Country Name

conducted by Senegal Office: February, 2020

Republic of Senegal	Kédougou and Matam Regions					
I. Project Outline						
Background	In the regions of Tambacounda, Kédougou, and Matam located in the western part of Senegal, where the poverty rate is high, the proportion of population with access to basic sanitation facilities was significantly lower than the national average due to lack of personal hygiene of villagers and underdevelopment of hygiene facility including toilets. Such poor hygienic environment and the lack of safe water caused water-borne diseases including diarrhea and resulted in issues such as high infant mortality rate. While the government of Senegal, the development partners and other related institutions have been improving cooperative structures by formulating sanitation platforms, the level of their functions varied from region to region. Besides, although the process of a series of hygienic environment improvement activities was standardized by the government, most of their activities have not been conducted according to the standard.					
Objectives of the Project	Through implementing sanitation promotion activities and constructions of sanitation facilities in the target villages in the three target regions, the project aimed at improving hygienic behaviors and access to basic sanitation facilities of the population in the target villages, thereby contributing to improving hygienic behaviors and access to basic sanitation facilities in rural communities in the three target regions.  1. Overall Goal: The sanitation behaviours of target population and access to basic sanitation facilities in rural communities are improved in the three target regions through coordinated interventions by donors and Senegalese government.  2. Project Purpose: The sanitation behaviours and access to basic sanitation facilities in the target villages are improved.					
Activities of the Project	1. Project Site: Three target regions of Tambacounda, Kédougou and Matam 2. Main Activities:  1) Establishment of the coordination mechanisms for the planning and implementations of sanitation projects/activities,  2) Improvement of sanitation behaviors of populations of the pilot villages,  3) Construction and proper usage of the basic sanitation facilities in the pilot villages, and  4) Extension of the project activities to the pilot extension villages of three pilot regions.  3. Inputs (to carry out above activities)  Japanese Side  Senegalese Side  1) Experts: 6 persons  1) Staff Allocated: 21 persons  2) Trainees received in the third country: 4  persons (Burkina Faso)  3) Local Cost: cost for utility of offices  3) Equipment: PCs, printers, copy machines, (electricity, water and telephone), travel expenses of counterparts					
Project Period	March 2012 - February 2016 Project Cost (ex-ante) 400 million yen, (actual) 528 million yen					
Implementing Agency	Ministry of Health and Social Action (MSAS), Ministry of Hydraulics and Sanitation (MHA)					
Cooperation Agency in Japan	Earth and Human Corporation					

Project for Sanitation and Hygiene Improvement in Rural Areas of Tambacounda,

#### II. Result of the Evaluation

<Special Perspective of Evaluation to be considered>

- Since the Indicator 1 for the Project Purpose was identical with the Indicator 3 for the Overall Goal as far as its continuation status at the time of ex-post evaluation concern, its continuation status was verified as the achievement level of the Indicator 3 for the Overall Goal.
- No data for the Indicator 2 for the Project Purpose were available because the tracking survey has not been conducted after the project. Since the Indicator 2 was specifically about the pilot villages to which the project made intensive interventions, no alternative data were available. Therefore, the continuation status of the Indicator 2 in the villages was not verifiable.
- No data for the Indicator 1 for the Overall Goal were available because the tracking survey has not been conducted after the project. Since the Indicator 1 was about the overall situation in the target regions, the evaluation was made by using the report data of the "WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene" (JMP)<sup>1</sup>.
- The report data of JMP and the survey result of the Indicator 3 for the Overall Goal of the project were influenced by other projects, and it's difficult to extract the sheer results of this particular project. Therefore, the evaluation results below included the influence of other projects.

### 1 Relevance

<Consistency with the Development Policy of Senegal at the Time of Ex-Ante Evaluation and Project Completion>

The "Economic Social Policy Document" (2011) placed a high priority on the issue of water supply and sanitation for achieving the targets of the Millennium Development Goals (MDGs). And by formulating the "Rural Sanitation National Strategy" (2013), the government of Senegal placed the top priority of rural sanitation on the attainment of Open Defecation Free (ODF) by 2025, the construction of adequate sanitation facilities, and improvement of the quality of hygienic environment. Therefore, the project was consistent with the development policies of Senegal at the time of ex-ante evaluation and project completion.

<sup>&</sup>lt;sup>1</sup> The project employed the JMP's definition of "private improved facility which separates excreta from human contact" for the "basic sanitation facility." ("Final Report," March 2016, p.vi).

<Consistency with the Development Needs of Senegal at the Time of Ex-Ante Evaluation and Project Completion>

The project was consistent with the needs of Senegal at the time of ex-ante evaluation and project completion. Due to the lack of personal hygiene of villagers and underdevelopment of facilities including toilets, the rate of access to basic sanitation facilities in 2010 was 21% in Tambacounda, 14% in Kédougou, and 6% in Matam, which were significantly lower than the national average of 29%. The general situation in the regions has not been largely changed at the time of project completion.

