UN-Water Global Annual Assessment on Sanitation and Drinking-water (GLAAS)

Country Sanitation and Drinking Water Sectors questionnaire

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Please **type** your answers in the **yellow** boxes in the Response column only. Enter information in text boxes where requested. If brief text is asked for – please provide a one or two sentence response. The box will expand as you type to allow you to enter your answers. Where information is not available, simply indicate "Not Available" in response box.

your answers. Where information	on is not available, simply indicate. Not Available. In response box.	
Please indicate which calendar y	ear you're entering data for. Please use the latest year with complete available data:	
Contact Information		
Please fill in the following inform	nation:	
Country:		
Name of primary respondent:		
Email address:		
Job title:		
Ministry/Department:		

Sector overview

Respondents are asked to place sanitation and hygiene sector and drinking water supply sector in one of five levels of development, under four headings, as shown below. The aim is to place one x in each column, showing where your sector is located, for each of the categories. Please consult the attached categorisation guidelines before carrying out this task. Having done so, please place an **x** in one box in each column of the table below.

		Sanitation & Hygiene				Drinking Wa	ter Supply		
		Service level	Human resource capacity	Institutional capacity	Financial system capacity	Service level	Human resource capacity	Institutional capacity	Financial system capacity
1.	Very low								
2.	Low								
3.	Medium								
4.	High								
5.	Very high								

Section 1: Status and Need

1.	Service levels -	What is the current le	evel of hygienically	adequate sanitation	and safe drinking wat	ter in urban and	rural
are	eas?						

	Sanitation & Hygiene		Drinking Wa	iter Supply
	Urban	Rural	Urban	Rural
Coverage Level (%)				
Information Source				

2. Service level definitions

Please place x in appropriate box	Yes	No
a) Are the national definitions of improved sanitation coverage consistent with the WHO/UNICEF Joint		
Monitoring Programme definition (see Guidance Notes)? If no, please briefly indicate differences in comments		
section below.		
b) Are the national definitions of safe drinking water coverage consistent with the WHO/UNICEF Joint		
Monitoring Programme definition (see Guidance Notes)? If no, please briefly indicate differences in comments		
section below.		

3. Service level monitoring - Is there a suitable system for monitoring sanitation (including sewerage and its treatment, where relevant) and safe drinking water coverage? *Please insert an x into the boxes (one for each column) which most accurately reflects your current status*

Opti	on	Sanitation & Hygiene	Drinking- Water
1.	There is no effective monitoring		
2.	There is little monitoring and it is not linked onto planning		
3.	There is significant amounts of monitoring but it is largely free standing		
4.	There is widespread monitoring but it is not well integrated into review and planning		
5.	There is a widespread monitoring system which is integrated into sector review and planning		

4. Sanitation in schools and public facilities – What percentage of schools and hospitals/healthcare centres have adequate sanitation facilities?

	% with adequate facilities
Primary schools	
Secondary schools	
Hospitals	
Healthcare centres	

Hospitals					
Healthcare centres					
5. Hygiene education				Yes	No
Do you have hygiene education p	orogrammes in your country (\	es/No) (please place X in	appropriate box)		
6. Water Quality – Please indica	ate any major issues affecting	water quality in your cou	ıntry.		

Section 2: Policy and Institutions

7. Institutional arrangements – What is the current status of governmental responsibility and coordination for sanitation and drinking water supply? *Please insert x in the box which most accurately reflects your country's current status (one per column).*

Option	Sanitation & Hygiene	Drinking Water
Responsibility is not established and no coordination mechanism exists.		
2. Responsibility is established to a degree but no coordination is attempted.		
3. Resides in relevant ministry or ministries, and acceptable cross-departmental coordination mechanism exists but does not function effectively.		
4. Resides in relevant ministry or ministries, and acceptable cross-departmental coordination mechanism exists and functions intermittently.		
5. Resides in relevant ministry or ministries, arrangements are clear and accepted, and cross-departmental coordination mechanism exists and functions well.		

8. Division of roles – Is responsibility for legislation/policy, regulation and service delivery clearly separated and demarcated? *Please insert x in the box which most accurately reflects your current status (one per column).*

Option		Drinking Water
		water
These aspects are clearly separated and the arrangements are functioning adequately		
2. These aspects are demarcated to some extent and the arrangements function to a degree.		
3. These aspects are not separated.		

