

WATER FACILITY PROGRAMME

End of Term Evaluation Report



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ACKNOWLEDGEMENT

The Consultants (Dr. E. O. Chaggu and Dr. A. M. P. Makalle) from Ardhi University have a heartfelt feeling of highly acknowledging the trust and respect they have been accorded by Concern worldwide Tanzania, to undertake the final evaluation of your precious programme in the districts of Ngara, Biharamulo and Kibondo. Moreover, we thank the honour we received from the CONCERN Team in Ngara who availed us with all necessary secondary data in terms of programme documents and logistics. They worked tirelessly with us for all the time of the evaluation field visits and during the report writing time. To say the least, it is a good coherent team, nice to work with.

Special thanks are due to the programme partners of Concern Programme in Ngara, community members in wards and villages visited: Ngara, Kibondo and Biharamulo, District Council Officials, School Teachers and C2C pupils for their high level co-operation with us in terms of FGD meetings, interviews and even singing the WASH songs for us. This could directly be attributed to the good work done by the project team. They have managed to forge the nice synergy with the stakeholders at all levels.

EXECUTIVE SUMMARY

Background

1. Concern Worldwide Tanzania has over 30 years of experience implementing water/environmental health programmes across Tanzania. Many of these projects have focused on basic rural water supply, sanitation and hygiene. Presently, Concern Tanzania has been implementing the Water Facility Programme (WFP) since 2011 with support from the European Union (EU). The end of the project is 2014 and hence, a suitably qualified evaluator was sought to carry out a final evaluation.
2. The programme areas are the 25 selected wards in Kibondo, Ngara, and Biharamulo districts, in Kigoma and Kagera Regions, Northwest Tanzania. The programme is implemented in partnership with the Ngara, Kibondo and Biharamulo District Councils, and the partners: Tanzania Water and Environmental Sanitation (TWESA) and Community Based Health Care Council (CBHCC).

Objectives of the Final Evaluation

3. As spelled out in the Terms of Reference (ToR) (Appendix 1) and background document, the final evaluation assignment's main objective was to assess the relevance, efficiency, effectiveness, impact and sustainability of the project and to make recommendations for follow up projects.
4. The main purposes of the evaluation were:
 - i) To assess the relevance of the project on whether the intervention has provided the best solution to the problem as provided in the proposal and problem analysis.
 - ii) To assess the efficiency with regard to programme interventions by examining the implementation process, its organisation, management, procedures and the degree to which the various actors have discharged their roles.
 - iii) To assess effectiveness of the programme to provide an accurate and detailed picture of what has changed (outcomes and impact both positive and negative in relation to baseline values) in relation to objectives as a result of the interventions, how significant this is and for whom.
 - iv) To assess the sustainability of the project (with special attention to systems and structures at district and grassroots levels, namely financial and institutional aspects).
 - v) To assess the impact and outcomes (positive and negative) of the programme with respect to comparing the situation before and after Concern's work and the level of achievement reached at the end point of programme implementation.
 - vi) To identify and document Lessons learned so as to feed into other WASH programme implementation and contribute towards Concern's organisational development.

Evaluation Methodology

5. The final programme evaluation was carried out from 23rd February, 2014 to 5th March 2014 (Appendix 2).
6. Secondary data were collected from programme documents including baseline, follow-up surveys, progress reports and Mid Term Review (MTR) report.
7. The primary information was also collected by the evaluation team through key informant interviews, focus group discussions (FGDs) and direct observation of activities on the ground. Final conclusions and recommendations are the views of the evaluating team.

Key Findings/Conclusions

8. Overall the programme has been successful in achieving its objectives and making progress towards anticipated outcomes. Programme evaluation elements (relevance, efficiency and effectiveness, impact and sustainability) are assessed hereunder.

Relevance of the Project

9. The overall objective of the programme is still in line with Tanzania Development Vision (TDV) 2025, National Water Policy (NAWAPO) 2002, National Strategy for Growth and Poverty Reduction II (NSGPR II or MKUKUTA II in Kiswahili), Water and Sanitation Development Programme (WSDP) and Millennium Development Goals (MDGs).
10. CONCERN's global organisational focus and its policy are also in synergy with the government's visions, policies and planning structures that support planning, implementation, fund allocation accountability and governance for long-term strengthening of the sector¹.
11. From FGDs, interviews and field visits, during the final evaluation process, it was found out that the technologies used were appropriate and very relevant to the local conditions.
12. Furthermore, the design of the water, sanitation and hygiene (WASH) facilities namely: rain water harvesting (RWH) systems; improved water sources, improved latrines, and others was noted also to be of simple technology suiting local conditions for operation and maintenance (O&M).
13. The evaluation noted that the constructed WASH facilities are indeed of appropriate technology as all communities (100%) have handled the required O&M activities competently.
14. The programme sought to build the capacity of WUGs, C2C, village leaders, District Councils through training for sustainability purposes. The evaluation has ascertained that the level of capacity building was very high.
15. Thus, it has been established that ownership and sustainability of management of WASH facilities has been achieved because of involvement of the communities and school staff in the construction and sourcing of materials and capacity building.

Programme Efficiency

16. Physical accomplishments indicate that programme activities were implemented within time and budget, and to the required standard. In terms of budget utilization, about 98.5% of the total budget allocated has been utilised to complete all the activities. This was due to the programme implementation processes that were put in place as presented and discussed in Section 3.2. The evaluation observed and noted high level of community participation, adequate data Management, and participation of beneficiaries in monitoring and evaluation of programme activities' implementation.

Programme Effectiveness

17. Overall, it was noted that the achievement of planned programme outputs due to efficient completion of the planned activities has significantly contributed to attaining the expected programme outcomes (see Section 3.3). Through the evaluation it was established that access to adequate, clean and safe water has increased from 42% (baseline) to 92.3% (evaluation findings), and household and school sanitation has also improved. Households with access to adequate latrines has increased from 9% (baseline) to 65.4% and ratio of pit to pupils has been reduced from 1:86 (baseline) to 1:67 (evaluation findings). There is improved knowledge, attitude, and practices of good health/hygiene behaviour. The evaluation findings indicate that incidences of diarrhoea have been reduced from 17% (baseline) to 8%, against the programme target of 14%. The programme has thus, directly benefited 463,976 people or 97,193 households (of which 57,009 were female headed households). This exceeded the original plan to reach 300,000 people or 76,380 households (43,754 female headed households).

Key findings are summarized as follows

18. Increased access to adequate, clean/safe water through provision of sustainable water supply infrastructure that is managed by communities supported by local authorities:
 - i) About all of the respondents (98.9%: N=258) collect water from protected water sources during the dry season. The number has risen from a baseline of 42% (N=756).

¹Working within targets of MDGs; Tanzania's Vision 2025; National Strategy for Growth and Reduction of Poverty (MKUKUTA); National Water Policy (NAWAPO); National Water Sector Development Strategy (NWSDS); National Rural Water Supply and Sanitation Programme (NRWSSP)

- ii) People who collect from unprotected water sources are 11.1%. because they live far (>one km.) from the protected sources
19. Improved household and school sanitation through community empowerment in construction of latrine facilities:
- i) 33.5% (N=258) of HHs have improved pit latrines;
 - ii) 14.4% have pour flush toilets; and
 - iii) 7.5% have pit latrines with slab.
20. Improved knowledge, attitude, and practices (KAP) of good health/hygiene behaviour of targeted communities/school children through participatory methodologies:
- i) More than a half of the respondents (67.1%: N=258) in the three districts said that drinking water is treated to make it safe.
 - ii) More than half of school children drink boiled water (58.9%: N=258).
 - iii) Drinking water practice was explored in school children as important hygiene behaviour. The school children were asked how many glasses of water they drank daily. The number of glasses drank daily could also indicate availability of water at school or in the community. Findings indicated that about half (40.7%) drink 3-4 glasses (~one liter) of water daily. However, coupling water drank with bathing and ablution water, the daily per capita consumption of water is 19.5 liters.
 - iv) Generally in the programme areas, the majority of respondents wash hands with water and soap (78.7%: N=258).
 - v) The critical moments that people wash hands were generally cited by questionnaire respondents to be before eating practiced by more than half (58.9%: N=258) district community members.
 - vi) Hand washing after toilet use is practiced about evenly in all districts.
 - vii) The frequency of school children taking bath was explored as a hygienic behaviour. Most of school children (64%) generally in the programme districts take bath daily.
 - viii) It was clear from the questionnaire results that solid waste is mostly thrown in a pit (55.4%: N=258) in all districts.

Programme sustainability

- 21. The training component which dwelt on creating sense of ownership and empowerment is progressively building the community capacity to sustain low-cost technologies/continue promotion activities. All (100%) interviewed groups indicated a high level of understanding of their role to operate and sustain the facilities after Concern Tanzania concludes the programme.
- 22. The community leaders, members of water management committees and other community members said that they have the capacity to manage the WASH facilities in a sustainable way.
- 23. The community leaders, members of water management committees and other community members said that they have started water funds which are being used in case of a need to repair any broken part of the constructed facilities
- 24. It was ascertained, during the evaluation visits that all the improved spring sources have been fenced and this was proven by the evaluation team when they visited the sources.
- 25. Furthermore, by-laws at village level have been formulated in order to protect the provided facilities.

