

Title:	Terms of Reference (ToR) for an Assessment of Sustainability and Targeting of DFID's Water and Sanitation Portfolio, 2011-2015
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Abbreviations

ASWA	Accelerating Sanitation and Water for All
DAC	Development Assistance Committee
DFID	Department for International Development
DRF	Departmental Results Framework
FCO	Foreign and Commonwealth Office
ICAI	Independent Commission on Aid Impact
IDC	International Development Committee
NGO	Non-Government Organisation
ODF	Open Defecation Free
UNICEF	United Nations Children's Fund
VfM	Value for Money
WASH	Water Supply, Sanitation and Hygiene

Introduction

Between 2011 and 2015, The Department for International Development (DFID) supported non-humanitarian Water supply, sanitation and hygiene (WASH) activities benefiting an estimated 64,560,000 people in low and middle income countries eligible for Official Development Assistance. Of this number, an estimated 22,400,000 people gained sustainable access to improved water supplies, and 26,490,000 people gained sustainable access to improved sanitation. These figures include a subset of people who benefitted from both improved water supplies and sanitation. Our efforts have helped achieve notable results. The Millennium Development Goal target for water supply was achieved 5 years early.

Nevertheless, in 2015, over 800 million people still lacked access to basic water supplies, whilst the equivalent sanitation target was not met, with 2.3 billion people still lacking access to basic sanitation in 2015¹. Global data also masks significant disparities between and within countries, between urban and rural populations, and between the better-off and the poor. There is also growing recognition that much more needs to be done to ensure the sustainability of water supplies, sanitation systems and hygiene practices.

In 2015, World leaders agreed the Agenda for Sustainable Development and the Sustainable Development Goals, including SDG 6, which targets universal access to water supply and sanitation. To achieve this, the sector will have to shift from securing access to establishing systems able to deliver and sustain equitable WASH services at scale.

Introduction to the Requirement

DFID is commissioning an assessment of its work on water supply and sanitation undertaken in its previous reporting cycle (2011-2015). The purpose of this assessment is to generate quality evidence about the outcomes of DFID's water and sanitation portfolio (2011-2015), assessing the sustainability of the water supply and sanitation services we have supported, and how effective our programmes have been in targeting poor and vulnerable people.

The assessment is made up of two consecutive components – a quantitative assessment of continued use of services based on a representative survey, and a qualitative assessment designed to investigate underlying factors relating to sustainability and targeting. Prior to undertaking the quantitative assessment, the supplier will confirm the availability of results data. This preliminary activity is associated with a contract break point.

The assessment will fulfil a commitment made by DFID to the International Development Committee (IDC) to establish whether the water supply and sanitation facilities established with DFID support between 2011 and 2015 are still being used. The assessment addresses specific recommendations made by the International Committee on Aid Impact (ICAI) in its 2016 review of DFID's work in water supply and sanitation. The findings of the assessment will be used to inform on-going and future DFID programming.

¹ See: *Progress on sanitation and drinking water – 2015 Update and MDG Assessment*, UNICEF / WHO Joint Monitoring Programme, UNICEF New York, 2015

Objective

The purpose of this assessment is to generate quantitative and qualitative evidence about the outcomes of DFID's WASH Portfolio (2011-2015), in particular addressing issues of sustainability and targeting, as these apply to domestic water supply and household sanitation in rural areas. The assessment has three subsidiary objectives:

Objective 1: To assess the availability and quality (completeness and reliability) of information relating to results achieved between 2011 and 2015

Objective 2: To assess the sustainability of DFID funded rural water supply and sanitation services by establishing the proportion of people who still have access to water supply and sanitation facilities established with DFID funding between 2011 and 2015.

Objective 3: To assess the underlying factors that have influenced sustainability and the extent that project interventions have engaged with and benefited poor and vulnerable people.

Achieving these three objectives will help DFID improve the overall quality of its programming and monitoring systems, and strengthen the impact of future WASH portfolios. The findings will help shape the final development of a WASH approach paper that is currently being drafted, as well as related technical guidance for DFID staff designing and implementing WASH projects. To ensure that the results of the evaluation are also available to other development partners in the WASH Sector, a Steering Group will be established. This will comprise individual representatives of multilateral development organisations, civil society, the research and learning community and other donors.

The evaluation Steering Group will play an important role to ensure the quality of the evaluation and related reports, and to ensure that the findings are well-communicated to inform the sector.

The underlying logic for the evaluation is summarised in a **theory of change**. This is set out at **Annex C**.

Recipient

The primary recipient of the report will be DFID staff in Headquarters and in Country Offices. The secondary audience comprises DFID's government counterparts, implementing partners including International NGOs, multi-laterals including UNICEF and the World Bank, and other WASH donors.

Scope

The scope of the assessment is limited to domestic water supply and sanitation systems established with DFID support between January 2011 and December 2015, including results from the projects listed in Table 1. Hygiene is been excluded because of the difficulties in measuring and attributing behaviour change. The assessment is focused on rural areas, reflecting that the majority of DFID programming on water and sanitation was also focused on rural communities. The assessment will look at continued access to domestic water supplies and basic toilets. The assessment will not assess whether communities have remained Open Defecation Free, as this was not a DFID indicator between 2011 and 2015.

Our support to institutional water and sanitation is excluded, as these represent a small fraction of DFID's WASH portfolio. Our support to short-term humanitarian interventions

is also excluded because the majority of these programmes did not deliver results contributing the overall DFID target. Where humanitarian programmes did contribute results only those where it is feasible to ensure duty of care are included.

Results achieved through our core support to the World Bank, Africa Development Bank and EU are also to be excluded due to limited access to detailed results data and difficulties in identifying specific communities when results were reported based on an attribution model.

Most DFID WASH projects focus on rural populations in least developed and lower-middle income countries, mostly in sub-Saharan Africa and South Asia². The majority of DFID results have been achieved through projects managed by DFID Country Offices, supplemented by centrally managed projects. These results are summarised in Table 1. The table excludes results attributed to DFID core support to the World Bank which cannot be isolated, and those achieved by a number of small-scale projects.

There is no overall theory of change for DFID's WASH portfolio, but sustainable access to water and sanitation facilities can be regarded as the portfolio's generic output; the sustained use of these facilities is the generic outcome result. All projects supported by DFID developed their own theory of change based on the local context. Almost all projects have a health-related impact that refers to reduced mortality and/or morbidity caused by diarrhoeal disease; some also refer to a nutrition impact.

The degree to which individual WASH projects undertaken between 2011 and 2015 were aligned with Paris Principles varied, depending on the national context. An estimated 65% of the WASH results reported were achieved in fragile countries, which meant that the degree to which Paris principles could be followed were more limited. In non-fragile countries such as Mozambique and Zambia, DFID WASH programmes formed an integral part of government plans and were largely delivered through government structures.

In 2016, The Independent Commission for Aid Impact (ICAI) reviewed DFID's work in water supply, sanitation and hygiene. ICAI made a number of specific recommendations that focused on issues of sustainability and targeting. These issues were subsequently raised by the International Development Committee (IDC). In its response to the IDC, DFID agreed to establish how many people were still using water supply and sanitation facilities established by DFID between 2011 and 2015. This objective will also fill an important global evidence gap.

Whilst global experts agree that sustainability is a major problem, there is limited robust evidence based on measured sustainability over a multi-country, multi-partner portfolio. Self-reported data to the Rural Water Supply Network suggests 25-30% of rural water points in Africa are non-functional at any one time, which is supported by small-scale studies previously commissioned by DFID.

The DFID Departmental Results Framework that operated between 2011 and 2015 (DRF, **Annex B**) specifies that all DFID water supply and sanitation programmes have to demonstrate that relevant aspects of sustainability have been addressed in their design and implementation. The DRF focused on functional, institutional and environmental dimensions of sustainability.

