

First piece of robust evidence on targeted subsidies in Africa launched in Ghana.

Globally, there is growing evidence that the poor and vulnerable do not benefit equally from Community Led Total Sanitation (CLTS) programs. This subset of the population tends to construct lower-quality latrines (if at all) that are prone to collapse or discourage use and is therefore more likely to revert to open defecation.

In Ghana, to address this challenge the Ministry of Sanitation and Water Resources (MSWR) issued Guidelines for Targeting the Poor and Vulnerable for Basic Sanitation Services, which provide a framework for administering targeted subsidies. To date, several CLTS programs –mostly in Asia– have experimented with targeted subsidies, but there is very little robust research documenting their effectiveness at increasing latrine ownership and usage amongst the poor and vulnerable. Notably, there is currently no robust evidence from Africa on this topic.

Building evidence to support policy making

USAID's Water, Sanitation, and Hygiene Partnerships and Learning for Sustainability (USAID/WASHPaLS) partnered with the Government of Ghana (GoG)-UNICEF WASH Programme to conduct rigorous research on the effect on targeted subsidies in ODF communities. The study will consist in a randomized controlled trial involving a total of 100 communities in the Northern Region over a period of 18 months. This study will provide the first piece of robust evidence on targeted subsidies in Africa.

Speaking at the launch, Jeff Albert, Deputy Project Director USAID/WASHPaLS said that this is a research that is seeking to develop evidence that will support policy making in the north, overtime. "This is an experiment to determine how the application of targeted subsidies to pay for latrines in rural areas will improve the quality and coverage of rural sanitation. And in particular help in sustaining open defecation free (ODF) communities," he added. Mr Albert noted that open defecation is a serious issue. It is a driver of infant child mortality, diarrhoea, illness and measures must be put in place to reduce it since it is really important in our bid to achieve the sustainable development goals.

He further noted that globally, CLTS had been widely embraced as a strategy to end open

defecation, and dozens of countries had incorporated the approach as part of national policy for rural sanitation.

Behavioral change

Dr Caroline Delaire, a Senior Manager, Research and Programmes at USAID/WASHPaLS said though the "total sanitation", which focused on CLTS was laudable it is clear that subsidized latrines alone will not help in eradicating open defecation; we have learned this from decades of standalone latrine provision initiatives. Before anything else, we need behavioural change. But once behavioural change is happening, it is also becoming more and more apparent that the most vulnerable households are not able to build the kind of toilet facilities that will allow them to end open defecation forever. So there is an argument to give such households access to subsidized latrines. How effective will this idea -namely, targeted sanitation subsidies- be? We don't know. That's what the USAID WASHPaLS-UNICEF research project will help us find out.

The research processes

She explained that the research would be guided by probing the extent to which targeted subsidies within ODF-verified communities result in increased latrine coverage, quality, and use among the most vulnerable. She said the project

would also explore the extent to which these targeted subsidies spill over to the rest of the community and the costs and challenges of implementing a post-ODF targeted subsidy program. Explaining the methodology, she said the research will use a cluster randomized controlled trial in which 100, ODF-verified communities made up of 50 Treatment (subsidy) communities and 50 Control communities in the Northern region of Ghana will be randomly assigned to either a targeted subsidy intervention group or a control group with an expected total sample size of approximately 2800 households.

“Within the intervention communities, subsidies for toilet installation will be made available to households that lack a functional, durable, private latrine and which qualify as poor and vulnerable based on community consultations guided by local government officials, utilizing Ghana's National Pro-Poor Guidelines,” she added. Eligible households will also receive a voucher for a no-cost latrine sub-structure, which they will be able to redeem with local artisans and suppliers enrolled by the District Assembly. Payment to these service providers will be made upon verification of toilet installation by District Assembly staff, with support from UNICEF.

Outcome/recommendations

During a panel discussion and open forum, participants drawn from government, CSO and donor community expressed different opinion on pro-poor subsidies for sanitation in Ghana as captured below:

- Currently, there are subsidies in water. Why not sanitation for poor. We have the money; we just need to appropriate it the right way-and that is by targeting (the poorest of the poor)

- Water is subsidized, why do we overlook sanitation? The rich are also affected when the poor do not have safe sanitation
- The activity of targeting is difficult-It is tempting to use a shortcut and you end up with a group that should not be receiving the subsidy. We want to get a true representation of the most vulnerable for targeting subsidies, you need to do community consultation
- We have made the subsidy issue academic. Subsidies is a way to help the poor but there is no enforcement.
- Should the government take this on? It should only do this once there is evidence- Context based Evidence is important when you are implementing a study. Avoid copy-pasting
- Most people do not want to identify themselves as poor and so it could be challenging to identify who the subsidy should target.
- Identification of the poor. Make sure you are identifying the correct people using the right mechanisms
- What we are doing here is good because it is evidence-based. If this model in Ghana can be replicated somewhere else (scale). Donors like being associated with something nice and if we know what we want and what we are doing, donors will not shy away
- Funding has always been the challenge. If there is funding to support the pro-poor subsidies, we should go ahead and implement it. Invest money on sensitization so that people can build toilets with the understanding of what they are committing into

NLLAP is a WASH sector multi stakeholder platform with the overall goal of improving sector learning and dialogue. It is hosted by the Ghana WASH Resource Centre Network (RCN). The platform offers learning and sharing opportunity for sector players as one of the practical approaches to improving sector engagements/sharing with the long term aim of achieving a knowledge driven WASH sector that delivers quality and sustainable services in Ghana. NLLAP meetings take place on the last Thursday of every month (with modifications when necessary) and are open to all interested parties. The discussions of each NLLAP meetings can be found on the RCN website www.washghana.net.

If you are interested to propose a topic for a meeting please contact us on,
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