Lessons Learnt and Best Practices

- 26. **At programme team level:** a good synergy of the implementation programme team and community is important for realisation of the expected objectives or goals.
- 27. **At community level:**
 - i) Community participation or involvement right from the on-set of the programme assures active co-operation of beneficiaries with the implementing team.
 - ii) Influential persons in the community can be used as change agents as well for WASH issues. They can be used to break any barriers in community. These are people whom the community respects and hence, listen to them whenever they talk.

28. **Integration of District authorities:** Integrating district plans and those of Concern Tanzania is highly important in order to get good synergy and output with adequate impact and to avoid duplication of efforts. This has been reflected in co-ordination joint meetings organized by the District Councils which assures smooth implementation of the programme activities. They often assist in solving community problems like timely mobilization of local construction materials.
29. **Cross-subsidization of knowledge:** Children are good teachers who contribute to the enhancement of the sanitation and hygiene knowledge to their parents as observed in C2C clubs during the final evaluation visits. The children have been used as change agents in wide-spreading the understanding and use of hand washing tippy-tap (kibuyu-chirizi), which they have re-named it as “chombo-chirizi” (meaning tippy vessel).
30. **Training:** The gender trainings have been very effective as women and men are all participating actively in addressing programme implementing issues. A number of them said that the programme facilities are theirs and they will continue to guard them for continued use.

Conclusion and Recommendations

31. The evaluation has established that the programme overall objective and specific objective are all in line with the priorities of the needs of the communities in the target wards. These also align to national policies/strategies, EU and Concern Worldwide priorities as well as MDGs. The specific objective, in particular, focused on enhanced community health because of inadequate access to WASH facilities.
32. The data obtained from the Ngara health department (Appendix 20) ascertains that the project has been very useful to the beneficiaries. Across the beneficiaries and all programme stakeholders it was evident that the situation of water and sanitation related diseases in the programme areas after implementation of Concern Tanzania programme for the year show progressive improvement.
33. Both school children and the community are progressively moving towards good sanitation and hygiene practices as evidenced during the evaluation exercise. In all districts, except Kibondo (97.1%: N=258), HHs has some form of latrine with hand washing facilities. The findings indicate that 64.7% (N=258) respondents have hand-washing facilities in the three districts, while those with drying racks are 70.2% (N=258). Moreover, more than a half of the respondents (67.1%: N=258) in the three district said that drinking water is treated. The common method or treating drinking water used by the communities is boiling (58.1%: N=258). Generally in the programme areas, the majority of respondents wash hands with water and soap (78.7%: N=258).
34. Concern Tanzania has gathered vast knowledge and experience of working with communities pertaining WASH and School WASH facilities. It will be interesting if they could find a package to put down these experiences in a book for other people to tap instead of re-inventing the wheel.

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ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
C2C	Child to Child
CBHCC	Community Based Health Care Council
CDC	Centres for Disease Control and Prevention
CORPs	Community Resource Persons
CRM	Complaints Response Mechanism
CSO	Civil Society Organisation
DRR	Disaster Risk Reduction
ER	Expected Results
EU	European Union
FGDs	Focus Group Discussions
HAP	Humanitarian Accountability Partnership
HH	Household
HHS	Household Survey
HHs	households
HIV	Human Immuno-deficiency Virus
LGAs	Local Government Authority
M&E	Monitoring and Evaluation
M&E	Monitoring and Evaluation
MDGs	Millennium Development Goals
MKUKUTA	MkakatiwaKukuzaUchuminaKuondoaUmaskini Tanzania
MoEVT	Ministry of Education and Vocational Training
MoHSW	Ministry of Health and Social Welfare
MoWI	Ministry of Water and Irrigation
MoWYD	Ministry of Women and Youth Development
MTR	Mid-Term Review
NAWAPO	National water Policy
NGOs	Non Governmental Organisations
NRWSSP	National Rural Water Supply and Sanitation Programme
NSGPR	National Strategy for Growth and Poverty Reduction
NWSDS	National Water Sector Development Strategy
O&M	Operation and Maintenance
PHAST	Participatory Hygiene and Sanitation Transformation
PSI	Population Services International
RBA	Rights-Based Approach
REDESO	Relief for Development Society

RWH	Rain Water Harvesting
TaWaSaNET	Tanzania Water and Sanitation Network
TDV	Tanzania Development Vision
ToR	Terms of Reference
TRCS	Tanzania Red Cross Society
TWESA	Tanzania Water and Environmental Sanitation
USAID	United States of America International Development
WASH	Water Sanitation and Hygiene
WEHP	Water and Environmental Health Programme
WFP	Water Facility Programme
WHO	World Health Organisation
WSDP	Sanitation Development Programme
WUA	Water User Associations
WUGs	Water User Groups

1 INTRODUCTION

1.1 Background

Concern Worldwide Tanzania has over 30 years of experience implementing water/environmental health programmes across Tanzania. Many of these projects have focused on basic rural water supply, sanitation and hygiene. Presently, Concern Tanzania has been implementing the Water Facility Programme (WFP) since 2011 with support from the European Union (EU). The end of the project is 2014 and hence, a suitably qualified evaluator was sought to carry out a final evaluation.

The programme areas are the 25 selected wards in Kibondo, Ngara, and Biharamulo districts, in Kigoma and Kagera Regions, Northwest Tanzania. The programme is implemented in partnership with the Ngara, Kibondo and Biharamulo District Councils, and the partners: Tanzania Water and Environmental Sanitation (TWESA) and Community Based Health Care Council (CBHCC).

1.2 Objectives of the Final Evaluation

As spelled out in the Terms of Reference (ToR) (Appendix 1) and background document, the final evaluation assignment's main objective was to assess the relevance, efficiency, effectiveness, impact and sustainability of the project and to make recommendations for follow up projects.

The main purposes of the evaluation were:

- i) To assess the relevance of the project on whether the intervention has provided the best solution to the problem as provided in the proposal and problem analysis.
- ii) To assess the efficiency with regard to programme interventions by examining the implementation process, its organisation, management, procedures and the degree to which the various actors have discharged their roles.
- iii) To assess effectiveness of the programme to provide an accurate and detailed picture of what has changed (outcomes and impact both positive and negative in relation to baseline values) in relation to objectives as a result of the interventions, how significant this is and for whom.
- iv) To assess the sustainability of the project (with special attention to systems and structures at district and grassroots levels, namely financial and institutional aspects).
- v) To assess the impact and outcomes (positive and negative) of the programme with respect to comparing the situation before and after Concern's work and the level of achievement reached at the end point of programme implementation.
- vi) To identify and document Lessons learned so as to feed into other WASH programme implementation and contribute towards Concern's organisational development

2 EVALUATION METHODOLOGY

2.1 Conceptual Model

The evaluation carried out in the month of February, 2014 (Appendix 2), used a conceptual model (Figure 1) which provided the general framework for executing the final evaluation of the Water Facility Programme (WFP). The conceptual framework was built on the existing Monitoring and Evaluation (M&E) models for water and sanitation projects such as those developed by Population Services International (PSI), USAID, and the Centres for Disease Control and Prevention (CDC). Although no single framework currently used by these organizations fits the water and environmental sanitation projects' evaluation requirements, each model provides a variety of approaches that are suitable for use in the evaluation. The evaluation framework took on board issues of how beneficiaries could actively and meaningfully be involved in the evaluation process.

As shown in Figure 1, the evaluation protocol took had three levels, namely; programme, management and operational levels. Moreover, the evaluation team looked at sustainability issues which basically deal with issues of usability of the provided facilities currently and in future.

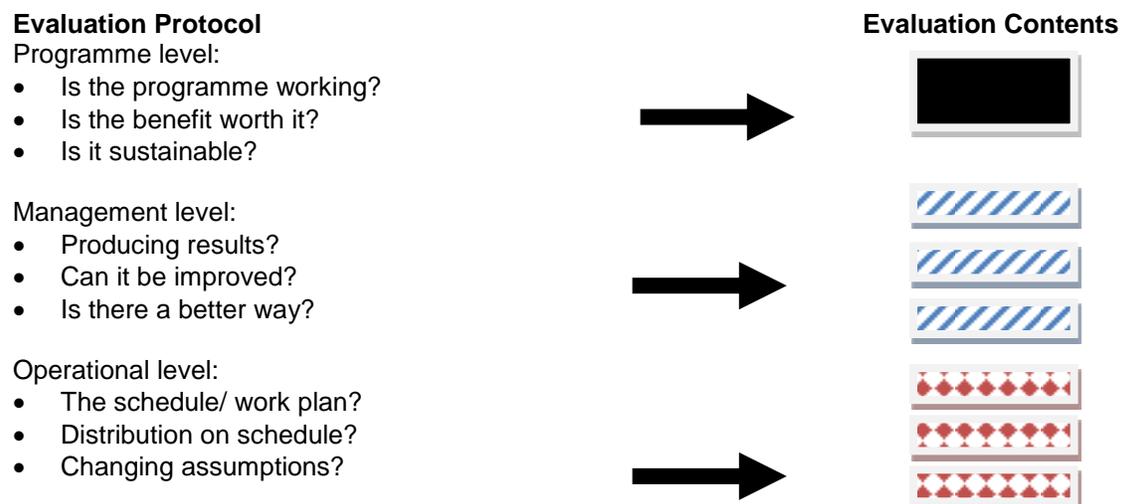


Figure 1: Evaluation Protocols

In carrying out the assessment as presented in Figure 1, the evaluators identified the strengths and weaknesses of Concern Tanzania programme team in partnership with the Ngara, Kibondo and Biharamulo District Councils, and other partners (Tanzania Water and Environmental Sanitation (TWESA) and Community Based Health Care Council (CBHCC)), as the implementing agencies of the programme.