² An estimated 89% of DFID's WASH results (2011-2015) were focused in rural areas, 65% of which were achieved in countries defined by DFID as fragile.

In terms of this assessment however, it is suggested that the following dimensions of sustainability are used in the qualitative assessment, providing DFID with a more detailed analysis and a more useful set of recommendations:

- **institutional sustainability**, relating to institutional arrangements for operation, maintenance and management;
- **financial sustainability**, relating to affordability and cost recovery;
- **environmental sustainability**, relating to the use of and impact on water resources, also considering climate change?

The DRF did not specify any requirement to target poor or vulnerable people. Nevertheless, eradicating poverty was (and remains) a high-level objective for DFID, and our water and sanitation projects normally refer to targeting the poor and vulnerable. All DFID projects are also required to meet the needs of women as well as men, and to provide facilities and services that enable people with disability to benefit from DFID support. Therefore we would like this assessment to examine the extent that project interventions succeeded in identifying poor and vulnerable people, women as well as men, girls as well as boys, and established and responded to the specific needs of each group.

Table 1: Breakdown of Selected Results, 2011-2015.
Countries marked with an (*) are classified by DFID as being fragile.

Ser	Country	Number of people with sustainable access to clean drinking water sources	Number of people with sustainable access to an improved sanitation facilities
1	Bangladesh*	2,520,000	6,320,000
2	Centrally Managed Programmes – Multiple Countries ^{3*}	380,000	750,000
3	Democratic Republic of Congo*	2,100,000	1,780,000
4	Ethiopia*	1,810,000	2,660,000
5	India	2,500,000	1,580,000
6	Malawi	530,000	730,000
7	Mozambique	310,000	460,000
8	Nepal*	250,000	370,000
9	Nigeria*	840,000	2,950,000
10	Pakistan*	1,160,000	1,630,000
11	Sierra Leone	1,040,000	2,110,000
12	South Sudan*	270,000	10,000
13	Sudan*	1,410,000	560,000
15	Tanzania	2,950,000	310,000
16	Uganda	3,000	-
17	Vietnam	130,000	230,000
18	Yemen*	650,000	50,000
19	Zambia	-	2,240,000
20	Zimbabwe*	1,280,000	190,000
	Total	20,133,000	24,930,000

A further breakdown of these results is provided in **Annex A**. This provides an indication of the delivery channels used to achieve them.

³ Specifically UNICEF ASWA 1 worked in Bangladesh*, Burma*, Cambodia, Madagascar*, Nepal*, Pakistan*, South Sudan* and Yemen* from 2014.

Project Requirements

Approach

Details of the assessment methodology are to be proposed by the supplier in their proposals. Proposals should include:

- i) A detailed description of the methodology the supplier intends to use to confirm the availability and quality (completeness and reliability) of project result information. The description should include details of how the supplier intends to analyse this information and so assess whether there is sufficient data to proceed with the quantitative assessment.
- ii) A description of the methodology the supplier intends to use to assess the sustainability of the results achieved. This will be based on a representative survey, focusing on whether the water supply and sanitation facilities supported by DFID between 2011 and 2015 are still being used. Bidders are requested to set out a survey methodology taking into account that DFID will expect sampling to be stratified by the type of intervention (i.e. water supply or sanitation) and the delivery channel (support to Government, or International NGO/private sector providers, or multi-lateral agency, most obviously UNICEF). The survey should be designed to allow results to be disaggregated by gender and wealth or asset quintile.
- iii) A description of the methodology for the qualitative assessment to investigate the determinants of sustainability in more depth and the extent that interventions have targeted poor and vulnerable groups. Proposals should identify which techniques will be used and justify these in terms of their conceptual rigour and validity. The qualitative component should follow and be informed by the results of the quantitative survey.

In developing proposals, bidders should make use of DFID project documents available on the *Development Tracker* website (e.g. business cases, logframes and annual reviews).

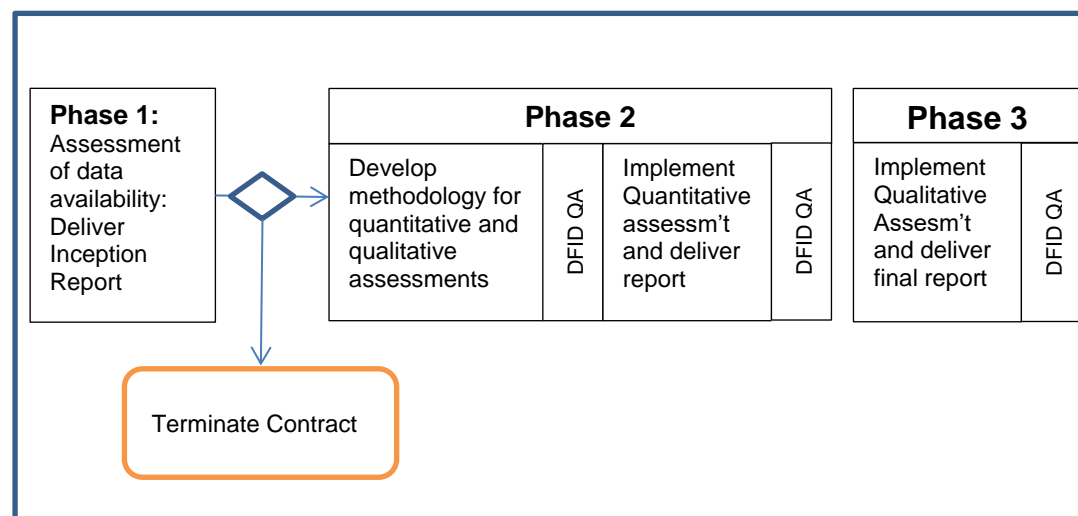
A two-month inception period (Phase 1) has been built into the start of the contract. During this period the supplier will review project information, interview DFID and other stakeholders (beyond the UK, this would be done by phone or on-line, or by an in country partner or sub-contractor, and to the extent possible, confirm the reliability of project information. The supplier would then analyse this data and complete Objective 1 with the delivery of an Inception Report. A contract break point has been built in at this point, as the contract may need to be terminated should DFID conclude that there is insufficient access to reliable result data to proceed.

Assuming the contract proceeds, the supplier will begin Phase 2 by updating its methodology to undertake both the quantitative assessment and the qualitative assessment that follows it, informed by the results of Phase 1. The supplier's approach will be subject to DFID quality assurance. The supplier will also review timeframe and budget, with changes submitted to DFID for its consideration together with a justification. The contract may need to be amended at this point.

Phase 2 will be concluded with the implementation of the Quantitative Survey, and the delivery of a related Report, which will be subject to DFID quality assurance. This should include proposed adjustments to the qualitative component that follows.

The third phase concerns the Implementation of the qualitative component of the assessment, and the delivery of a Final Report, which will also be subject to DFID quality assurance.

This approach is summarised below.



Evaluation Criteria and Questions

In overall terms, the methodology is expected to focus on the following OECD-DAC evaluation criteria: **relevance, effectiveness, impact and sustainability**. These criteria provide an overall framework for the evaluation. The OECD's **efficiency criterion has been excluded**, due to the additional difficulties and costs of retrospectively evaluating the relationship between outputs and inputs.

The following sub-section identifies broader questions that the evaluation should help address under each heading:

Relevance:

- To what extent have lessons learnt from implementing the 2011-2015 WASH portfolio influenced current programming and future plans?
- To what extent were the activities and outputs of the portfolio consistent with the objective of ensuring the sustained use of WASH facilities, ultimately contributing to a significant health impact?

Effectiveness:

- What were the major factors influencing the achievement or non-achievement of sustained access for the 60 million people reached between 2011 and 2015?

Sustainability:

This is the major focus of the evaluation, and is developed in the following section.

Impact:

The scope of the assessment is limited to assessing the extent that the portfolio reached poor and vulnerable populations. This is developed in the following section. A health impact assessment is not included due to the impracticality of measuring this without a baseline, also taking into account limitations in attributing the current prevalence to diarrhoea to WASH intervention conducted between 2011 and 2015.

