U.S. Agency for International Development
Report to Congress on the Design and Implementation of Water, Sanitation, and Hygiene (WASH) Programs

Pursuant to Section 7019(e) of Division K of Public Law 115-141, the Department of State, Foreign Operations, and Related Programs Appropriations Act, 2018, which incorporates by reference the requirements of House Report 115-253, the U.S. Agency for International Development (USAID) submits this report to Congress on the design and implementation of WASH programs.

The Committee notes that a lack of access to toilets, adequate sanitation, and hygiene products impacts women and girls in particular and recommends USAID address this issue in the design of WASH programs. The Committee directs the USAID Administrator to submit a report, not later than 90 days after enactment of this Act, on how such issues are included in the design and implementation of WASH programs, including ensuring the availability of feminine hygiene products. The Committee notes the work of academic institutions in WASH programs in West Africa and supports catalytic approaches that increase capacity of national and regional institutions to replicate successful models for safe water and sanitation and improved hygiene throughout the region.

The Urgent Sanitation Challenge
Sanitation and hygiene are important for individual and public health, nutrition, economic growth, and environmental protection. Improved sanitation and hygiene reduce the spread of diarrheal disease, neglected tropical diseases, and other waterborne illnesses; and reduce malnutrition and child mortality. Key interventions focus on separating human waste from individuals and communities, properly treating fecal waste, and promoting individual and collective behaviors that lessen the risk of illness. Proper sanitation also lessens the pollution of ground and surface water, which is important for sustaining supplies of clean drinking water, and for the health of aquatic ecosystems. With an estimated $5.50 return for every dollar spent; investments in sanitation and hygiene contribute to economic growth through reduced health care costs, gains in productivity as the burden of disease lessens, and time available for work and school increases.

Despite these compelling benefits, sanitation remains a persistent global challenge. Currently, 2.3 billion people lack access to basic sanitation facilities, more than 890 million practice open defecation, and the majority of fecal waste from onsite sanitation systems is improperly managed. Lack of political prioritization and weak demand from individual users—driven in part because many of the health benefits accrue only as whole communities transition to improved sanitation—hinder progress. Unclear roles and responsibilities within government; impede coordination and accountability, and limited human resources make it difficult to find the diverse set of skills required to make sanitation progress, including in engineering and construction, business and marketing, public and environmental health institution building, and behavior change.
The lack of access to sanitation disproportionately burdens women and girls. They face risks of sexual and physical violence when they have to travel long distances to access sanitation facilities, especially at night; their full engagement in school and work suffers because of a lack of proper facilities to manage menstrual hygiene; and, despite having primary responsibility for caring for children and the elderly who have specialized sanitation needs, do not often have the opportunity to have a voice in sanitation decisions, either at the household or sectoral level.

**USAID’s Strategic Investments in Sanitation**
Sanitation continues to be a top priority for USAID, as reflected in the Water and Development Plan in support of the 2017 *U.S. Global Water Strategy*. Sanitation directly affects water quality and hygiene practices, which is why larger WASH programs integrate many sanitation-focused activities. From Fiscal Years 2013 to 2016, USAID allocated an average of $379 million annually for WASH programs. In FY 2016, the total Agency’s WASH funding level was $441 million, and the FY 2017 WASH Congressional directive was $406 million. In 2013, USAID set a goal of reaching six million people by 2018 with basic access to sustainable sanitation services. USAID-funded programs exceeded this goal by reaching 7,403,188 people.

**Strategic Approaches**
Through a systematic, evidence-based approach that considers behavior-change, institutional-development, and commercial orientation, USAID is striving to create sustained access to sanitation.

*Achieving Community Coverage of Basic Sanitation*
Many of the benefits of sanitation only accrue when everyone in a community has access to it. Therefore, ending open defecation and achieving widespread community coverage of basic sanitation is a first critical priority for USAID. Supply-driven, highly subsidized sanitation projects that focus only on the construction of latrines have failed to create sustained access and use, as populations do not use this new infrastructure, or slip back to old practices following the completion of projects. USAID responds to the global sanitation challenge through programs that include deploying social behavior-change efforts to increase household demand to build and use latrines by targeting individual motivational drivers and social norms to discourage open defecation and promote the use of latrines. These are complemented with interventions to strengthen the capacity and success of local public-and-private sector sanitation service-providers and regulators to ensure sanitation products and services remain accessible beyond the life of USAID’s intervention.