9. National Sector Strategies - Is there a National Hygiene and Sanitation Strategy/Plan? Is there a National Drinking-Water Strategy/Plan? *Please insert x in the boxes (one per column) that most accurately reflects your country's current status.*

Option	Sanitation &	Drinking
Орион	Hygiene	Water
1. Comprehensive Strategy/Plan exists, has full sector/ government buy in and is being widely implemented.		
2. A partial Strategy/Plan exists, has limited buy in and is being implemented partially		
3. There is no sector Strategy/Plan		

10. National Standards for Drinking-Water Quality - *Please insert x in the box that most accurately reflects your country's current status.*

Option	Drinking Water
There are National Guidelines for drinking-water quality and they are based on the WHO Guidelines for Drinking-water Quality	
2. There are National Guidelines for drinking-water quality and they are NOT based on the WHO Guidelines for Drinking-water Quality	
3. There are no National Standards. The WHO Guidelines for Drinking-water Quality are used instead	
4. There are no recognised standards or guidelines	

11. Participation - Is there a mechanism for civil society to engage in planning and monitoring the performance of the sanitation & hygiene sector and the drinking-water supply sector, including where relevant monitoring coverage? *Please insert x in the box which most accurately reflects your current status (one per column*).

Option		Sanitation & Hygiene	Drinking Water
There is such a mechanism and it functions well.			
2. There is such a mechanism but it does not function well			
3. There is no such mechanism			

12. Sector Reviews – Is there a multi-stakeholder sector review process *specifically* for sanitation and hygiene? Is there a multi-stakeholder sector review process *specifically* for drinking water supply? *Please insert x in the box which most accurately reflects your current status (one per column).*

Option	Sanitation & Hygiene	Drinking Water
There is no sector review proceess		
2. Some limited and/or uncoordinated sector reviews have been undertaken		
3. There is infrequent sector review involving some sector stakeholders OR sector review is contained within the review process for another sector		
4. There is an annual sector review involving many sector stakeholders that contributes to sector planning.		
5. There is an annual sector review involving all stakeholders that is at the centre of sector planning.		

13. Decentralisation (Water Supply Only) – To what degree has decentralisation of service delivery been carried out? *Please insert x in the box which most accurately reflects your current status.*

Option	Drinking Water
Full political, administrative and fiscal decentralisation	
2. Some degree of decentralisation has taken place	
3. All responsibilities are centralised	

Section 3: Resources and Finance

14. Human Resources Do the sanitation and hygiene sector and drinking-water sector have sufficient capable, trained personnel to be able to carry out the tasks required of it? *Please insert x to indicate the position which applies in your country for each category of staff.*

	Sanitation & Hygiene			Drinking Water Supply		
Sector Roles	Enough	Barely	Not	Enough	Barely	Not
		enough	enough		enough	enough
Civil servants (central government staff)						
Local government staff						
Local private sector						
Engineers/technicians						
Hygiene extension workers						

15. Sector Expenditure	Sanitation & Hygiene	Drinking Water				
What proportion of your total government expenditure is spent on the sanitation and drinkingwater supply sectors? <i>Please disaggregate the two sectors if possible.</i>						
16. Finance Source Amount – Please list the total expenditure on sanitation and drinking water (hardware, including rehabilitation, and software) including that spent by households – even if this is an estimate. <i>Please remember to fill in the currency box.</i>						
Finance Source Currency :			Sanitation & Hygiene	Drinking Water		
External funding sources (all)		70				
Households						
Internal (Government)						
Internal (Private sector).						
Total (known)						
17. Finance Categorisation – Please allocate the total (from above, including household sourced expenditure) into the categories. <i>Please remember to fill in the currency box</i> .						
Finance Category	Currency :		Sanitation & Hygiene	Drinking Water		
Capital investment						
Capital maintenance						
Operation & maintenance						
Direct support (e.g. promotion)						
Indirect support (e.g. programmatic, planning	etc costs)					
Total						
18. Financial Transparency - How transparent and coordinated are the funding channels (the routes by which funds travel), including particularly the extent to which they are included in national budgets? <i>Please insert x in the box which most accurately reflects your current status (one x per column).</i>						
Option				Drinking		
·			Hygiene	Water		
1. Over 80% of sector funds are included in b						
2. Between 50% and 80& of sector funds are						
3. Much expenditure is off budget. Not often						
19. Comments and References						
Please enter any additional general comment on	the above questions in					
Please also list any main reference documents ye	ou have used in compiling					
your responses.						

GUIDANCE NOTES FOR SANITATION AND DRINKING WATER GLAAS QUESTIONNAIRE - SHORT FORM

The text in each cell in the matrix represents a typical *example* of a scenario for each parameter: judgment and consideration of the situation are required within each country to reveal its position in each column.