Specific Questions on Sustainability and Targeting

Below is a set of more detailed questions that could be addressed by the assessment. It is anticipated that these questions will be refined in suppliers' proposals, and further developed at the beginning of Phase 2, taking into account the results of Phase 1; the costs and benefits of any proposed change and an assessment of risk.

The first section of questions focuses on sustainability, the second section on targeting. Questions 1.1 and 2.1 could be answered by the household survey alone. The others require quantitative information.

Section 1: Sustainability

- 1.1. How many people who gained access to water supply and sanitation between 2011 and 2015 with DFID's support still have access in 2018?
- 1.2. What are the main drivers of sustainability, and the main reasons for access not being sustained, based on the dimensions of sustainability suggested in this ToR
- 1.3. What is the likely trajectory of sustainable access based on the dimensions of sustainability suggested in this ToR?
- 1.4. To what extent can the project design or its implementation be attributed to sustainability or the lack of sustainability of water supply and sanitation facilities?
- 1.5. How can monitoring and indicators be refined to better report on sustainability?
- 1.6. What are the costs of ensuring sustainability and who is bearing them?

Section 2: Targeting

- 2.1. To what extent did project interventions benefit poor and vulnerable people?
- 2.2. To what extent did the project have negative impacts on poor and vulnerable people?
- 2.3. What measures / activities did DFID establish during the project to strengthen targeting?
- 2.4. To what extent was disability reflected in the project design and implementation?
- 2.5. How can project design and implementation be improved to enhance targeting?
- 2.6. To what extent was targeting monitored over the course of the project?
- 2.7. How can monitoring and indicators be refined to better report on targeting?

Survey Methodology

The survey methodology is expected to include:

- A representative survey designed to address Objective 2 sized to generate a 95% level of confidence that the principal findings relating to the sustainability of water supplies and sanitation cannot be explained by random error.
- Data should be further disaggregated by gender and wealth.

- An associated qualitative assessment designed to address Objective 3, focussing using appropriate techniques to add depth to the survey.

There is no control group and this is therefore not an impact assessment.

The **Theory of Change** presented in **Annex C** is to be used by suppliers to develop and refine the methodology. In their proposals, suppliers are expected to describe the sampling methodology, proposing a sub-set of countries. The results obtained from one country are unlikely to be generalizable. The sub-set should only exclude countries where the security situation is likely to significantly compromise access - Yemen and South Sudan, and countries which have only made a minor contribution to DFID's results tally⁴.

Sampling can include results from the Centrally Managed Project implemented by UNICEF (Accelerating Sanitation and Water Supply for All, ASWA 1. The sampling should however exclude the centrally managed WASH Results Project as this generated very few results before the end of 2015.

The supplier is expected to produce a detailed final report describing the methodology used, findings (the evaluation questions being addressed) and recommendations. This is also to be presented to DFID staff in the UK.

Implementation Requirements

It is anticipated that the supplier will demonstrate a gender-balanced core team, comprising an overall manager, a team leader, a project logistician / administrator, core team members responsible for the qualitative and quantitative components of the work, one or more field team manager(s), and a data specialist / statistician. The team should include a sufficient number of enumerators of both sexes for field work.

The supplier is expected to demonstrate:

- Extensive experience in conducting high quality quantitative and qualitative evaluations in multiple low and middle income countries in sub-Saharan Africa and South / South East Asia, using an appropriate combination of methods.
- Detailed knowledge of Water, Sanitation, in particular, of issues relating to sustainability and targeting in low and middle income countries.
- Strong analytical and communication skills.
- The team should demonstrate a gender balance.
- Ability to mobilise in country partners or sub-contractors to help assess the availability of project data and/or undertake data collection.

The Team Leader is expected to demonstrate:

- Masters or PhD in a relevant field
- At least 15 years relevant experience leading teams to conduct multi-disciplinary evaluations (with quantitative and qualitative components) in a development context.
- Extensive experience of relevant work in both Sub-Saharan Africa and South or South East Asia

⁴ A figure of around 250,000 people with water or sanitation access is suggested. Based on Table 1, **Uganda and Vietnam** would be excluded from water supply sampling. South Sudan, the **Yemen, South Sudan and Zimbabwe** would be excluded from sanitation sampling. The great majority of results would still be included in the sample frame.

- Experience of working in fragile countries, and related issues concerning staff safety and security
- First rate communication skills in English

Other team members expected to demonstrate:

Complementary skills in terms of technical qualifications and experience, sector experience, geographical coverage, language skills, evaluation skills, use of mixed approaches, etc.

National or Regional Consultants

The supplier is also to involve national or regional consultants (organisations / institutions/individuals) in the evaluation, making best use of available capacity and strengthening this as and when necessary. Proposals should identify the entities involved, their geographical focus, the status of their engagement, the CVs of key individuals, related roles and responsibilities, and the scope and objectives of related capacity development. The budget presented in the proposal should identify the resources that will be channels through national or regional consultants.

Reporting and Deliverables

Phase 1 (Inception)

- D1: A detailed report focusing on the availability and quality of project information delivered within **2 months of signing contract**. This should include an impact analysis and recommendations.

CONTRACT BREAK POINT

Phase 2

- D2: methodology report: a full description of the methodology for and location of quantitative and qualitative assessments, informed by results of Phase 1, (for DFID for QA; report also to include updated work-plan, timeline and budget, evaluation questions, updated risk profile, and updated details of secondary and tertiary contractors; delivered within 2 months of the start of Phase 2.
- D3: Quantitative assessment, draft final report (for DFID QA) delivered within 8 months of start of Phase 2.
- D4: Qualitative assessment, draft final report, delivered within 10 months of start of Phase 2.

Phase 3

- D5: Updated methodology report for qualitative assessment, informed by results of Phase 2. Delivered within 10 months of start of Phase 2.
- D5: Draft final report, taking into account results of qualitative assessment (for DFID QA). Delivered within 14 months of start of Phase 2.
- D6: Final Report, delivered within 16 months of the start of Phase 2.

DFID and other members of the Steering Group will be responsible for onward sharing of findings from the evaluation to relevant stakeholders and pilot countries.

The evaluator will perform appropriate risks assessments for the project including field visits. DFID will provide information on risks and risk management at country level as requested by the evaluator.

Other considerations

DFID has supported a wide range of water and sanitation projects in the countries listed in Table 1. Whilst the great majority are focused on rural areas, there are some urban projects. Some projects have combined water supply and sanitation components, others have one or another. DFID country programmes may also include a number of implementing channels and delivery partners. Bidders will need to be cognizant of this fact as they design an assessment framework.

Number of Countries included the Survey

This will be limited by budget, logistical feasibility and security concerns. The final selection of countries will be agreed by the Steering Group and the Supplier following the completion of Phase 1. The supplier, its employees, partners and sub-contractors will not be expected to visit countries where it cannot provide duty of care.

Access to data

The preferred bidder will have access to project documents available on the Development Tracker website and additional documents provided by DFID. Additional data requirements proposed by the evaluators will be discussed during the inception phase of the evaluation.

The quality of existing project datasets varies country to country, depending to an extent on the implementing organisation and its archiving systems.

- In some cases, implementing partners may have maintained data files that indicate the location and type of WASH infrastructure completed and other technical details, and the number of users, whether this assumed or observed. The reliability of this data is likely to vary depending on the implementing partner, and cannot be assumed.
- In other cases, only limited project data is likely to be available. In the majority of cases, data is not expected to be disaggregated by wealth ranking, by gender or other user attributes.

DFID staff in the UK and country offices will assist the supplier during Phase 1 by gathering relevant project information. Should additional information be required, the supplier is expected to support this process, for example by contacting DFID's implementing partners. In general, national WASH data sets are unlikely to provide details which links specific infrastructure to a particular donor and project.