The evaluators also used the Conceptual Model (Figure 1) to identify potential options for improving the programme (for the purpose of scaling up if need be), which could include modification of activities, responsibilities of programme staff, and schedule of activities, among others.

2.2 Sampling

The evaluator, in consultation with the programme team, reviewed the scope of the final evaluation and made choices of samples (representatives of representatives). Review of the evaluation scope was necessary to identify key issues that would be included in the main evaluation. It was then agreed that in each district, representative villages would be selected on the criteria of best, average and poor performance with respect to project implementation and impacts, based on MTR and feelings of the programme team. The selected villages in each district and sample size are presented in Appendix 3. However, two villages in Biharamulo district (Kaniha and Rusabya) were not visited because of the bad weather and road conditions; instead Kabukome and Kikomakoma were visited.

2.3 Data Collection

2.3.1 Desk study (Literature Review)

A number of archive records were collected and reviewed (Appendix 4). The documents reviewed were those related to WASH issues, including programme documents and reports (especially on monitoring visits), agreements, national policies and strategies (e.g. MKUKUTA II, National Water Policy (NAWAPO), and others).

2.3.2 Administration of questionnaires

There was one type of Survey Questionnaire, namely the Household Survey (HHS) (Appendix 5) that was administered. It was pre-tested before complete use in the chosen evaluation sites. The HHS was intended for administration to households (HHs) but due to the fact that it was undertaken during the farming season, the evaluation team was not able to reach all the intended HHs. The HHs which were not reached, were represented in FGDs comprising of 112 participants. Moreover, using the experience gathered by the evaluation team in other firm's project sites, the HHS questionnaire for these HHs was administered to school pupils instead, to collect views from them on how the programme had impacted their communities. The pupils were found to give true information that pertains to their HHs as observed in other evaluations. Furthermore, the study sample size (21.2% of the villages) was above the recommended 3-5% for social surveys.

The evaluation respondents were the 258. Among the 258 respondents, 111 (43%) were females and 57% were males. Their profile is presented in Appendix 6. The chosen schools were those in programme areas, coupled with the reality that pupils cannot walk for very long distances, the chosen respondents are a right sample.

2.3.3 Consultations and semi structured interview with key stakeholders

Consultations with key stakeholders were conducted with the aim of collecting their collective views. This was done in form of interviews and FGDs (Appendix 7&8). The findings from this method of data collection have provided the primary knowledge about the functions of the programme as well as the impacts of the programme interventions at community level.

2.3.4 Field observation and photographing

The field observations were done in the programme sites, which has a variety of wide spread geographical setting. The setting may indicate possible locations of water sources. Moreover, the beneficiaries and key stakeholders included adults and pupils of different sex, education and socio-economic status. A few of the HHs visited were by random walk to observe the status of WASH facilities.

In addition to that, the evaluation team visited the Concern Tanzania provided facilities with a view of satisfying themselves about the status of implementation of the programme activities. In order to capture adequately the on-site situation, the evaluation team took photos which forms part of this report. Some of them are presented in Appendix 9.

2.4 Data Analysis

The collected data was analysed using SPSS, MS Excel and others. Prior to entering the data into SPSS it was coded, entered and cleaned for quality assurance of output. Analysed data was presented in form of Tables, Photos, Graphs, and others for useful discussions toward conclusions and recommendations. Where possible, qualitative statements (voices of the people) were reproduced as they were quoted in order to emphasise on findings and to support the discussions and conclusions. These statements indicate the people's feelings about the programme and the experiences they got. It is a way of knowing as well whether beneficiaries were satisfied or not.

2.5 Limitations

The success of any evaluation is dependent not only on the evaluation team, but also on accessibility of programme areas, acceptance and participation of the respondents. This evaluation work suffered from unavailability of many household members due to the fact that it was undertaken during the farming

season. Many villagers were attending their farm cores. Nonetheless, due to the commitment of village leadership and the Programme Team, it was possible to administer the intended questionnaires and visit planned sites. Village leadership convened members for FGD and assisted the evaluation team to visit WASH facilities in HHs where the owners were not available. In some other occasions due to the fact that the evaluation work was done during the rainy season, long distance roads which were felt to be in good condition were used instead of shorter ones which had complications of accessibility.

3 KEY FINDINGS AND DISCUSSIONS

3.1 *Relevance of the Project*

3.1.1 *Policy context*

Concern Tanzania works in line with the government's vision, policies and planning structures to support long-term plan to strengthen the sector. These are *Tanzania Development Vision 2025* which targets 90% water and 95% sanitation coverage by 2025; *MKUKUTA II*² which aims to increase water coverage to 65% by 2015; *National water Policy (NAWAPO, 2002)* which decentralise water and environmental health management to the lowest administrative level; *National Water Sector Development Strategy (NWSDS)*, which sets out the implementation of NAWAPO to achieve the national sector targets as stipulated in the MDGs/MKUKUTA; and *National Rural Water Supply and Sanitation Programme (NRWSSP)* providing guidance on planning/designing/implementing rural water supply/sanitation under NAWAPO.

A baseline survey which was carried out in March, 2011 to inform the WFP established the prevailing status of hygiene, health, sanitation and access to adequate and safe water within the communities (of Ngara, Kibondo and Biharamulo) targeted by the programme. The findings detailed that relative to national figures, the programme areas had very low values. For example for household sanitation, according to 2010 HBS, only 24% of households, nationally, used improved sanitation facilities, while, only 9% at household level in the programme area had adequate sanitation facilities (Ngara = 9%; Biharamulo = 13%; and Kibondo = 5%).

Based on the above background, the policy relevance of the programme was assessed and noted that it was designed to bring about an improved health and livelihoods of poor communities in the programme area through three specific objectives namely:

- i) Increased access to adequate, clean and safe water through provision of sustainable water supply infrastructure that is managed by communities in 25 target wards supported by local authorities.
- ii) Improved household and school sanitation through community empowerment in construction of latrine facilities in 25 wards.
- iii) Improved knowledge, attitude and practices of good health and hygiene behaviour of targeted poor communities and school children through participatory methodologies in 25 wards.

As per the NRWSSP, hygiene promotion is a vital part. Concern Tanzania has used Participatory Hygiene and Sanitation Transformation (PHAST) through training of Community Resource Persons (CORPs) and Child to Child (C2C) approaches to encourage long-term behaviour change, particularly around adoption of best hygiene practices and water handling.

Concern Tanzania's experience in PHAST and C2C methodologies, as observed through documents and past reviews; have proved successful in west Tanzania. This is mainly due to Concern Tanzania's own simple version of PHAST appropriateness to the communities' capacity, which has generated interest from other international agencies in and out of Tanzania. Concern Tanzania also applies a rights-based approach (RBA) with other participatory methodologies to empower and build the capacity of communities/service providers.

From the evaluation findings, it is clear that the programme's design was adequate to address the problem(s) at hand. This has been echoed by teachers, C2C members, ward officers, village government, community at large, and from the Ngara District Council officials (Box 1).

Box 1: Voice of Ngara District Council FGD

The implementation of CONCERN Tanzania programme has contributed in solving the problems of water and sanitation in the district, though the majority of people in the district are still facing problems with regard to water and sanitation.

3.1.2 *Stakeholders' Participation*

From the past experiences of WASH programmes by Concern Tanzania in the western part of the country it was observed that there were three underlying factors responsible for limited WASH project successes. These were (i) Low investment in rural water and environmental health, (ii) Poor implementation and management, and (iii) Poor dissemination of information and knowledge. Concern Tanzania therefore,

² National Strategy for Growth and Reduction of Poverty (Kiswahili – MKUKUTA)

has learnt that participation of all stakeholders approach is vital in addressing the underlying limited programme successes in the WASH sector. It has thus, used its organisational approaches of rights-based approach (RBA), equality, partnership and HAP³(Concern is HAP certified as indicated in <https://www.concern.net/resources/concern-recertified-hap>) as effective participation approaches. The participation of communities (central to ownership/sustainability) and LGAs (key development players) have been found to be very crucial not only in the implementation process but throughout the project cycle.