<Consistency with Japan's ODA Policy at the Time of Ex-Ante Evaluation>

The project was consistent with the Japan's ODA policy for Senegal at the time of ex-ante evaluation. In the "Country Assistance Program for the Republic of Senegal" (April 2009), one of the three prioritized sectors of the Minor Goals II for enhancement of basic social services was "provision of water" placing the priority on the improvement of sanitary conditions.

<Evaluation Result>

In light of the above, the relevance of the project is high.

#### 2 Effectiveness/Impact

<Status of Achievement of the Project Purpose at the time of Project Completion>

The Project Purpose was achieved by the time of project completion. Sanitation platforms<sup>2</sup> were established in the 3 target regions. The activities were planned and implemented by using the information system developed by the project (Indicator 1). Approximately 70% of households in the pilot villages met the standard set by the "Sanitation Behavior Checklist" prepared by the project, and more than 50% of the households owned the basic sanitation facilities (Indicator 2).

<Continuation Status of Project Effects at the time of Ex-post Evaluation>

The project effects have partially continued. While the platform meetings have been held in Tambacounda and Matam in the new projects assisted by the development partners, no platform activities designed by the project have continued in any of 3 regions mainly due to the lack of central and regional high-level leadership and insufficient staffs. As for the change of people's sanitation behavior and ownership of the basic sanitation facilities in the pilot villages, no data were available because tracking survey has never been conducted.

<Status of Achievement for Overall Goal at the time of Ex-post Evaluation>

The Overall Goal has been partially achieved at the time of ex-post evaluation. According to the JMP report data<sup>3</sup>, the rate of access to basic sanitation facilities has not reached at the target of 63% in any of 3 target regions as of 2017, and a specific increasing trend could not be observed in the data (Indicator 1). Rural residents interviewed by the ex-post evaluation were aware of the risk of open defecation. According to the Regional Hygiene Brigade (BRH) and the Regional Sanitation Service (SRA) in the 3 regions, toilets are placed in most of newly constructed houses. Besides, the JMP data reported a decreasing trend of ODF in the 3 target regions indicating the improvement of knowledge, awareness and behavior of rural residents (Indicator 2). The platform meeting has been continuously held in Tambacounda and Matam associated with the activities of the new projects assisted by the development partners. The information accumulated by the project has not been utilized because the electronic information storage system established by the project has not been updated and thus not been functioning (Indicator 3).

<Other Impacts at the time of Ex-post Evaluation>

The number of female Relais (sanitation extension officers selected in villages) has increased through the project, and due to this, a variety of information has been well spread among housewives and to family members through them. No negative impact on natural, social and economic environment has been observed.

<Evaluation Result>

Therefore, the effectiveness/impact of the project is fair.

Achievement of Project Purpose and Overall Goal

Aim	Indicators	Results					
Project Purpose:	Indicator 1	Status of the Achievement: Achieved (Partially continued)					
The sanitation behaviors and access to adequate sanitation facilities in target villages are improved.	Platforms established by the project in the 3 target regions are functioning, and rural sanitation actors' information is stored and shared among them.	` '					
	Indicator 2 70% of households in the pilot villages meet the standards set by the "Sanitation Behaviors Checklist, and 50% of households own the basic sanitation facilities.						
Overall Goal: Rural hygiene and sanitation improvement projects by donors and Senegalese government are coordinated in pilot	Indicator 1 The rate of access to basic sanitation facilities is to be over 63% (MDG's target 7c) in the three target regions.	(Ex-post Evaluation) Not achieved.  According to the JMP report data, the rate of access to basic sanitation facilities has not reached at the target of 63% in any of the 3 target regions as of 2017, and a specific increasing trend could not be observed in the data from 2013 to 2017 (Table 1).  Table 1: Rate of access to basic sanitation facilities in the 3 target regions (JMP)					
three states. The sanitation		Year	2013	2015	2017		

<sup>&</sup>lt;sup>2</sup> Coordination mechanism organized by the actors providing water and sanitation improvement activities at regional level including the government, local authorities, development partners, and others.

https://washdata.org/data/household#!/sen (accessed December 2019)

behaviours of target		Tambacounda	17%	14%	19%
population and access to		Kédougou	17%	11%	21%
adequate sanitation		Matam	32%	48%	33%
facilities in rural	Indicator 2	(Ex-post Evaluation) A	chieved		
communities are	Knowledge, awareness and behavior of	Rural residents interviewed by the ex-post evaluation were aware of the risk			
improved.	rural residents are improved in the three	of open defecation. Ac	cording to BRH a	and SRA in the 3	regions, toilets are
	target regions.	placed in many of newly constructed houses. Besides, the JMP report data			
		indicated a decreasing	trend of ODF in	the 3 target reg	ions from 2013 to
		2017 (Table 2).			
		Table 2: ODF in the 3 target regions (JMP)			
		Year	2013	2015	2017
		Tambacounda	38%	14%	16%
		Kédougou	30%	31%	24%
		Matam	39%	29%	16%
	Indicator 3 Sanitation platforms in the three target regions continuously hold meetings and utilize accumulated information.	<ul> <li>(Ex-post Evaluation) Partially achieved.</li> <li>The platform meeting has been continuously held in Tambacounda and Matam associated with the activities of the new projects of the Projet Assainissement, Changement de Comportement et Eau du Sénégal (ACCES) assisted by the United States Agency for International Development (USAID) in Tambacounda and the Yellitaare Project assisted by the Cell of Fight against Malnutrition (CLM) in Matam.</li> <li>The information accumulated by the project has not been utilized because the electronic information storage system established by the project has not been updated and thus not been functioning.</li> <li>Platform activities designed by the project have been limitedly continued in any of the 3 regions mainly due to the lack of central and regional high-level leadership and insufficient staffs.</li> </ul>			