Interviews

At the beginning of Phase 2, the supplier is expected to propose a list of key informants they wish to interview. This may include national, sub-national and local government officials engaged in WASH implementation and/or monitoring and reporting; DFID implementing partner staff and sub-contractors; community leaders; community representatives; members of water and sanitation committees; health staff and community health officers.

DFID staff in Headquarters and Country Offices will be also be available for interviews and consultations. Organising dates and times for interviews with key informants will be the responsibility of the supplier, aided by DFID staff in each participating country office.

Code of Conduct and Ethics

Suppliers are expected to abide by DFID's code of conduct for suppliers, as well as evaluation principles of independence, transparency, quality, utility, and DFID Ethics Principles for Research and Evaluation⁵. Suppliers are also expected to follow national rules and regulations on research and ethics in the countries where it plans to conduct field research.

Evaluation Risks and Challenges

The evaluation is associated with a number of specific risks and challenges. Those graded as moderate or severe are set out in the following table, together with proposed mitigation strategies. Potential supplier are expected to develop this analysis as part of their proposal, the successful bidder developing this further as part of the inception phase.

Ser	Risk	Severity (impact)	Proposed mitigation Measure(s)
1	Security concerns limit access to sites where DFID has claimed results, introducing bias	Moderate	Minimise impact by exclude highly fragile countries where access will be a major threat to duty of care, work with DFID Country Offices and UK security staff to ensure safe access in others.
2	Potential bias in establishing countries or regions that will be sampled or used to inform qualitative assessments	Moderate	Assess risk during Phase 1; Ensure that the supplier uses a robust sampling methodology site selection; this aspect to be checked by Steering Group
3	Difficulties in constructing a detailed results map from archived data	Moderate	Assess risk during Phase 1; Though time consuming, supplier is expected to extract secondary information from annual reviews and implementer's reports. Sample size should be adjusted to accommodate residual risk.
4	Supplier finds it difficult to isolate DFID specific results on the ground due to inadequate records or subsequent development undertaken since 2015	Severe	Assess risk during Phase 1; See above. Supplier may have to enlist support of local government or local development partners to identify DFID results. ToR specifically requires use of local capacity to mitigate this risk.
5	Sustainability observed may not be fully or partially attributable to DFID, but to other donors or government initiative	Severe	Total isolation of DFID projects from external influence is impossible to control. Data collection should include information that allows the supplier to qualify the likely influence of other development initiatives that may have influenced sustainability.
6	Steering Group refocuses work or introduces an organisational bias, undermining the achievement of the evaluation's objectives	Moderate	Terms of reference of the Steering Group should be designed to mitigate this risk. Individual representatives should not have a direct stake in the result, but have a degree of independence and objectivity.
7	If results are poor, DFID finds it difficult to communicate these without reputational damage and negatively influencing current and future WASH programmes	Moderate	Directors, Deputy Directors and Ministers should be briefed about this work, and regularly updated as it progresses. WASH approach paper already prioritises sustainability.

⁵ See DFID Evaluation Policy 2013, pp6-7.

DFID Responsibilities and Approvals

The contract will be managed by the Statistics Adviser of the WASH Policy Team. The team is part of DFID's Human Development Department. The Statistics Adviser will also be the point of contact for all logistical or administrative arrangements, and will lead coordinate communication with DFID Country Offices. DFID's responsibilities include:

- Providing access to relevant information and results data where available;
- Quality assurance of all deliverables (see Figure 1)
- Facilitating key informant interviews (e.g. with national stakeholders and implementing partners);
- The development of a communication strategy to disseminate key findings and recommendations.

The capacity of DFID programme staff to work with its implementing partners to generate detailed results information is limited. The supplier is expected to support this process to fill data gaps.

Governance

The evaluation will be guided by a Steering Group that comprises representatives of the Water and Sanitation Policy Team, DFID's Research and Evaluation Division, at least one DFID country office member of staff, and selected development organisations including UNICEF, civil society, and the research and learning community, as well as other donors.

The Steering Group will assure the quality of evaluation methodology and outputs, and will have a separate ToR. To date, UNICEF, WaterAid and the International Reference Centre for Water Supply and Sanitation have agreed to participate in the Steering Group.

Quality Assurance

Quality assurance will be checked by the Steering Group, which will also be chaired by DFID (WASH Policy Team Leader). The Steering Group is also expected to approve the communication strategy.

DFID expects to have unlimited access to data and materials produced by the supplier relating to this contract, in accordance with DFID's general conditions of contract.

Independent quality assurance is mandatory during the 'entry' design phase (the beginning of Phase 2) and at the 'exit' (draft final report) stages. Quality Assurance is currently conducted by an external contractor. There is a two-week turn round, provided that the programme team is able to notify them in advance about the delivery of the outputs. The Evaluator's services and performance will be assessed using DAC Quality Evaluation Standards.

In addition to quality assurance requirements, a formal management response to all findings, conclusions and recommendations from an evaluation is required, and will be published with the evaluation.

Duty of Care

The Supplier is responsible for the safety and well-being of their Personnel and Third Parties affected by their activities under this contract, including appropriate security

arrangements. They will also be responsible for the provision of suitable security arrangements for their domestic and business property.

DFID will share available information with the Supplier on security status of countries involved in the evaluation, based on available Foreign and Commonwealth Office (FCO) advice.

The Supplier is responsible for ensuring appropriate safety and security briefings for all of their Personnel working under this contract and ensuring that their Personnel register and receive briefing as outlined above. Travel advice is available on the FCO website and the Supplier must ensure they (and their Personnel) are up to date with the latest position.

Acceptance of responsibility must be supported with evidence of Duty of Care capability and DFID reserves the right to clarify any aspect of this evidence. In providing evidence, Suppliers should consider the following questions:

- a) Have you completed an initial assessment of potential risks that demonstrates your knowledge and understanding, and are you satisfied that you understand the risk management implications (not solely relying on information provided by DFID)?
- b) Have you prepared an outline plan that you consider appropriate to manage these risks at this stage (or will you do so if you are awarded the contract) and are you confident/comfortable that you can implement this effectively?
- c) Have you ensured or will you ensure that your staff are appropriately trained (including specialist training where required) before they are deployed and will you ensure that on-going training is provided where necessary?
- d) Have you an appropriate mechanism in place to monitor risk on a live / on-going basis (or will you put one in place if you are awarded the contract)?
- e) Have you ensured or will you ensure that your staff are provided with and have access to suitable equipment and will you ensure that this is reviewed and provided on an on-going basis?
- f) Have you appropriate systems in place to manage an emergency / incident if one arises

An updated risk assessment data on countries that may require visits as part of the delivery of the project is available on the FCO website (<https://www.gov.uk/foreign-travel-advice>). The supplier is expected to update this assessment on a regular basis. Further advice may be provided by UK High Commissions and Embassies.

Do No Harm

DFID requires assurances regarding protection from violence, exploitation and abuse through involvement, directly or indirectly, with DFID suppliers and programmes. This includes sexual exploitation and abuse, but should also be understood as all forms of physical or emotional violence or abuse and financial exploitation.

As this programme is targeting a highly sensitive area of work, the Supplier must demonstrate a sound understanding of the ethics in working in this area and applying these principles throughout the lifetime of the programme to avoid doing harm to beneficiaries. In particular, the design of interventions including research and programme evaluations should recognise and mitigate the risk of negative consequence for women, children and other vulnerable groups. The supplier will be

required to include a statement that they have duty of care to informants, other programme stakeholders and their own staff, and that they will comply with the ethics principles in all programme activities. Their adherence to this duty of care, including reporting and addressing incidences, should be included in both regular and annual reporting to DFID;

Suppliers should also demonstrate a commitment to the ethical design and delivery of evaluations including the duty of care to informants, other programme stakeholders and their own staff.