	Service level	Human resources capacity	Institutional capacity	Financial system capacity
1. Very low	Typically less than 40% and no significant upwards trend	Problems in recruiting adequately trained staff are common. Depending on national arrangements staff retention may be problematic. Often training provision will be significantly driven through <i>ad hoc</i> arrangements (e.g. one-off courses)	There may or may not be a declared sector policy but if present it is likely to have been developed through an externally-driven process or with limited participation of different institutional and sectoral actors. Institutional arrangements are likely to be unclear and if clear may not be reflected in practice.	Inadequate to advance access to a significant degree, and/or maintain existing facilities. Any financial planning is likely to be generic and have limited information support
2. Low	May be low (i.e. 20 –60%) but does show year on year improvement	Significant but potentially not adequate. Often a mix of stable and ad hoc training provision. Likely to be significant 'gaps' (i.e. some areas of training expertise significantly underrepresented).	May be weak but typically there is policy commitment at local and/or national levels, although institutional arrangements may lag.	Significant for 'initial investment' but stable mechanisms for recurrent (renewal, O&M costs) likely to be absent. Typically some form of national sector financial overview is present but availability of hard data is a significant constraint.
3. Medium	High levels achieved only in urban areas (i.e. up to 90%), but rates of year on year improvement are likely to be low. Typically there is an increasing amount of higher service levels (e.g. septic tanks and piped sewer systems, piped water). Service levels in rural areas lag behind.	Moderate or better as typical country has gone through a phase of extending access. Orientation of capacity may be weak (e.g. need to re-focus on renewal /O&M). Often capacity is low in relation to meeting higher service levels. Training/educational provision often involves a mix of formal institutions and ad hoc arrangements	Strengthened policy position but developed without strong participatory processes. Institutions growing in strength especially at the national level but regulation is largely absent.	Understanding of the financial needs and constraints of the sector significantly developed but may not be consolidated. The link between planning and stable financing may remain limited.
4. High	Basic access levels are high (e.g. over 90%) in both urban and rural areas.	Extensive capacity including routine provision of further and higher education through mainstream training educational institutions.	Some sectoral policy statements available; these are generated through participatory processes and periodically (but not necessarily frequently) updated. Normally well-defined institutional roles at national, local government (and often regional) levels. May be weaker with regard to formal regulation of higher service levels. Some regulation of service providers is in place and implemented through an independent agency although often at a moderate - low level.	Financial planning at national level developed; capacity within service providing institutions may remain significantly limited. Public financial accountability may be moderate/limited.
. Very igh	As above, plus piped sewer/water coverage is high. Service includes effective wastewater treatment and management. Service includes effective safety planning and management	As above plus specialist knowledge at hand and experienced specialists trained, available and adequate.	As above, plus formal regulation in place for all major functions, services and products	Both national planning and financial planning and accountability among service providers is sophisticated and open to scrutiny. Typically debate occurs in both academic and public media and is supported by data and information.

GUIDANCE NOTES:

1. Service levels

Self-explanatory.

2. Service Level Definitions.

JMP defined improved sanitation facilities:

- Flush or pour–flush to:
 - piped sewer system
 - septic tank
 - pit latrine
- Ventilated improved pit latrine
- Pit latrine with slab
- Composting toilet

JMP defined improved water supplies:

- Piped water into dwelling, yard or plot
- Public tap/standpipe
- Tubewell/borehole
- Protected dug well
- Protected spring
- Rainwater collection

For further information on JMP: www.wssinfo.org

3. Service Level Monitoring

An important part of ensuring progress is having a mechanism to monitor the existing situation. "Suitable" here means the respondent's view of whether the mechanism is up to the task required in the context.

4. Sanitation in schools and public facilities

What constitutes "adequate" may probably be locally defined, but will include consideration of such parameters as provision of sufficient numbers for boys and girls, and male/female staff, that these are separate, that they are kept clean and there is cleansing and washing material appropriate to the context, and that menstrual management facilities are provided for girls/women as appropriate. Provision of sanitation in public facilities is often a forgotten element of sanitation – but vital in achieving elimination of open defecation.

5. Hygiene education

Such appropriate hygiene behaviours could include handwashing with soap at appropriate times; safe storage of water at the household level; cleaning of the home and surrounding areas; disposal of domestic waste; etc..