Through review of documents, interviews with key informants and FGDs, it was noted that the range of stakeholders' participation started at the planning stage, collection of local materials, labour works up to security of materials, as well as the management and operation of water points. At initial introduction stages, district actors accepted the programme while at community levels all village and wards leaders joined hands. Beneficiaries' mobilization was effective and all construction works were only possible as a result of positive acceptance and participation by the beneficiaries. The level of beneficiary participation can generally be concluded as good because over time participation has increased sense of ownership.

Moreover, water and environmental health ward-level development plans were noted to have been combined to enhance the communities' capacity to prioritise/plan for development initiatives, and increase the capacity and efficiency of LGA staff to support communities' efforts. Participatory activities during development of plans included: gathering information on non-functioning water points; identification of new sources; assessment of sanitation facilities in schools; preparation of design, materials and cost estimation for each intervention; and information on hygiene/sanitation promotion training required including operation and maintenance (O&M) of water schemes.

Furthermore, it is reported that District Councils, through water and community development departments, have been encouraging active participation of both men and women in the water programme in formation of water/groups and in capacity building. This has enhanced participation in programme implementation.

3.1.3 Choice of Technology

Concern Tanzania has supplied water and sanitation basic infrastructure and environmental health education in three rural districts in Tanzania using small-scale appropriate technologies that had been proven functional, cost effective and sustainable. The technologies that have been selected and used, also depended on the nature, weather condition and topography of each programme area are:

- **Protection of traditional spring sources:** Protected springs, with a life span of up to 20 years, have very low O&M cost, are suitable for poor communities and favourable to the topography of the area for natural flows (gravity).
- **New construction of protected shallow wells:** Hand dug/shallow wells, installed with hand pumps, have a low O&M cost suitable for poor communities;
- **Rehabilitation of existing shallow wells, boreholes and springs:** in Kibondo District many water sources were of deep boreholes type installed with hand pumps and 47% of them were not functional⁴. These have been replaced with suitable pumps for existing depths, broken pumps of shallow wells have been repaired; and broken spring boxes rehabilitated. This rehabilitation involved capacity building of water users to run water projects, empowering communities and thus, the sources' lifespan has been increased;
- **Rainwater harvesting system (RWH):** rainwater collection systems constructed at selected schools with galvanised iron roofs has low implementation and O&M costs, suitable for poor communities. The tanks are durable and use very little materials such as BRC, timber, iron bars, etc.
- **Latrines:** the WASH programme had constructed improved latrines with sub-structure (dug pit for excreta disposal) and super structure (shelter on ground level), ventilated and covered with a slab. These have been upgraded to WHO-standard improved latrines by providing them with sanplat slabs (cement, wire mesh and sand). In addition, sanitation groups have been formed and trained to cast slab for vulnerable groups in respective communities. Moreover, the communities were facilitated to

³Concern Worldwide is aiming for Humanitarian Accountability Partnership (HAP) full accreditation, which puts the needs and desires of communities first and ensures organisational accountability to all programme participants(www.hapinternational.org)

⁴ Concern Tanzania and partners' rapid assessment, 2010

construct demonstration latrines for vulnerable as well as adapting to these demonstration latrines to their HHs latrines; and

- **School latrines:** Concern Tanzania has worked with school steering committees and partners (LGAs and CSOs) on the design of appropriate sanitation infrastructures in schools based on Ministry of Education and Vocational Training (MoEVT) guidelines. Most of the constructed improved latrine blocks comprise of 10 cubicles separating boys and girls, with permanent hand washing facilities at the exits. Concern Tanzania provided material inputs: re-bar, cement and timber; communities provided labour, sand and stones to reduce cost and increase ownership. The latrine blocks are in line with national standards⁵.

3.1.4 Inclusion of vulnerable groups

Programme beneficiaries are composed of vulnerable groups. Studies have established that vulnerable groups, consisting of women/female-headed households, people living with HIV/AIDS, disabled, elderly, children, especially girls, orphans and child-headed households, have had limited access/control over resources/participation in decision-making processes. Moreover, the vulnerable people has been walking more than 1km to fetch water, and that they have poor sanitation and low awareness on hygiene, therefore recurring health problems, such as diarrhoea and other water-borne diseases. Selection of technologies was therefore, in consultation with all users through household visits, observations, focus groups, surveys, planning meetings, monitoring as a basis for the design/implementation of the programme. The programme has positively considered the vulnerable groups in programme implementation e.g provision of latrines for people with disabilities which is very appropriate to the programme areas. These groups had been considered in past WASH provisions especially at school level.

3.1.5 Changes in context

It has been reported in project documents⁶ that there was a reduction of water points from the planned 510 to 451 due to inflation on industrial construction materials and high turnover of staff of TWESA in Kibondo district, which caused a delay in the completion of the planned activities. Despite of the change, the programme remained relevant since the community were still available and their conditions were still the same. Thus, the **External factors** that influenced the ability of beneficiary groups and Concern worldwide Tanzania to meet projected targets were identified as:

- **Participatory approaches:** It is in the NAWAPO (2002) that the program should take on board participatory approaches from design stage to implementation and sustainability plans should be inculcated into the plans of handover;
- **Improved capacities:** the capacity of the communities and service providers (TWESA, and CBHCC) has been empowered through a rights-based approach (RBA);
- **Water and sanitation provision:** provision of clean water within adequate distance, and improved environmental health has proved to bring about a change in socio-economic development;
- **Economic activities:** through improved health and time freed due to provision of adequate safe water and sanitation the community could engage in economic and educational activities;
- **Remembering vulnerable groups:** progressive achievement of the goal through provision of water/sanitation basic infrastructure and environmental health education to the most vulnerable people; and
- **Facilitation:** received from development partners in terms of human and financial resources.

However, as reported in reviewed project documents No major change noted in the management and coordination of the programme during this reporting period, except for the following noted internal factors that influenced the ability of beneficiary groups and Concern Tanzania to meet projected targets:

- **Team work:** the reality that the program team worked as a team and respecting each other's input into the programme implementation;
- **Meetings:** meetings were regularly held about the program and where problems or challenges were observed, they were faced squarely. For example, when the team noted that there is weakness in one

⁵ The government of Tanzania is considering to adjust latrine pit:pupil ratio standard from 1:20 and 1:25 to 1:40 and 1:50 with urinals, for girls and boys respectively.

⁶2012 Annual report

of their partner's contribution in terms of inadequate management, they strengthened them by sending someone from the programme Ngara office to do internal capacity building;

- **Seriousness** of the programme team, liking to see the impact and outcome of their efforts at community level;
- **Participatory approaches:** hygiene has been promoted using the Participatory Hygiene and Sanitation Transformation (PHAST) and child to child (C2C) methodologies. The evaluation observes that community involvement is key to success of any programme;
- **User friendly technologies:** The facilities technologies used are appropriate and sustainable because they are of small-scale design that is, proving to be both functional, long life span and have low operation and maintenance (O&M) cost. These include shallow wells, protected springs and rehabilitation of existing structures that have become defunct; and
- **Facilitation by Country Office:** the Country office had been instrumental in assisting the programme team in areas which needed their intervention. These were issues of procurement of materials and getting tax exemptions.

3.1.6 Cross-cutting issues and approaches

Several approaches and cross-cutting issues were incorporated in the WFP including; Gender mainstreaming, Equality, HIV and AIDS mainstreaming, Disaster Risk Reduction (DRR), Good Governance. Cross-cutting issues and approaches that the programme incorporated included the reality that, community groups have been trained to reduced discrimination and gender oppression as cited out during the FGDs. In addition, it was reported by WUGs members that programme activities are targeted to reduce workload for women and children by safe water provision (within reasonable distance) and hygiene education through gender planning training focusing on community development activities.

Furthermore, a number of steps have been taken to address issues of inequality and ensure the interests of the most marginalized are taken on board during programme planning, implementation and monitoring. These were:

- Formation of WUGs, C2C took into account of getting members who are males and females and preferably equal in number. All the visited programme villages (100%) reported of almost equal representation of males and females in community formed structures (CORPS, WUGs, C2Cs). The women have a voice in the committees which has been proven or observed during the evaluation visit discussions. They were expressing their concerns without fear;
- Similarly, during election at grass-root level, both males and females had equal opportunities of contesting. This was the case in visited villages where at least a third of leaders were women. It was also reported and observed that during discussions in village meetings, the members are given equal opportunities of contributing their views towards the issue in question without gender discrimination. Vulnerable groups as well participated equally in the FGDs meaning that the programme had indeed fostered an equal participation in terms of WASH infrastructure and contribution into village development.
- Vulnerable groups of women and men in all formed WUGs had been identified and registered at early stages of the programme. These are being exempted from the contributions and get free water services and construction of latrines;
- To ensuring active participation of vulnerable groups/representatives in programme meetings that entail planning and implementation, awareness had been created; and
- It had been discussed and agreed at WUG/WUA on the best way to provide relief to vulnerable groups. In some villages e.g. Gwarama village, Kibondo district identified and registered members of vulnerable groups have been relieved from paying water user fees.