DFID does not envisage the necessity to conduct any environmental impact assessment for the implementation of the programme. However, it is important to adhere to principles of “Do No Harm” to the environment.

GDPR – Protection of Personal Data

Please refer to the details of the GDPR relationship status and personal data (where applicable) for this project as detailed in Appendix A and B and the standard Clause 33 of the Framework Agreement.

Budget

The budget ceiling for the evaluation is £2,500,000. This includes fees, reimbursables, international and domestic travel, expenses, Government Tax and VAT.

Timeframe

The contract is expected to start in March 2019 and continue for a period of 18 months. If agreed by both parties, this programme may be extended beyond the originally envisaged contract duration by up to an additional 8 months. Take up of any extension period is subject to DFID approval, the continuing needs of the programme and additional funds of up to £500,000 of the original contract value being released.

Annexes:

- A. Breakdown of Portfolio Results by Delivery Channel (2011-2015)
- B. DFID Water and Sanitation Results Framework (2011-2015)
- C. Evaluation Theory of Change

Annex A - Breakdown of Portfolio Results by Project (2011-2015)

Bangladesh	
114175	CLP
107371	SHEWA B
201286	BRAC SPA
107476	UPPR
Democratic Republic of Congo	
200196	VEA - Village Ecoles Assainis
203445	Increasing Sustainable Access to Water, Sanitation and Hygiene in the Democratic Republic of Congo
Ethiopia	
113492	WASH Sector Support
203766	One WASH
200225	Protection of Basic Services (PBS2)
202991	Promoting Basic Services (PBS 3)
Human Development Department	
203571	Accelerating Sanitation, Hygiene and Water for All in Off-Track Countries
203572	Water, Sanitation and Hygiene (WASH) Results Programme
203583	Water and Sanitation for the Urban Poor
India	
114506	Bihar - Sector wide approach to Strengthening Health (SWASTH) (114506)
202871	Water, Sanitation and Hygiene Programme in MP and Odisha (202871)
202871	Water, Sanitation and Hygiene Programme in MP and Odisha (202871)
108027	MP Urban Slum Programme (108027)
Malawi	
202944	Malawi Water & Sanitation Programme (MWSP)
202366	Kasumbu and Mpando Safe Water Supply (KMSWS) (2011-2012)
Mozambique	
201123	National Rural Water and Sanitation Programme (PRONASAR)
103986	Poverty Reduction Budget Support
204082	Accelerating the Delivery of WASH Services in Rural Mozambique
Nepal	
203187	Rural Water Supply and Sanitation (Phases 4 and 5)
200696	Community Support Programme Phase II
114088	Local Governance and Community Development Programme
203764	Local Governance Support Programme
Nigeria	
201381	Sanitation, Hygiene and Water in Nigeria
202977	Sanitation, Hygiene and Water in Nigeria (SHAWN) 2
Pakistan	
203787	Emergency assistance to IDPs
202930	Humanitarian Assistance to Pakistan Floods 2011/12
204603	Multi-Year Humanitarian Programme in Pakistan
203967	PREDICTABLE HUMANITARIAN EMERGENCIES IN PAKISTAN DURING 2013

Sierra Leone	
113254-102	Programme to support water supply, sanitation and hygiene in Sierra Leone
113254-103	Programme to support water supply, sanitation and hygiene in Sierra Leone
201460-101	Strengthening water supply, sanitation and hygiene in Freetown, Sierra Leone
202751-101&102	Water supply, sanitation and hygiene in rural schools, clinics and communities in 6 districts of Sierra Leone
South Sudan	
104978	South Sudan Service Delivery (BSF)
202850	Common Humanitarian Fund (CHF) 2012
Sudan	
202520	WATSAN programme
201622	Darfur Urban Water Supply Project
104981	Multi Donor Trust Fund (MDTF)
105261	Medair
Tanzania	
202313	General Budget Support
202852	Rural Water Supply Programme
N/A	Water Payment by Results
Yemen	
201427	Social fund for development phase IV
Zambia	
202345	Zambia sanitation and hygiene programme
Zimbabwe	
113871	Protracted Relief Programme
202691	Rural WASH
203803	Bulawayo Water

Annex B - DFID Water and Sanitation Results Framework (2011-15)

Indicator description	Number of unique people reached with one or more water, sanitation or hygiene promotion intervention
Type of indicator	Composite (combination of the three sub-indicators) and Cumulative (annual results are reported and summed over the entire reporting period, assuming that each individual is counted within one year only).
Technical definition / Methodological summary	<p>The bilateral results attributable to DFID will be the number of women, children and men who individually benefit from one or more of the three possible DFID supported WASH services: 1) sustainable access to clean drinking water; 2) sustainable access to improved sanitation; 3) access to improved hygiene.</p> <p>The preferred data source for the WASH indicators is programme data on direct beneficiaries and this should capture only individuals who have gained access to WASH services as defined within the methodologies which they did not previously have. If alternative data sources are used, care must also be taken to establish the counterfactual – i.e. the number or proportion of people reached with WASH interventions who already had access according to the definitions outlined in the methodology notes. This may not always be clear-cut. In the case of providing access to safe drinking water in urban areas, for example, individuals reached with the intervention may already have had some access to clean water but this access is now improved (and is now available perhaps for longer periods of time, at a smaller distance or as a protected source). The judgement is whether the level of access has improved from not meeting the definitions within the methodology notes to now meeting the definitions after the intervention. Please make conservative estimates in this respect and contact the WASH policy team if clarification is required.</p> <p>An individual benefiting from more than one of the WASH interventions can be only counted once in the results for this indicator. This is the case even if the same individual benefits from multiple interventions in different years (that individual must still only be counted once). This can be reflected in the results reporting template by ensuring that double counting is avoided in the figures reported for the combined indicator (applying the same principles as those for avoiding double counting in the same year – see the data calculations section). However, not every individual need have access to all three interventions in order to be counted. Some people will get only one</p> <p>intervention, some will get two and some will receive all three interventions.</p> <p>The water and sanitation indicators refer to sustainability in the indicator names. Measuring sustainability is challenging and would require monitoring well beyond the timespan of the DFID</p>

	<p>Results Framework. It therefore is not possible to require that all interventions are verified as sustainable. However, sustainability should be considered within project design and monitoring.</p> <p>Note that unlike the Joint Monitoring Programme (JMP), the WASH indicators measure access rather than use. In this sense, the indicators are generally aligned with other DFID Results Framework indicators which are pitched at output rather than outcome level. Measuring use and attributing the results to DFID would be challenging and potentially more subjective.</p> <p>This results indicator is a composite indicator and this note only defines how to produce the composite data. The monitoring of individual interventions is outlined in the three specific indicator methodology notes (key sections of which are included as an Annex here).</p> <p>The results for the WASH composite indicator should combine data from the three individual indicators. How this is done will depend on available data, as set out in the 'data calculations' section below.</p>
Rationale	<p><i>Rationale for a composite indicator</i> In April 2012 the Secretary of State for International Development made a commitment to provide 60 million people with access to sustainable WASH. This commitment is included in <i>The Coalition Together in the national interest</i> (2013), with access to sustainable WASH. This commitment is included in <i>The Coalition Together in the national interest</i> (2013).</p> <p>This target supersedes the Coalition target outlined in <i>Changing Lives, Delivering Results</i> (2011). (2013) WASH services are integrated, in some cases the same people received more than one service. A single figure, capturing the number of individuals reached through either one or a combination of WASH inputs with DFID support, is the chosen measure of our overall impact.</p> <p>Data on the number of people reached with each of the three WASH inputs will also continue to be recorded because it is necessary in order to calculate the composite indicator, because it is useful contextual information on DFID's WASH programmes, and to ensure a continued high standard of transparency in our reporting to the UK public.</p> <p>Water supply: Lack of water supply has negative impacts on poverty reduction, gender equity, child health and education. Ensuring everyone has access to a safe water supply is a high priority for the coalition government.</p> <p>Sanitation: Lack of sanitation has negative impacts on child health, nutritional outcomes and education. Ensuring everyone has access to and uses sanitation is a high priority for the coalition government.</p>