6. Water Quality

Please provide a brief comment on issues of water quality that are of strategic importance (i.e. that impact materially upon achievement of MDGs/universal coverage), including specific contamination problems.

7. Institutional arrangements

Self -explanatory.

8. Division of roles

The separation of policy development, operations and regulation is seen as helpful to enhancing coverage and efficiency/effectiveness of service delivery.

9. National Sector Strategies

A plan or strategy is taken here to be a document which sets out a roadmap to achieving some appropriate combination of the sanitation MDG goal, some other locally specified target and/or universal coverage. Within the document one might expect to find credible disaggregated estimates of coverage, the methods to reach the goals set, what finance is required and where it will be found, of the policy in respect of subsidy, and O&M, and of the disbursement and monitoring mechanisms (including data gathering).

10. National Standards for Drinking-Water Quality

Self-explanatory.

11. Participation

This is asked in recognition of the view that local accountability is an important ingredient in creating an environment in which progress can be accelerated – in coverage and/or service level

12. Sector Reviews

This is asked in recognition of the view that such a mechanism is a pre-requisite for progress in the sector. Respondents are asked to note that the issue of being *specific* to the hygiene & sanitation sector is important – as against a situation where such a review might be contained within that for the water or health sectors and so not result in the outcomes that would be helpful.

13. Decentralisation

In some locations decentralisation has been of assistance in effective service delivery, but not all. This question allows a comparison to be undertaken.

14. Human Resources

This question is designed to gain some idea of the extent of skilled people in different roles that are available to the sector. This is in recognition of the belief that "capacity" shortages are a critical blockage to progress.

15. Sector Expenditure

The aim here is to compare actual percentage expenditures (not budgets)

16. Finance Source Amount

There are two factors that are being explored here.

- 1) It is known that governments should direct their spend to software if sustainable behaviour change is to follow.
- 2 It is felt that much of the sector expenditures are made by households. Although it is recognised that getting data for household expenditure will not be easy in many cases, it is worthwhile to try and establish the scale of this source of spending.

The text box could be usefully used here to indicate the degree of confidence in the figures provided.

17. Finance Categorisation

Much emphasis is given to the sector to capital requirements, but other types of expenditure are vital to sustainability. The typology here is felt to be the most revealing split and is standard in many accounting arenas. See the Glossary below for definitions of the terms used.

18. Financial Transparency

A further "better finance" factor is the extent to which the funding channels operate efficiently and openly.

Glossary

Accountability

In this context refers to the ability of local people to be able to monitor service provision and demand improvements where necessary.

Allocation

This refers to the *intent* of a government or donor to fund certain activities or programmes.

Capital investments

Expenditure on fixed assets - these are the hardware investment costs, of pumps, pipes, latrines, etc

Capital (preventive) maintenance

The full depreciated replacement costs – which rarely are taken into account in investment decisions.

Direct support costs

These are the software costs (training, facilitation, community mobilization, hygiene education, etc.) associated with the implementation of hardware

Disbursements

Reflect the execution of projects/programmes and the real transfer of funds. Disbursements record the actual transfer of financial resources, goods and services. As a project or programme is usually not realised in a year, there is no direct relation between the level of commitment and the level of disbursement during one period.

Emergency

An "emergency" is an urgent situation created by an abnormal event which a government cannot meet out of its own resources and which result in human suffering and /or loss of crops or livestock. The item also includes support for disaster preparedness.

Emergency can result from:

- sudden natural or man-made disasters, including wars or severe civil unrest;
- food scarcity conditions arising from crop failure owing to drought, pests and diseases;

In this questionnaire, it refers to short-term assistance (emergency/conflict) and also longer term assistance to fragile states (post-conflict situation, post-tsunami, etc.) related with WASH.

Indirect support costs

These are the costs that fall outside the direct implementation of a system, but which are needed at higher levels of scale, such as training of district staff, development of water resources management plans, etc.

Operating & minor maintenance expenditures

These are the annual operation and minor maintenance costs, such as the costs of diesel or electricity for pumping, costs of operational staff, small replacements – usually required to be paid by beneficiaries either through tariffs or user fees.

WASH

Water Supply, Sanitation and Hygiene – refers to urban and rural, large and small systems. Includes for instance: handpumps, spring catchment, gravity fed systems, rainwater collection, storage tanks, small distribution systems, latrines, small –bore sewers, septic tanks, intake, storage, treatment, pumping stations, distribution systems, sewerage, waste water treatment plants, water and sanitation sector policy, planning, management and legislation, capacity building at all levels, support costs to community management, etc.