3.2 Programme Efficiency

The term efficiency means a good quality of doing something without wasting time and money. Thus, during the evaluation exercise, the programme was assessed on how it was being implemented to ensure that the resources were efficiently used to achieve WFP objectives, including the approaches used to achieving the intended outputs. The section below discusses how efficiently the programme was implemented.

3.2.1 Organisation

Review of programme documents indicated that there has been an effective organisation structure (Appendix 10) which has resulted in completion of the planned activities. At national level the programme is supported by the country office in Dar es Salaam through the Country Director, and Assistant Country Directors (programmes and programme support) and relevant support staff. The country office has been the main link between the programme, donors and Concern Worldwide headquarters in Dublin, Ireland. Moreover, from interview with Assistant Country Director (programmes) it was reported that the country office assisted the programme office in Ngara on procurement of bulky materials needed for implementation programme activities.

At programme implementation level, the Zonal Programme Manager in Ngara, has been responsible for the overall implementation of the programme, ensuring cross-organisational learning, disseminating and replicating best practices. The manager has a support of other programme staff which includes Senior Programme Officer, Partner Support and System Controller, Environmental Health Officers, Water & Sanitation Engineers and auxiliary staff.

This kind of organisation has assisted very much in realising the efficiency of the programme. Those issues that could be handled by the Ngara programme team, like buying materials which are far from their work areas were handled by the country office team and hence, reduced cost and wastage of time of follow-up. Moreover, where Concern Tanzania felt that there is a need to pull in an expert on a certain aspect for a short period of time, they did so in order to increase the output expected. This means, the Concern technical staff, based at the headquarters with their specialities are brought in for temporary piece of work.

3.2.2 Programme coordination

Concern Tanzania has utilised lessons learnt from implementation of the past programmes and results of its MTR that developing ward-level plans and attending sector coordination meetings are a successful way to coordinate with all stakeholders. Communities and LGAs have been involved in all activities for long-term sustainability. Technologies chosen have been those that have been proven to be appropriate to the topography and capacity of the communities to manage. Simplified PHAST has been used as an appropriate approach to the capacity of the communities. C2C in schools has been used as an effective approach in empowering the younger generation for community development. Water and sanitation sector coordination meetings have facilitated the information sharing on progress, policies and strategies, coordination of actors to avoid duplication, and funding to the sector.

At the national level, Concern Tanzania has made links with Tanzania Water and sanitation Network (TaWaSaNET), Ministry of Water, Ministry of Health and Social Welfare (MoHSW), and Ministry of Women and Youth Development (MoWYD). Participation in sector coordination meetings formed by international and local NGOs, government departments and United Nations agencies have been held and provided information related to mapping water/sanitation interventions to avoid overlapping and double funding in Tanzania. Participation in national events like water week, where Concern won two trophies in 2011 and 2012.

At district level, district coordination meetings between all stakeholders have been held from time to time to avoid overlap and double funding. The coordination has also been managed by LGA departments (district water, health, education, planning and community development), CSO partners, and community representatives. Limited resources, sourced by District Councils translate into inability for them to provide support at community level. This has been leveraged by ensuring that small water funds (contributed by the water users) is managed by the WUGs to support only minor repairs, spare parts, and paying water attendants. This action is progressively increasing communication and coordination among the involved stakeholders. It is also reported that District councils have recently enacted by-laws that requires the removal of human activities within 60 meters of water catchments and villages' governments have been informed on the enforcement of the same.

At programme level, the implementation Partners were chosen for their strengths; for instance TWESA is a well-established organisation with extensive experience in hardware construction and CBHCC has been implementing water/sanitation projects for more than 20 years, including gravity water supply implementation, spring protections and shallow wells, as well as soft health activities. District councils'

water departments provided technical assistance to CSOs on design/monitoring. TWESA and CBHCC organisations were found to have technical skills with demonstration latrines (MoEVT and MoHSW standards) and identifying vulnerable households in the community. They reported to have been carrying out training communities on how to dig appropriate pit size, construct superstructure, and on casting/fitting sanplats.

In terms of RBA, the CSO partners are reported to be skilled in community organisation/mobilisation. However, additional support has been given to the CSOs in order to understand the NAWAPO and Water Supply Development Programme (WSDP) and their roles and in sensitising communities in the context of the documents.

3.2.3 Level of participation of programme beneficiaries

It has been observed and noted that programme beneficiaries (community members in 20 target wards) have participated in all stages of programme implementation. The general assessment shows that communities have been engaged actively in the programme and a great deal of local ownership has been achieved. The participation of stakeholders that has been achieved has strengthened the collaboration among different actors and partners.

The WUGs/WUAs members received training in environmental health, hygiene, water and financial management, HIV and AIDS by through the software component of the WFP. It was found out during the review field visits that the trained committee members, as well as C2C pass on the knowledge and skills acquired to other members of the community through group meetings and other forums.

The local government has and is playing an important role in offering some technical personnel to supervise the programme activities in conjunction with Concern Tanzania Ngara team. Both men and women were involved equally in all stages of programme implementation. Communities ascertained during the evaluation visits that they were comfortable with the process used for their involvement.

3.2.4 Data Management

Success of the programme depends on information sharing. Different levels of programme implementation require specific type of information. For example, senior management's major interest is usually "are we on time and within budget?" If not what corrective measures are urgently to be taken? Within the same vein, programme officers on site are interested in their deliverables and specific work packages. In order to be able to write or give the right report or information to the right person, data management is crucial.

The programme team at Ngara has done a commendable job in keeping data for the project. Interventions necessary for sustainability multiplier effect and cross cutting issues have been clearly cited in reports, and useful recommendations have been highlighted. Working under such challenging terrain, with such a wide area programme sites, with strong cultural values in some places, required a strong determined team-work like that of Concern Tanzania in Ngara, in order to work smoothly with the community. They have made a great breakthrough (Appendix 19) in the area faced with a number of challenges.

3.2.5 Monitoring and evaluation

Monitoring and evaluation was proposed to be guided by the detailed M&E plan developed after the initial baseline study and refined in the early stages of the project. It was also planned that level of performance would be monitored for activity completion in the years identified in the work plan process. Through monitoring and regular evaluation of activities and accomplishment, the results were able not only reflect access to project progress and success, but also assisted in adjusting and modifying some programme activities as needed while taking into account local cultural sensitivities, gender and minority issues as well as existing legal frameworks. The monitoring and evaluation findings were to be reported on quarterly basis. The reporting was to explain and illustrate clearly and concisely how the partner has fulfilled the project objectives by following the reporting template provided.

It has been noted that there is a range of monitoring information at the programme office. Furthermore, Partners' monthly reports reflect the extent of monitoring done by each partner on some indicators. Moreover, on annual basis, an M&E survey is conducted to collect information around Knowledge,

Attitude and Practices of the community. The evaluation team ascertained the availability of these M&E information.

The strengths of the original M&E are that it had provided a platform for improvement. Formerly, the M&E team used to go to each site in order to collect data. This was a weakness and an extremely expensive undertaking and hence, they devised a way of using the facilitators to collect the data using the up-front prepared M&E data sheet. The quality of data collected is good and where there is any weakness it becomes easier to verify since it is collected at community level.

The information from monitoring (tools are robust) was found not be critically analysed and hence, not easily accessible. Some community facilitators have kept them in their phones just in case they are urgently needed they flush them to the programme team. Moreover, there is evidence of strategic decision making based on monitoring information. This has been substantiated like in the case of the decision made by the programme team of giving some villages a school RWH tank first, while expecting to give them additional sanitation facilities in the subsequent times. This is mainly because the villagers could not source all the required construction materials to warrant construction of a tank, and sanitation and hygiene facilities. The level of application of recommendations from technical visits and the mid-term review are highlighted in Appendix 18 of country outcome performance measurement. Given the nature of the geographical locations of the programme sites, what has been done is adequate to attain the intended programme goal.

It has been observed during the final evaluation visits that the community has been sensitised to be able to handle monitoring and evaluation. However, some community members are slow learners and may need refresher tailor-made training by the district authorities after Concern Tanzania leaves or conclude their assignment. During FGDs the community confirmed that improved and constructed WASH infrastructures are their properties and they will handle O&M instead of waiting for someone else to come to do the work for them. However, they said that where high level of technology is required or a technical aspect which they do not know about, they will use the district council to assist them. This is a good understanding and clearly shows that the programme has achieved one of the important aspects sustainability.

Furthermore, it was noted during the evaluation visits that the community facilitators (*mraghabishi* in Kiswahili) are assisting in filling in the provided templates which helped in monitoring the implementation of the programme activities and take the necessary action timely. The community facilitators are availing the data anytime when they are needed (Box 2). This is a commendable practice since the facilitators are at the grass-root level and therefore, are able to see any detail of implementation that requires timely intervention.

Box 2: Voice of Biharamulo District Council Staff

The district council has taken examples of tools of the programme in order to develop its data base and monitor change

3.2.6 Use of Complaints Response Mechanism

It is reported that the Complaints Response Mechanism (CRM) was embedded as part of HAP of which Concern Tanzania is a member. To ensure the programme is accountable, 20 villages in Kibondo apart from training accountability issues have also been facilitated to be able to prepare village charters and awareness was created on the importance of CRM. Through their suggestions, complaints due to programme works have been channelled to the Programme Manager to be worked on and solutions sought/provided.

