor.</p>	RC/LA
<p>17. Tendering and award: RCs / LAs invite, evaluate, negotiate, select and appoint competent local contractor(s) in an open and transparent process. WSF is informed of all contract awards. Local artisans could also be selected outside a tendering process. RCs/LAS can directly appoint artisans to assist specific household owners.</p>	RC/LA
<p>18. Construction funding transfer: DWSSC (with WSF approval) physically transfers funds to the RC/LA for specific projects in each region, according to the tender documents and quarterly progress reports (up to the maximum allocated amounts per project and region).</p>	WSSC
<p>19. Project implementation: The project is implemented according to national guidelines, regulations and technical manuals. Construction is conducted by contractor or trained local artisans. When using trained local artisans, the cost of the infrastructure may be discussed directly between the owner of the household and the artisan and communicated to DWSSC. The RC/LA (with DWSSC and MoHSS approvals) controls the quality of construction of each toilet facility built by the artisan.</p>	CONT RC/LA
<p>20. O&M training: Community members are trained on how to use the chosen sanitation facilities for proper operation and maintenance (e.g. sludge management). Sludge management should be conducted by a service provider or the RCs. Community members pay for these service. The safe disposal of sludge is controlled by MET and/or MAWF (Water Resources Management).</p>	RC/LA MET MAWF
<p>21. Continued hygiene education and training: RCs/LAs continue with ongoing hygiene education (supported by Community Sanitation and Hygiene Volunteers, EHPs and EOs) to ensure sustainable changes in attitudes and behaviours.</p>	RC/LA
<p>22. Performance management: RCs/LAs (with support from CSHVs, EOs and EHPs) report progress (as part of sanitation performance management system – Objective A4). EOs, EHPs and EHIs do routine visits to communities and projects to measure progress and to determine where more support is required. RCs/LAs send quarterly report via DWSSC to WSF. WSF evaluates project performance based on quarterly reports and site visits. Reports include technical progress, behaviour changes and use of toilets.</p>	RC/LA WSSC WSF

ANNEXURE C: SANITATION PROJECT SELECTION CRITERIA

The Demographic and Health Survey (2007) indicates large differences in sanitation coverage across the Regions in Namibia. The allocation of funds and resources should be linked to sanitation needs in each Region.

Each Region should annually identify projects to fund from the annual WATSAN Forum allocation.

In case the project is related to sanitation and hygiene improvement in urban and / or rural communities, the selection process may be conducted in two phases:

Phase 1: A rapid appraisal is conducted in all rural and urban areas. The objective is to rank communities according to sanitation needs. Information collected may include population figures, sanitation coverage, **sanitation and hygiene related disease prevalence** and specific problems (e.g. flooding). At this stage, in-depth surveys (e.g. KAP surveys) are not required.

Phase 2: From the list of communities with the largest needs, a number of communities (or projects) are selected, based on an agreed set of selection criteria.

The selection should be a demand driven approach giving preference to communities with the largest needs. It should further favour communities demonstrating interest in improving hygiene and sanitation. Interest can be shown by writing a letter to authorities to request project implementation, by showing willingness to participate in toilet construction or by taking action to improve the environment.

The table below is an example of a format that can be used by the RDCC for scoring / evaluating each project application. The projects with the highest totals should then be selected (within the allocated amount).

Project Selection Criteria	Weight	Score	Total
1. Extent of the sanitation gap / community need (population size and density)	25%		
2. Total Lifecycle Cost & Affordability (C,O,M)	25%		
3. Income generation (re-use of effluent for irrigation ; re- use of dry or compost waste as fertiliser & biogas production) and potential & local job creation (use of local resources)	15%		
4. Community initiative, participation & approval (demand from community and willingness to participate on all levels, cultural considerations, e.g. no of people using the facility, re-use of human waste, men/women using the same toilet and literacy and educational level)	15%		
5. Environmental suitability (suited to topography, flood resistant, ground water level, soil conditions & available space around toilet (density)	10%		
6. Technical appropriateness (available spare parts and local skills, available trucks / vehicles / equipment, available water & power supply)	10%		