	<p><i>Hygiene:</i> Hand washing with soap can reduce the prevalence of diarrhoea by 42-49%. Diarrhoea is the second greatest killer of children across the globe today and the number one cause of death in children in the continent of Africa. Good hygiene also protects against acute respiratory infections. Face and hand washing are also essential in preventing Neglected Tropical Diseases such as trachoma.</p>
Country Office Role	<p>Country offices should report this on this indicator through the DFID Results Framework data collection system. In reporting on this indicator the country office will take primary responsibility for ensuring adequate baseline data is available and that programmes include suitable indicators and requirements for regular measurement.</p> <p>Where direct budget support or sector support is being provided, country offices should determine the share of national results that can be attributed to DFID support (see general guidance on the DRF teamsite). Use of programme data on output level results (access to WASH services) is preferred.</p>
Data source	<p>Provision should be included in projects and programmes for the collection of data on improved WASH directly attributable to the intervention. This will normally be the primary source of data. Where water and sanitation results are delivered through non-specific WASH programmes, for instance health, education, social development or livelihoods, projects will need to collect WASH data in addition to other project data.</p> <p>Data on household size, where needed, should be determined from recent national census data or from a nationally representative household survey.</p> <p>In the case of sector and budget support, output level data on the three separate WaSH indicators is the preferred starting point before attributing DFID's share of results. If this is not available, national statistical data should be used but in this case, funding in the sector from other sources should be considered in addition to the government budget when calculating DFID's share of total expenditure. Water and sanitation coverage is a key indicator that we would expect to be included in partner countries national statistical record and which would provide the basic data required.</p> <p>The Joint Monitoring Programme of WHO/UNICEF (http://www.wssinfo.org/) publishes a report every 2 years using data on use of improved water supply and basic sanitation from surveys and censuses. The resulting international database of coverage provides a useful reference to assess the validity of country data (but should not be used as a primary source as the indicators measure usage and programme output level data is preferred).</p> <p>Where we are funding through multilateral partners at a country</p>

	level, they should be requested to collect WASH specific data to demonstrate results achieved.								
Data included	<p>Results are to be collected from all relevant bilateral programmes including health, education, social development and livelihoods programmes (although not humanitarian programmes unless the facilities constructed are permanent). Refer to the three separate WASH methodology notes for further details on definitions of which facilities/interventions may be included.</p> <p>WASH results achieved through DFID core funding to multilateral organisations will be considered separately, following an agreed approach across DFID. Only bilateral results (including 'bilateral through a multilateral') should be included in the DRF template.</p> <p>Where specific support is provided to multilaterals at country level to support water, sanitation and hygiene programmes ("multi-bi"), it should be possible to attribute results to DFID but care will be needed to avoid double-counting with global programmes. If you have questions please contact the Statistics Adviser in the WASH Policy Team.</p>								
Data calculations	<p>Two issues arise in calculating the number of unique people with sustainable access to one or more WASH services as a result of DFID support. More than one programme may target the same Geographical area and the same people may receive more than one type of WaSH intervention.</p> <p>(1) If detailed information is available on WASH services received, compile a list of communities (with populations) where WASH programmes (which may be overlapping) operate and categorise them using the matrix of the 7 possible interventions below. For each category sum the population being served by each intervention or combination of interventions. Summing the total from each category then provides the total number of unique beneficiaries, ensuring that people receiving more than one intervention are counted once only.</p> <table border="1"> <tr> <td>Water only</td><td>Water and sanitation</td></tr> <tr> <td>Sanitation only</td><td>Water and hygiene education</td></tr> <tr> <td>Hygiene education only</td><td>Sanitation and hygiene education</td></tr> <tr> <td></td><td>Water, sanitation and hygiene education</td></tr> </table> <p>Example</p> <p>A WASH programme provides 140,000 people with access to clean water, 60,000 with access to sanitation and 160,000 with hygiene education.</p>	Water only	Water and sanitation	Sanitation only	Water and hygiene education	Hygiene education only	Sanitation and hygiene education		Water, sanitation and hygiene education
Water only	Water and sanitation								
Sanitation only	Water and hygiene education								
Hygiene education only	Sanitation and hygiene education								
	Water, sanitation and hygiene education								

	<p>In terms of the categories above, project data shows that we have the following numbers of people:</p> <p>Hygiene only: 50,000 Water only: 40,000 Sanitation only: 25,000 Water and hygiene: 75,000 Sanitation and hygiene: 10,000 Water, sanitation and hygiene: 25,000</p> <p>The total number of unique people receiving WASH services is 225,000 (the total of these categories).</p> <p>(2) If detailed information is not available for analysis of services received, estimate the size of the population for which the programmes overlap and take only the highest figure from each type of WaSH intervention for the populations concerned.</p> <p>Example: fully overlapping programmes or one programme providing a range of WASH interventions</p> <p>DFID's funding to the UNICEF Water and Health programme in Eritrea will provide sustainable access to an improved sanitation facility for 90,000 people and sustainable access to water for 20,000 people.</p> <p>The people provided with water and sanitation access will be in the same six regions of Eritrea, so we assume the results could largely or fully overlap. The larger figure of 90,000 people is used as a conservative estimate of unique people reached with access to water, sanitation or both.</p> <p>Example: partly overlapping programmes</p> <p>Two programmes exist as follows within the same country:</p> <p>Water: 100,000 people</p> <p>Sanitation: 80,000 people</p> <p>These two programmes overlap Geographically and it is not possible to determine how many people receive only water, only sanitation or both.</p> <p>If the programmes only partly overlap Geographically, the results could be scaled accordingly using the percentage overlap. For example, if only 25% of the sanitation results above are achieved in the same regions as the water results, the total result recorded should be 160,000 people calculated as follows:</p> <p>Highest result (water = 100,000) + non-overlapping sanitation result (60,000 = 75% of 80,000) = 160,000</p>
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Worked example	See imbedded examples above
Baseline	Baselines vary by country and 'results achieved between baseline and milestone 1' should be reported in the DRF template in addition to results for 2011/12 onwards where applicable. For projects, baseline data should be collected at the start of the project.
Good Performance	Good performance will be if the project is on track to meet the targets set out in the logframe.
Return format	Number of unique people reached with one or more water, sanitation or hygiene promotion intervention.
Data dis-aggregation	<p>Data should be reported separately on the numbers of people provided with access to improved water supply; improved sanitation; and improved hygiene. There is space for this and to report on this combined indicator in the results template.</p> <p>Women and girls are most severely affected by the lack of adequate WASH. At the household level it is expected that all family members would benefit from the provision of the facility and therefore it may not make sense to sex disaggregate.</p> <p>Where there are specific gender impacts or issues (for example, a project aiming to increase access to sanitation for women and girls), data should be disaggregated by sex to the extent possible.</p> <p>Whilst this is not a requirement for DRF reporting, the MDG target indicator disaggregates data according to rural/urban and so this data should be collected wherever possible for the purposes of monitoring. Data should also be disaggregated by age where possible for this purpose.</p>
Data availability	Provision should be included in projects and programmes for the collection of data on improved WASH directly attributable to the intervention. This will normally be the primary source of data. In cases such as general budget support where project level data may not be available, other sources may be used provided that DFID's attribution can be calculated. This may include national management information systems. In cases where it is difficult to calculate numbers for unique people or the overlaps in WASH provision, the alternative methods outlined in the 'Data calculations' section above may be used.
Time period / lag	Data collection and analysis is likely to take a minimum of six to twelve months. Results achieved in previous years should be reported against that year as data becomes available.
Reporting Organisation	Data should be collected as part of project monitoring or national data (i.e. management information) may be the main source for general and sector budget support.
Quality assurance measures	It is recognised that the quality of data available to estimate the number of people reached with WASH interventions who did not previously have access to the services as defined in the methodology notes will vary. The quality of information on overlap between programmes will also vary. Please indicate any concerns in this respect in the results template and ensure that estimates are conservative where necessary by, for

	<p>example, excluding overlap between programmes where data is not available on beneficiaries at an individual level (see data calculations section).</p> <p>The JMP of UNICEF/World Health Organisation collates and analyses data on use of water and sanitation facilities from a range of developing countries every 2 years. JMP uses national sources of data and a common indicator definition to estimate progress in the sector. This provides an independent assessment of country's own estimates of progress. Please note that this is a complementary, quality assurance measure which may not be directly comparable with DFID's indicators.</p>
Data issues	Please refer to the annex for detail on data issues related to each of the 3 WASH interventions.