3.2.7 Cost effectiveness

Analysis of actual expenditure in implementing programme activities, confirms that Concern Tanzania has been ensuring financial accountability through a high-quality financial and management system. Furthermore, it was established through interview with programme staff that existing financial regulations and accounting eliminates the risk of double funding.

The status of actual costs for planned activities against estimated cost and evaluation findings (Appendix 15) indicates that the activities has been completed within the set budget and communities are benefitting from the constructed facilities. Given the wide spread nature of the programme area, the activities could not use lesser amounts of money and neither do construct more facilities within the same budget.

Additionally, the level of funding limited the implementation to simple shallow well technology and spring protection only. These only contributed to clean and safe water but could not impact on the long walking distances and time spent for fetching water. In future, consideration may focus on gravity schemes and solar powered water projects which apart from having remarkable impact, they can also be well managed.

3.2.8 Completion of project activities

Before programme activities implementation, partners reviewed community findings i.e. PRA and or ward level plans and prepare plans and budget templates. The annual planning meeting with partners was convened when partners submitted their plans for joint review and discussion. Thereafter, a compilation of partners reviewed plans was done to have a complete programme plans which reflect donor funding.

Review of programme documents indicates that most of WASH facilities have been completed as presented in Appendices 11-13. The status of completion of WASH facilities that were visited showed that all of them (100%) had been completed, and are in use, though some of them were not functioning as expected due to many reasons including repairs. The evaluation findings are summarised in Appendix 14 and Appendix 9 (Field Photos).

3.2.9 Implementation challenges

Through interviews and FGDs, a number of implementation challenges were identified and documented as follows:

- Late delivery of industrial materials to site resulted in implementing partners to work under pressure. The late delivery was mainly due to unavoidable procedures of tax exemption which was to be obtained from the government.
- Transportation of building materials to the project sites had been very difficult as cited by the project team and some village leaders due to bad road conditions especially during rainy season;
- Community contributions are still minimal compared to requirements and pace of programme activities implementation due to:
 - Poverty;
 - Contribution in terms local materials does not follow implementation plan as community have their own pace of collection of local materials;
 - Little time for community mobilization process. Time is limited to conduct adequate community mobilization; and
 - Politics intervention.
- Some communities refused the programme interventions because they felt that they will be a big burden to them (e.g. Nyakayenzi village for its Primary School). Then implementation strategy had to change and they were given a tank only while waiting for giving them latrines after completion of construction of the tank;
- Partners have got good skills but they are lacking adequate staff members. As reported by TWESA Ngara, in the beginning programme implementation went over a year but in the near past they have worked very hard. This is because they have got few people who are heavily used. Staff is employed on contract terms, and hence, those that were employed earlier left because of insecurity of employment.
- **Policy harmonization:** water, environment and land policies harmonization is important. This is basically due to the complications that have been raised by some communities regarding leaving 60 meters radius of the catchment area of the protected springs free from human activities like agriculture. During the evaluation visits, a number of catchments appeared to still have human activities going on within the 60 meters; and
- **The rise of cost of items:** reported to by partners to be much higher compared to the budgeted figures.

3.3 Programme Effectiveness

The effectiveness of the programme was assessed in terms of the extent to which the overall objective and specific objective have been achieved as measured by the expected outputs based on log-frame matrix indicators/targets, for the duration of 2011 to 2014 and the extent to which the WFP contributed to these achievements.

3.3.1 Increased access to adequate, clean/safe water through provision of sustainable water supply infrastructure that is managed by communities in 25 target wards

As reported in project documents and ascertained during evaluation (Box 3) all planned water facilities have been completed and over 96% are functioning (see Appendices 11-13). A100% of the visited water facilities have had the quality of water tested and some were reported to have bad smell and turbid (see Appendix 14). The water quality data for all constructed water points is presented in Appendix 16). Other results are discussed as follows:

Box 3: Voice of District Council Staff

Biharamulo: Water coverage was 38%, but after Concern Tanzania's intervention it is now over 98%

Kibondo: The level of water accessibility has increased by 8%.

1. Source of Water - Dry Season

Dry season is accompanied by loss of water sources especially where soil conditions are very porous. About all of the respondents (98.9%: N=258) collect water from protected water sources during the dry season. However, 11.1% of the residents collected water from unprotected water sources as shown in Chart 1.

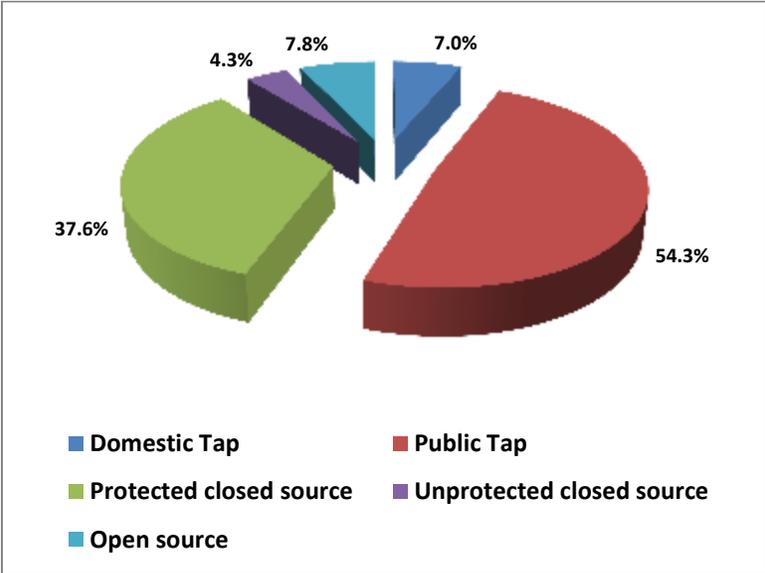


Chart 1: Sources of water during the dry season

The unprotected sources are subject to contamination and hence, dangerous to health. Nonetheless, some of the protected sources have been suffering from low pH values (4.9-6.9, see Appendix 16) which have resulted in a phenomenon of pipe being eaten up by the dripping water (Field Photo 16 – Appendix 9). Out of 173 water sources, 35.3% were tested (Ngara – 29.5%: n=95; Biharamulo – 43.2%: n=74 and none in Kibondo: n=4) in 2012 (Appendix 16). The results indicate that 84.7% and 44.6% of the tested water sources had *E-coli* in Ngara and Biharamulo districts respectively. The implication here is that the baseline survey tested fewer water sources (data not available, see Appendix 16) compared to the 2012 ones and hence, the results. Alternatively, the human activities closer to the water sources as observed during the evaluation might be contributing to increased *E-coli* values.

The database has been developed and all water points are mapped and tested. Some of the results are presented in Table 1. The communities that collect water from unprotected sources are mostly located in Kibondo district, which reported 39.1% of the respondents within the district. The communities that are better off in collecting water from protected sources are in Biharamulo district, whose majority (66.7%: n=99) collect water from public taps.

Table 1: Water collection situation in Ngara, Biharamulo and Kibondo (%)

District	Domestic Tap	Public Tap	Protected closed source	Unprotected closed source	Open source
Ngara	7.8	34.4	53.3	0	1.1
Biharamulo	8.1	63.6	29.3	3.0	0
Kibondo	4.3	66.7	29.0	11.6	27.5
Total	7.0	54.3	37.6	4.3	7.8

2. Time to Collect Water – Dry Season (%)

The time used to collect water during the dry season from the main source (public tap) for most of the HHs (59.7%: N=258) is 0-30 minutes. However, a substantial proportion of HHs (10.1%) still collects water for more than one (1) hour as the sources (WFP interventions) are located far from these communities. Within the districts, these HHs are 16.2% (n=99) in Biharamulo, 7.2% (n=69) in Kibondo and 5.6% (n=90) in Ngara (see Table 2). This is clear that the poverty of the people will continue to persist in those communities since a lot of time is spent on water and almost, no time and energy will be available for other important cores of the house. However, the project has had an impact since the baseline value was 19% of the residents Kibondo used to walk more than 60 minutes (distance of >400 meters), while, currently only 16.3% walk that far; those of Biharamulo are respectively 30% and 16%, and the situation in Ngara was 19% and now 5.6%. The programme has done a commendable job.

Table 2: Time used to collect water – Dry Season

District	0-30 minutes	30-60 minutes	More than 60 minutes	No Answer	Total
Ngara	77.8	8.9	5.6	7.8	100
Biharamulo	42.4	36.4	16.2	5.1	100
Kibondo	60.9	26.1	7.2	5.8	100
Total	59.7	24.0	10.1	6.2	100

3. Source of Water - Wet Season (%)

The situation of main sources of water during wet season is not much different from that during the dry season. However, as shown in the Table 3, there is a slight increase in proportion of HHs collecting water from unprotected sources (from which is 12.1% – Chart 1 to 11.2% (5.4% unprotected source and 6.2% open source, and 11.6% from the roof – Table 3). Moreover, during the wet season 13.5% of HHs collect water from other sources like the roof (11.6%) and open springs (1.9%). Within districts, these HHs are in Kibondo (23.2%: n=69) from roof rain harvesting and Ngara (5.6%: n=90) from open springs.