Source: questionnaires to and interviews with SNH, DA, BRH and SRA, and interviews with rural residents (7 men and 7 women, Relais, village chiefs, housewives, etc.) in the 3 target regions.

#### 3 Efficiency

Although the project period was within the plan (the ratio against the plan: 100%), the project cost exceeded the plan (the ratio against the plan: 132%). The outputs were produced as planned. Therefore, efficiency of the project was fair.

#### 4 Sustainability

### <Policy Aspect>

Along with the update of the "Rural Sanitation National Strategy" (2013) to the version for the period of 2016-2021, a new sanitation program has been inaugurated by the Ministry of Water and Sanitation (MHA) in 2016 targeting the construction of 273,000 sanitation facilities by 2026. Therefore, the project effects are expected to be sustainable from the perspective of policy aspect.

## <Institutional Aspect>

The number of staff of the National Hygiene Service (SNH) in Tambacounda has been decreasing from 22 in 2016 to 17 in 2019 due to decease and retirement. The data of Kédougou and Matam are not available. Although the number of staffs of the Directorate of Sanitation (DA), BRH and SRA has been almost stable, it has not been sufficient for their workload in any of 3 regions. As for Relais, 2 of them have been assigned in each village and the number has been sufficient for their works.

## <Technical Aspect>

According to the interviews with DA and the Regional Development Agency (ARD) in Tambacounda, the ex-counterparts of the project have not maintained their knowledge and skills after the project because the sanitation platform activities have not continued and there has been no opportunity to use their knowledge and skills. The Relais and masons involved in the project, on the other hand, have kept using what they learned in the project in the new projects of the ACCESS in Tambacounda, the Yelitaare in Matam, and the Fongowash project assisted by the World Vision in Kédougou.

### <Financial Aspect>

Although no specific financial data were available, according to the SRAs of 3 regions, most of the regional sanitation and hygiene improvement activities have been implemented by the external project funds including the projects of the ACCESS, Yelitaare and Fongowash. The "advanced account" opened by the project to secure the budget for monitoring the sanitation facilities was closed after the project along with the discontinuation of the platform activities.

### <Evaluation Result>

In light of the above, some problems have been observed in terms of institutional, technical and financial aspects of the implementing agency. Therefore, the sustainability of the project effect is fair

### 5 Summary of the Evaluation

The Project Purpose was achieved by establishing and functionalizing the platforms for sanitation and hygiene improvement activities and by improving sanitation behavior of the people in target villages. However, most of the platform activities initiated by the project have discontinued after the completion of the project. As for sustainability, some problems have been observed in terms of institutional, technical and financial aspects. As for efficiency, the project cost exceeded the plan. Considering all of the above points, this project is evaluated to be partially satisfactory.

# III. Recommendations & Lessons Learned

### Recommendations for Implementing Agency:

- The sanitation platform was established to monitor the sanitation improvement activities in the target regions, to share the results of activities with stakeholders including development partners, and to coordinate the stakeholders' activities. However, through this

ex-post evaluation, it was found that the platform has not been functioning after the project. Therefore, it is recommended that ARDs extract the bare minimum of the platform activities necessary for monitoring, information sharing and coordination, and negotiate with ongoing projects' development partners to build these activities in the monitoring systems of the partners. In order to realize this, it is recommended that MHA and MSAS take initiative and assist ARDs of Tambacounda, Kédougou and Matam.

#### Lessons Learned for JICA:

- The project developed the monitoring tools including the "Sanitation Behaviors Checklist" to share the information monitored with the stakeholders on the "Sanitation Platform" and coordinate their activities. However, the monitoring using the tools developed by the project have not continued and the sanitation platform activities have stagnated. This was because the task of monitoring using the newly introduced tools was an additional work that required an additional budget. Therefore, for implementing a project including an improvement of monitoring system, it is better not to make the task of monitoring an independent additional work, but rather build the minimum necessary tasks in the existing routine work of the partner country, test the procedure out, improve it to be sustainable, and to set it in place as part of the routine work.
- In the health and sanitation sector, a large number of development partners are deploying their activities in many developing countries by introducing a variety of monitoring systems to monitor their works and effects. Therefore, for implementing a project for health and sanitation, it is expected at the initial stage of the project to find out the monitoring systems other development partners introduced, and to create a monitoring system which would be mutually complementary with other systems and not be a new additional workload for the partner country.



A toilet in Sinthou Boumack in Matam region



A toilet in Dimboli in Kedougou region