Indicator description	Number of people with sustainable access to clean drinking water sources through DFID support
Type of Indicator	Cumulative – annual results are reported and summed over the entire reporting period, assuming that each individual is counted within one year only.
Methodological summary	<p>The bilateral results attributable to DFID will be those from direct investment in improved drinking water sources.</p> <p>The results are based on the ‘number of water points built or rehabilitated’ multiplied by the ‘number of beneficiaries per water point’.</p> <p>An improved drinking-water source is defined as one that, by nature of its construction or through active intervention, is protected from outside contamination, in particular from contamination with faecal matter.</p> <p>Improved facilities include piped water into dwelling; piped water to yard/plot; public tap or standpipe; tubewell or borehole; protected dug well; protected spring; and rainwater.</p> <p>This indicator <u>excludes</u> temporary facilities constructed as part of humanitarian interventions and other temporary means of water provision (e.g. bottles). Permanent facilities constructed under humanitarian programmes should be included.</p>
Data source	<p>Data should be collected as part of project monitoring or national data (i.e. management information) may be the main source for general and sector budget support.</p> <p>National surveys or JMP data (http://www.wssinfo.org/) may be used to provide a sense check on output level data, particularly for general or sector budget support.</p>
Data calculations	<p>Indicator = $(c+r) \times b$</p> <p>where:</p> <p>c = number of water points constructed r = number of water points rehabilitated b = number of beneficiaries per water point</p> <p>A common example of b is where $b = n \times h$ n = average number of households served by each water point h = average number of people per household⁶.</p> <p>In many cases, multipliers ‘b’ for a variety of interventions will have been developed in each country. For example, the value of b will differ for different types of water point constructed and in different locations.</p> <p>WASH results achieved through DFID core funding to multilateral organisations will be considered separately, following an agreed approach across DFID. Only bilateral</p>

⁶ Figures for average household size will be available from the latest census or (nationally representative) household survey. The average household size may differ between urban and rural.

	<p>results (including 'bilateral through a multilateral') should be included in the DRF template.</p> <p>It is important to avoid double counting of results. If the same people are beneficiaries in multiple years then the results for each year cannot be added together. It is unlikely that this will be the case with providing clean water facilities but any potential areas of double counting should be considered. However if the number of people able to access water points increases over the life of the programme/project the larger number can be used when reporting results.</p> <p>Where countries are supporting clean water provision through multiple funding mechanisms e.g. non- Government programmes, sector budget support and general budget support there are significant risks of double counting. Calculations to avoid this can be complex. Please contact the statistics lead on WASH for further advice.</p> <p>Where facilities are provided within public buildings such as schools or clinics but are not freely accessible to a community, the number of people reached cannot be included in this access indicator as their access is considered partial, in contrast to household access. Data on these kinds of facilities should be collected for project monitoring but should not be included in the DRF template. However, facilities provided within a community which can be accessed freely by all members of that community (e.g. a shared, protected spring) may be included. Judgement may be required and the WASH team can provide advice if necessary.</p> <p>Note that this calculation does not include a measure of whether the water sources remain in use after a given period of time, i.e. it does not include a measure of the sustainability of the intervention. This data should be collected where possible for project monitoring purposes.</p>
Worked example	<p>DFID provides 10% of the cost of a programme that has constructed 4,000 improved water sources and rehabilitated 1,000 water sources.</p> <p>Data shows that each serves an average of 50 households of average size 6 people.</p> <p>Indicator = $0.1 \times (4,000 + 1,000) \times 50 \times 6 = 150,000$</p>
Data issues	<p>It is important to note that DFID's methodology is consistent with the approach used by national government and multilateral organisations but is different to the JMP methodology that measures the number of people using improved sources of water. The JMP methodology includes people who gain access through self-supply but does not include people who live near an improved source but are excluded from using it for social, economic or other reasons.</p>

Indicator description	Number of people with sustainable access to an improved sanitation facility through DFID support
Type of indicator	Cumulative – annual results are reported and summed over the entire reporting period assuming that each individual is counted within one year only.
Methodological summary	<p>This result is based upon the ‘number of sanitation facilities constructed’ multiplied by the ‘average number of beneficiaries per sanitation facility’</p> <p>The bilateral results attributable to DFID will be:</p> <p>(1) DFID-supported programmes that directly result in beneficiaries constructing their own facilities, for example Community-Led Total Sanitation (CLTS), Total Sanitation and Sanitation Marketing (TSSM) or other Community Approaches to Total Sanitation (CATS)⁷, where these activities are carried out with the purpose of eliminating open defecation in communities;</p> <p>(2) Those people who benefit from direct investment in sanitation facilities in the form of construction or rehabilitation of improved⁸ sanitation facilities.</p> <p>Facilities constructed under (1) may not meet the Joint Monitoring Programme (JMP) definition of ‘improved sanitation’ but should eliminate open defecation. This is consistent with the sanitation ladder approach adopted under the JMP. Therefore, latrines constructed with DFID support do not need to comply with the JMP definition of an ‘improved’ latrine in order to be counted towards our results, provided that they contribute towards eliminating open defecation in communities.</p> <p>The Country Office may choose to disaggregate results into facilities that meet the JMP definition of ‘improved’ and those that are ‘unimproved’ according to the JMP but eliminate open defecation. This will generate a more fine-grained picture of DFID’s in-country contribution, but this will not affect the results to be reported centrally, which include both categories.</p> <p>This indicator <u>excludes</u> temporary facilities constructed as part of humanitarian interventions.</p> <p>Permanent facilities constructed under humanitarian programmes may be included.</p>
Data source	<p>Data should be collected as part of project monitoring or national data (i.e. management information) may be the main source for general and sector budget support.</p> <p>National surveys or JMP data (http://www.wssinfo.org/) may be used to provide a sense check on output level data.</p>

⁷ Monitoring should be carried out to verify that improved facilities have in fact been constructed.

⁸ **Improved facilities** include flush/pour flush toilets or latrines connected to a sewer, -septic tank, or -pit, ventilated improved pit latrines, pit latrines with a slab or platform of any material which covers the pit entirely, except for the drop hole and composting toilets/latrines.