Table 3: The Water Sources during the Wet Season in Ngara, Biharamulo and Kibondo

District	Main Sources					Total	Other sources of HH water			Total
	Domestic Tap	Public Tap	Protected closed source	Unprotected closed source	Open source		From the roof	None	spring water	
Ngara	11.1	35.6	46.7	3.3	4.4	100	6.7	87.8	5.6	100
Biharamulo	6.1	52.5	29.3	6.1	1.0	100	8.1	91.9	0	100
Kibondo	7.2	69.6	18.8	7.2	15.9	100	23.2	76.8	0	100
Total	8.1	51.2	32.6	5.4	6.2	100	11.6	86.4	1.9	100

4. Time to Collect Water (Wet Season)

The proportion of HHs collecting water within 0-30 minutes increased from 59.7% in dry season (Table 6) to 62.4% (N=258) in wet season (see Chart 2). This justifies the increase in other sources of water such as rain harvesting and emerging new springs. Subsequently, there is a drop in HHs collecting water for more than one (1) hour from 10.1% in dry season to 5.8% in wet season.

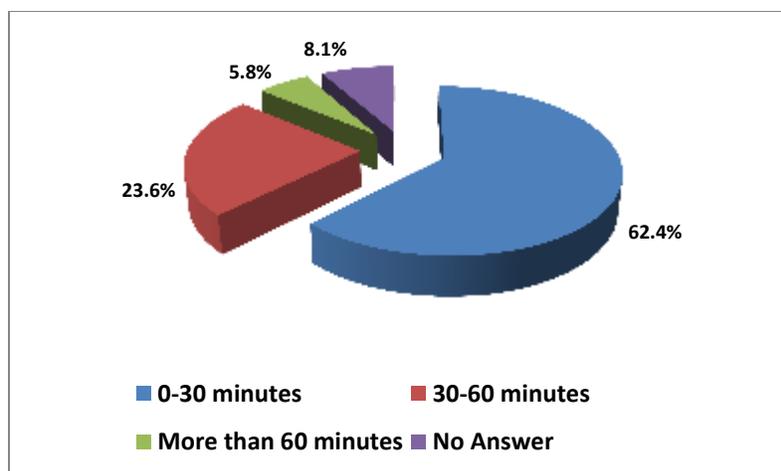


Chart 2: Time to collect Water (Wet Season)

3.3.2 Improved household and school sanitation through community empowerment in construction of latrine facilities in 25 wards

Analysed HHS data shows, interviews and FGDs (Box 4) indicate that there is progressive improvement in HHs and school sanitation through community empowerment in construction of latrine facilities in all (100%) programme areas, as presented and discussed below.

Box 4: Voice of Biharamulo District Council Staff

- Community members are building improved latrines;
- People have started practicing hand washing after toilet use; and
- Boiling drinking water is practiced though at a low

1. Latrines

In all districts, except Kibondo, HHs has some form of latrine as shown in the Table 4 and comment in Box 5. In Kibondo district only 97.1% (n=69) of the HHs within, have some form of latrine. With respect to improved pit latrines, only 33.5% of HHs (N=258) have them. Most of these HHs are in Ngara district whereby, within the district half of the HHs has them. The majority of HHs within Kibondo district (67.6%: n=69) have pit latrines without slab. Pour flush latrine are found in Biharamulo district, where 30.3% of HHs within the district have them. The availability of a certain type of latrine can be attributed to exposure of residents to different types, education level and economic status of people.

Box 5: Voice of DED (Kibondo District Council)

Some community members have built new latrines. The availability level has changed from 78% (any form of latrine) to 84% (after Concern Tanzania programme intervention) with 61% improved latrines

Table 4: Latrine Situation in Ngara, Biharamulo and Kibondo (%)

District	Availability of Latrine	Pour flush	Improved pit	Pit with slab	Pit without slab	Open Pit	None
Ngara	100	6.7	50.0	27.8	14.4	1.1	0
Biharamulo	100	30.3	29.3	12.1	25.3	3.0	0
Kibondo	97.1	1.5	17.6	11.8	67.6	0.5	1.0
Total	99.2	14.4	33.5	17.5	32.7	1.6	0.4

The types of latrines mostly used by school children are shown in the Chart 3. The common one is the pit latrine with slab (43.2%: N=258). However, some school children (1.1%: n=90) use pit latrine without slab (Appendix 15_Table 5). This was the case of Muganza Primary School (see Field Photo 14 - Appendix9).

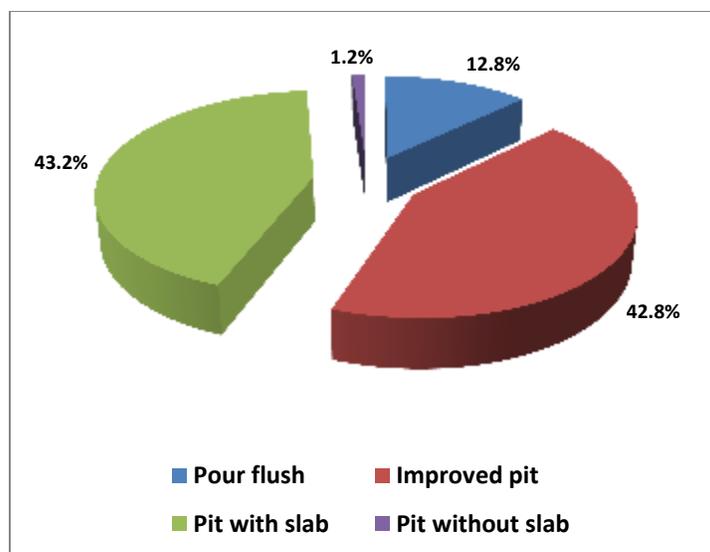


Chart 3: Available types of Latrines

2. Hand washing/ Drying Rack Facilities

Latrines with hand washing facilities, and washing/drying racks were 64.7% and 70.2% (N=258) in the three districts as shown in Table 5. Within the districts there were more washing/ drying racks in Ngara (77.8%: n=90) and latrine with hand washing facilities in Kibondo (75.4%: n=69) than in other districts. The baseline did not present the status at that time.

Table 5: Hand washing facilities in Ngara, Biharamulo and kibondo

District	Latrine Hand washing facility %	Washing/drying rack %
Ngara	61.1	77.8
Biharamulo	60.6	72.7
Kibondo	75.4	56.5
Total (%)	64.7	70.2

3.3.3 Improved knowledge, attitude, practices of good health/hygiene behaviour of targeted communities/school children through participatory methodologies in 25 wards

The improved knowledge, attitudes, practices of good health/hygiene behaviour of targeted communities was assessed through participatory methods and HHS. The impacts discussed in the following section have been the result of Concern Tanzania PHAST, C2C approaches as well as awareness creation on improved sanitation and hygiene practices, and training through various methods. In addition to that IEC materials have also been used to impart and remind beneficiaries about sanitation and hygiene knowledge. It is reported and noted that the programme partners and District Council have been supported at the planning and design level of the IEC materials. At later stages of production, the centralization of messages was done at Concern Tanzania. This was all to maintain the consistency of the messages following lessons captured in the past were partners produced IEC materials with different messages contrary to the expected.

1. Drinking Water Treatment

More than a half of the respondents (67.1%: N=258) in the three district said that drinking water is treated to make it safe (Appendix 17_Table 1). More HHs in Biharamulo (75.8%) treat drinking water than in the other districts (Ngara, 62.2% and Kibondo 60.9%). The village that treats drinking water most in the programme areas is Kikomakoma (9.8%: N=258), Biharamulo district, as shown in Chart 4.

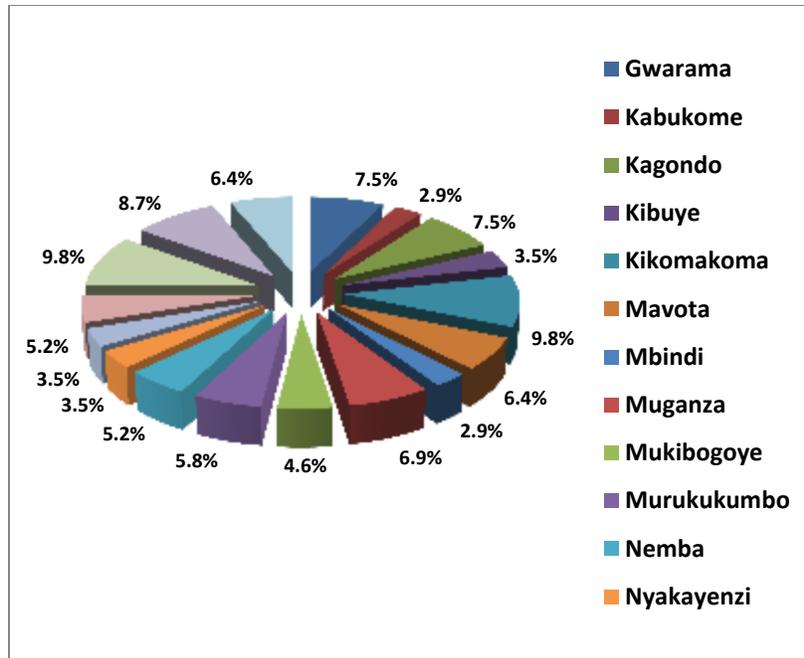


Chart 4: Drinking water situation per village

2. Methods of Treatment of Drinking Water

The common method of treating drinking water used by the communities is boiling (58.1%). This has been found to be a common practice in all districts. However, internationally, boiling of water is not recommended as a sustainable way due to complications of deforestation. In the absence of a proven possible affordable way at community level this will continue to be used. Other options are presented in Chart 5.