*Expanding Access to Safely Managed Sanitation*
USAID investments focus on increasing access to safely managed sanitation services in areas with relatively higher levels of access to basic sanitation, in highly populated urban areas, and/or in areas where fecal matter pollutes shallow groundwater sources used for drinking water. This approach includes a focus not only on the containment of waste, but also on the emptying of latrines or septic tanks and then, transport, treatment, and safe disposal. USAID primarily invests in onsite (non-sewered) sanitation solutions, as these require significantly less capital investment, and are more common in poor communities. USAID implementers work with

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1 USAID will publish attributions for the FY 2017 WASH directive through the process of producing our annual report on water and development annual report process.
providers and regulators of services to manage fecal waste by offering technical assistance to build their capacity to gain access to capital financing for required equipment, such as desludging trucks. Any USAID investment in the management of fecal waste must account for the final destination of the waste, to ensure it is not illegally dumped in the environment. Where necessary, USAID funds the construction of such facilities, and leverages host-country, multilateral or commercial financing for the projects where feasible.

Building Local Capacity for Sanitation Services
Sustainable sanitation services require that local actors take ownership of outcomes and finance programs so the benefits last beyond the life of USAID’s investments. Therefore, USAID implementers work to improve finance and governance for providing sanitation services by strengthening responsible local and national institutions and policies. USAID works to improve the policy, budgeting, and sector performance through mentoring, training, and building the human-resource capacity of government officials, regulators, and service providers. USAID also works to mobilize domestic, non-donor sources of financing through advocacy for increased public expenditure on sanitation and increasing flows of local capital to the sector, where appropriate.

Activity Examples - Sanitation

1. USAID’s WASH Partnership and Learning for Sustainability (WASHPaLS), funded by the Global Health Bureau, is financing global actors and local organizations to conduct policy-relevant research in nine countries. WASHPaLS research focuses on the use and effectiveness of sanitation interventions, including Community Led Total Sanitation (CLTS), market-based sanitation (MBS), and the promotion of safe hygiene environments for infants and young children. The project is also supporting a collection of innovative ideas in hygiene behavior-change programming through a $1.5 million small-grants program. Prime Partner: Tetra Tech International Development.

2. USAID’s Water for Africa through Leadership and Institutional Support (WALIS) activity strengthens the leadership of African institutions to deliver safely managed WASH services through improved governance, evidence-based monitoring, and peer-to-peer learning. A key goal is to facilitate the development of a training program for professionals in Africa to increase both their technical and administrative capacity of professionals to deliver sanitation services. In 2017, WALIS conducted three regional sanitation market and feasibility studies in sub-Saharan Africa. The team is now partnering with other stakeholders to develop curricula for sanitation professionals in Africa. Prime Partner: DAI Global.

3. The USAID Indonesia Urban Water, Sanitation and Hygiene Penyehatan Lingkungan untuk Semua (IUWASH PLUS) activity is an initiative designed to assist the Government of Indonesia to ensure 500,000 people in urban areas gain access to safely managed sanitation services. Most of the urban population in Indonesia relies on on-site sanitation systems, and must use an “on-call” system to empty their septic tanks. Unfortunately, few of these trucks reach treatment facilities, and many of the poor cannot afford these services, which results in the widespread open dumping of waste. IUWASH PLUS worked with city governments, the private sector, and communities to introduce scheduled desludging services for
a regular monthly fee. Scheduled de-sludging reduces the expense of services by spreading out the cost (since monthly payments are more affordable for the poor), and creating efficiencies in transportation of the waste. **Prime Partner: DAI Global.**

4. **The USAID/Rwanda Isuku Iwacu** activity brings together the private sector, the Government of Rwanda, and communities to create a market for improved sanitation in eight rural Districts. Over four years, *Isuku Iwacu* aims to help 500,000 Rwandans gain access to improved household sanitation, and ensure an additional one million Rwandans are living in environments free of open defecation. The activity includes campaigns to help households understand the available financial and technical options for improving their sanitation by working with microfinance organizations and banks to design customised and subsidised loans for low-income households. To meet this increased demand, the project will improve the business capabilities of providers of sanitation products and services. To ensure sustainable results, the project is working with the Government of Rwanda to improve its data management plan and govern this growing sanitation market. **Prime Partner: SNV World.**