Data calculations	<p>Indicator = $s \times b$</p> <p>where:</p> <p>s = number of sanitation facilities constructed (if this is not monitored it could be estimated using h (number of households reached by a sanitation campaign (programme data) $\times r$ (average ratio of latrines constructed as a result of the campaign (from a sample survey))), see worked example)</p> <p>b = number of beneficiaries per sanitation facility. This is usually = average number of people per household</p> <p>Where facilities are provided within public buildings such as schools or clinics but are not freely accessible to a community, the number of people reached cannot be included in this access indicator as their access is considered partial, in contrast to household access. Data on these kinds of facilities should be collected for project monitoring but should not be included in the DRF template. However, facilities provided within a community which can be accessed freely by that community (e.g. within a market or other shared community area) may be included. Judgement may be required and the WASH team can provide advice if necessary.</p> <p>WASH results achieved through DFID core funding to multilateral organisations will be considered separately, following an agreed approach across DFID. Only bilateral results (including 'bilateral through a multilateral') should be included in the DRF template.</p> <p>It is important to avoid double counting of results. If the same people are beneficiaries in multiple years then the results for each year cannot be added together. It is unlikely that this will be the case with providing sanitation facilities but any potential areas of double counting should be considered. However if the number of people able to access sanitation increases over the life of the programme / project the larger number can be used when reporting results.</p> <p>Where countries are supporting sanitation provision through multiple funding mechanisms e.g. non- Government programmes, sector budget support and general budget support there are significant risks of double counting. Calculations to avoid this can be complex. Please contact the statistics lead on Water and Sanitation (Watsan) for further advice.</p> <p>Note that this calculation does not include a measure of whether the sanitation facilities remain in use after a given period of time, i.e. it does not include a measure of the sustainability of the intervention. This data should be collected where possible for project monitoring purposes.</p>
Worked example	Where the <u>number of sanitation facilities is monitored directly</u> :

	<p>DFID provides 20% of the cost of a programme that has constructed 5,000 sanitation facilities, with an average number of beneficiaries per sanitation facility of 10.</p> <p>Indicator = $0.2 \times 5,000 \times 10 = 10,000$</p> <p>Or, where the <u>number of beneficiaries of sanitation promotion is monitored only</u>:</p> <p><u>DFID reaches 50,000 households with a sanitation campaign. A survey shows that on average, one latrine is built per 10 households reached through the campaign, generally for private household use. The average household size is 6.DFID provided 50% of the funding.</u></p> <p>Indicator = $50,000 \times 0.1 \times 6 \times 0.5 = 15,000$</p>
Data issues	<p>National programmes frequently count the number of facilities constructed. It is important to verify using other means that such facilities are brought into use for their intended purpose.</p>

Indicator description	Number of people with access to improved hygiene through DFID support to hygiene promotion
Type of Indicator	Cumulative – annual results are reported and summed over the entire reporting period, assuming that each individual is counted within one year only.
Methodological summary	<p>This indicator is an output measure of the number of beneficiaries of hygiene programmes.</p> <p>Understanding whether hygiene promotion has in fact led to behaviour change (i.e. improved hygiene) is at the heart of understanding the impact of hygiene promotion programmes. This is not required as part of this indicator due to the difficulties in measuring behaviour change, but should be measured and recorded (as part of project monitoring) wherever possible. Indicators of key hygiene practices vary across a broad spectrum and are included in the later 'Data Issues' section for reference.</p> <p>The numbers reported must be attributable to DFID. See the DFID Results Framework general guidance</p> <p>Hygiene promotion is defined as “a planned approach to preventing diarrhoeal diseases through the widespread adoption of safe hygiene practices. It begins with, and is built on what local people know, do and want.” (UNICEF definition)</p> <p>Hygiene promotion activities can cover communication, social mobilisation, community participation, social marketing and advocacy, to bring about behaviour change.</p>
Data source	<p>Programme data on number of beneficiaries. Provision should be included in projects for collection of data on number of beneficiaries directly attributable to the intervention. This will normally be the primary source of data.</p> <p>Where water results are delivered through non-specific WASH programmes, for instance health, education, social development or livelihoods, projects will need to collect WASH data in addition to other project data.</p> <p>In the case of sector and budget support, output level data (i.e. the number of people reached with hygiene promotion) is the preferred starting point before attributing DFID's share of results. If this is not available, national statistical data should be used but in this case, funding in the sector from other sources should be considered in addition to the government budget when calculating DFID's share of total expenditure.</p> <p>Where we are funding through multilateral partners at a country level, they should be requested to collect WASH specific data to demonstrate results achieved.</p> <p>We recognise the difficulties in this area and are happy to discuss solutions that country offices may propose.</p>

Data calculations	<p>This is a simple count of the number of beneficiaries of each relevant programme with an attempt to remove double counting.</p> <p>It is important to avoid double counting of results. If the same people are beneficiaries in multiple years then the results for each year cannot be added together. This is quite possible in the case of hygiene promotion.</p> <p>WASH results achieved through DFID core funding to multilateral organisations will be considered separately, following an agreed approach across DFID. Only bilateral results (including 'bilateral through a multilateral') should be included in the DRF template.</p> <p>Where specific support is provided to multilaterals at country level (i.e. 'bilateral through a multilateral' programmes) to support water and sanitation programmes, it may be possible to attribute results to DFID but care will be needed to avoid double-counting with global programmes. Contact the statistics lead on Water and Sanitation (Watsan) for further advice if necessary.</p> <p>If there is more than one type of hygiene promotion activity in the country, the total number of <u>unique</u> beneficiaries should be reported.</p> <p>Hygiene promotion beneficiaries of broader sectoral programmes including health, education, social development and livelihoods should be included against this indicator. However it is important that only the beneficiaries actually reached with hygiene promotion are included. An example could be that 3 million people receive improved health services and that (of those 3 million), 500,000 people are covered by a handwashing programme. The count against this indicator should be 500,000 (with monitoring of behaviour change, in addition, wherever possible).</p> <p>Where countries are supporting hygiene promotion through multiple funding mechanisms e.g. non Government programmes, sector budget support and general budget support there are significant risks of double counting. Calculations to avoid this can be complex.</p> <p>Note that this indicator will at times overlap with the sanitation indicator. This is if the beneficiaries of a hygiene programme go on to build a latrine. These people may be counted under both indicators but must only be counted once for the purposes of the combined indicator on access to one or more WASH services.</p>
Data issues	<p>We encourage input from offices, particularly on the data challenges.</p> <p>This indicator is an output indicator. It does not capture</p>

	<p>whether the beneficiaries of programmes go on to use best hygiene practices.</p> <p>This indicator has been preferred to the proxy for handwashing with soap (proportion of households with a designated place to wash hands, in or near the sanitation facility, with a hand cleansing agent (soap or ash) and water available at the time of inspection). This is because of the difficulties of measurement and attribution. It is important to note that mere presence of a facility does not mean that behaviour has changed. What we really want to measure is consistency and frequency of use.</p> <p>But country offices are encouraged to use this proxy indicator to evaluate the reach of their work where available.</p> <p>Indicators of key hygiene practices vary across a broad spectrum but include:</p> <ul style="list-style-type: none"> • Handwashing at the 4 critical times; after defecation, after cleaning a baby/child after baby/child's defecation, before preparing food, before feeding a child. • Observing the safe drinking water chain from protected source to mouth (covering collection, transport (portage), storage and extraction for drinking e.g. ladle, two cup system, and tap. • Ensuring a safe, clean environment i.e. keeping both human and animal faeces out of the immediate living environment as well as other organic waste which promotes fly breeding with all such waste deposited in rubbish/compost pits at a safe distance from the compound. • Safe storage of food • Safe storage of utensils <p>Approaches to measurement/assessment vary depending on a number of factors including the type of intervention and resources available for monitoring.</p> <p>The three standard approaches, in order of increasing difficulty and resource-intensiveness are:</p> <ol style="list-style-type: none"> 1. Self report (interview or questionnaire survey). Example indicator: % reporting washing hands with soap at critical times (e.g. after defecation). 2. Proxy/inference (e.g. "spot checks" of facilities, knowledge questions). Example indicator: % households with soap & water present at the designated place for handwashing (DHS survey question 137, 138 and 139 or Handwashing Module of MICS survey). 3. Structured observation of behaviour. Example Indicator: % of caregivers observed washing hands with soap at critical times (e.g. before food preparation). <p>At the level of medium to large scale programmes a</p>
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	<p>combination of self-report and proxy measures may be most appropriate but these should be combined with direct observation data from a sample of the target population.</p> <p>The method adopted to measure hygiene practices is left to the discretion of the country office.</p>
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Annex C - Evaluation Theory of Change