**Addressing the Menstrual Hygiene Needs of Women and Girls**

USAID’s sanitation programs are designed to meet the specific needs of women and girls. Menstrual Hygiene Management (MHM) is a critical aspect of addressing women’s and girls’ empowerment by alleviating a major constraint to their participation in education and public life. USAID’s work in this area includes developing design standards for public facilities, creating educational resources, promoting the availability of MHM-related supplies, and de-stigmatizing menstrual hygiene. In addition to increasing access for women, girls, and other vulnerable communities, USAID’s sanitation activities promote gender equality by increasing participation in leadership, consultation, and training in technical skills. The provision of adequate and safe sanitation can promote equity and opportunity, which, in turn, contributes to the establishment of equality, and the erosion of long-standing discrimination and societal norms that reinforce traditional roles, prejudices, and expectations.

USAID recognizes menstrual hygiene as a vital part of the health and dignity of women and girls and funds implementing partners to address needs in this area. In FY 2017, USAID supported MHM activities in 14 development-assistance projects in nine countries in Africa and Asia, and in our emergency-response efforts. These activities include promoting and providing supplies for MHM in households and schools, and working with host governments to draft national MHM strategies.

**Activity Examples — Menstrual Hygiene Management (MHM)**

1. **USAID/Nepal’s Safe WASH II Program** is supporting women’s MHM needs and helping communities change harmful practices, such as *Chhaupadi* which is an ancient system of taboos that surround menstruating women. Under these practices, women and girls must sleep in a *chhau goth*, or menstrual hut, during menses, where they are exposed to unsafe and life-threatening conditions. USAID is empowering women and working with religious leaders to reduce these repressive practices to ensure access to latrines during menstruation. **Prime Partner: Social Empowerment and Building Accessibility Centre Nepal.**

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2 Kenya, Madagascar, Malawi, Mali, Mozambique, Niger, India, Bangladesh, and Nepal.
2. **USAID/India** is supporting women and girls’ MHM needs throughout its water and sanitation programs in Indian cities. For example, USAID works with the Center for Urban and Regional Excellence (CURE) and the Delhi Government to improve the appeal of community toilets for women by installing sanitary napkin vending machines and incinerators for safe disposal of sanitary napkins. Through *Plan India*, USAID funds the renovation of WASH facilities in urban schools, which educate more than 12,000 children, 56 percent of whom are girls. Adequately maintained toilet facilities, separated by gender, are fundamental for MHM, and a first step in reducing the 24-percent high-school dropout rate among Indian girls. **Prime Partners:** CURE, Delhi Government, and Plan India.

3. **USAID/Malawi** is providing latrines in schools that include MHM facilities and are accessible for students with disabilities. In addition, Mother’s Groups received small seed grants and training in income-generation projects, including sewing and selling school uniforms and reusable menstrual hygiene pads. Through this activity, 3,000 reusable sanitary pads have been sewn and provided to primary schools for emergency use. The Mother’s Groups will continue making more to sell to the community at large. **Prime Partner:** Save the Children.

4. In 2017, USAID instiutited guidance on addressing MHM during **humanitarian emergencies**. MHM-related supplies are now part of the commodity kits USAID partners distribute at refugee camps, and to internally displaced people.

**Looking Forward**
USAID set an even-more-ambitious target for sanitation access under our new *Water and Development Plan*; to reach at least eight million people with new or improved access to sanitation by 2022.

Under the *Plan*, USAID strengthened its emphasis on sustainability, by elevating governance and financing as a cross-cutting objective. USAID will support improved governance through the development and implementation of policies that provide a sound framework for the provision of sanitation, and mentor, train, and build the capacity of government actors, including by empowering women to increase their participation in management and leadership in the sector. USAID will also facilitate domestic resource-mobilization and market-based repayable finance schemes to expand the local resources available to sustain sanitation services.

As the need for direct service-provision and infrastructure are greater than USAID’s capacity to directly pay for the construction or delivery of such services, USAID will couple any investment in infrastructure with complementary investments to improve governance and access to long-term, local finance. Foundational investments in governance and finance are critical to achieving global sanitation results, and for promoting partner countries’ journey towards self-reliance.

Going forward, women’s empowerment is a cross-cutting principle of the *U.S. Global Water Strategy* and the *USAID Water and Development Plan*. In 2018, USAID will release additional programmatic guidance on MHM practices in its global WASH portfolio.