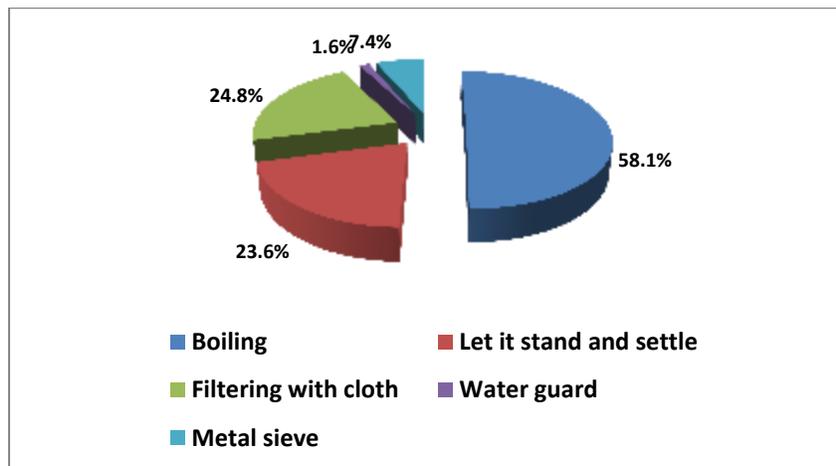


Chart 5: Methods of treating water

Boiling water and use of water guard is practiced in Kibondo (1.4% and 66.7%: N=258 respectively) more than in other districts and within the district 66.7% and 13.0% (n=69) HHs respectively, treat water. Using water guard is easy for the villagers although it requires relatively less turbid water. Filtering with cloth is practiced more in Biharamulo district (36.4%: n=99). Filtering has got a limitation of contamination of water if

Box 6: Voice of DED (Kibondo District Council)

- The behaviour of community has started to change. Change is a process; and
- There is a challenge of boiling water and the water from the wells is coloured.

the cloth is not clean. Similarly, if the person who is filtering has got dirty hands, it is a problem. Letting the water stand and settle method is used more in Biharamulo district (29.3%: n=99) than other districts (see Box 6 and Table (Appendix 17_Table 1). This has got an advantage of settling all the settleable particles in the water. However, it may not remove all the contaminants in water and hence, another method may be needed as an additional step.

In Kibondo district (N=69), boiling water is common in Nyarugusu village (50%) and water guard is used only in the same village (100%: n=25) as well as in Nyamiaga Village (100%: n=9). Filtering drinking water with cloth in all programme districts per village is presented in Table 6.

Table 6: Methods of treating water per village in Ngara, Biharamulo and Kibondo

District	Village	n	Methods of Treatment Water (%)					Total (%)
			Boiling	Let it stand and settle	Filtering with cloth	Metal sieve	Water guard	
Ngara	Muganza	20	21.7	42.9	35.3	0	0	22.2
	Mukibogoye	9	13.0	7.1	17.6	0	0	10.0
	Murukukumbo	11	19.6	7.1	11.8	0	0	12.2
	Nyakiziba	14	8.7	42.9	5.9	25.0	0	15.6
	Nyamiaga	9	15.2	0	29.4	50.0	100	10.0
	Rwinyana	27	21.7	0	0	25.0	0	30.0
	Sub-Total	90	100	100	100	100	100	100
Biharamulo	Kabukome	5	6.9	3.4	5.6	0	0	5.1
	Kagondo	15	19.0	10.3	13.9	16.7	0	15.2
	Kikomakoma	17	25.9	31.0	30.6	50.0	0	17.2
	Mavota	13	12.1	3.4	5.6	0	50.0	13.1
	Mbindi	8	3.4	3.4	5.6	0	50.0	8.1
	Nemba	23	15.5	27.6	16.7	0	0	23.2
	Runazi	18	17.2	20.7	22.2	33.3	0	18.2
Sub-Total	99	100	100	100	100	100	100	
Kibondo	Gwarama	18	32.6	27.8	54.5	66.7	0	26.1
	Kibuye	18	6.5	44.4	0	0	0	26.1
	Nyakayenzi	8	10.9	16.7	9.1	22.2	0	11.6
	Nyarugusu	25	50.0	11.1	36.4	11.1	100	36.2
	Sub-Total	69	100	100	100	100	100	100
Grand Total		258						

3. Type of Water Frequently Drank by School Children

Generally, all school children respondents reported to be drinking treated water. With respect to previous reports there has been an increasing trend in drinking treated water by school children from 50% during baseline (2011) to 60% MTR (2012) and 2013 annual survey found 75%. More than half of school children drink boiled water (58.9%: N=258) (Appendix 17_Chart 1). Only a small fraction of the respondents (1.2%), drink water treated by other means as already shown and discussed in previous sections. District-wise (Table 7), more children in Kibondo (65.2%) drink boiled water than in other districts. Only children in Biharamulo district drink treated water other than boiled. In Biharamulo district, the proportion of school children that often drank water treated with other methods than boiling were from Kabukome (33.3%), Mavota (33.3%) and Mbindi (33.3%) villages (see Appendix 17_Table 2).

Table 7: Water frequently used for drinking in programme areas

District	N	Frequently Used Drinking Water (%)		
		Boiled	Un-boiled	Treated
Ngara	90	47.8	52.2	0
Biharamulo	99	64.6	32.3	3.0
Kibondo	69	65.2	34.8	0
Total	258	58.9	39.9	1.2

4. Frequency of Drinking Water by School Children

Drinking water practice was explored in school children as important hygiene behaviour. The school children were asked how many glasses of water they drank daily. The number of glasses drank daily could also indicate availability of water at school or in the community. Findings indicated that about half (40.7%) drink 3-4 glasses of water daily (see Chart 6). These are mainly in Ngara district (50.0%) (See

Appendix 17_Table 3). School children that drink adequate water (at least 8 glasses daily), which is a minority number are from Biharamulo district. Within villages, school children who drink adequate water (at least 8 glasses daily) are from Kagondo (20.0%) and Kabukome (16.7%) in Biharamulo district and Nyarugusu (4.0%) within village in Kibondo district (See Appendix 17 - Table 4).

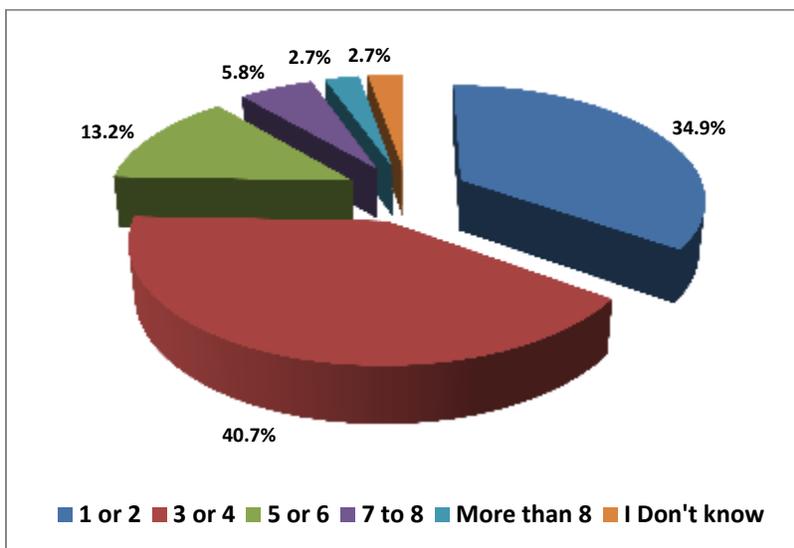


Chart 6: Frequency of Drinking Water by School Children

5. Hand-washing Practices

Generally in the programme areas, the majority of respondents (Chart 7) wash hands with water and soap (78.7%: N=258). Communities that do wash hands with water only are mainly from Kibondo (24.6%) (Table 8). These practices presents the impact of the programme trainings in target areas. Moreover, in part, they indicate the level of availability of water and availability of money to buy soap for the purpose. The situation of hand washing within the villages portrayed that, the communities in Kibondo that wash hands with water only are mostly in Gwarama village (53.8%), while, in Ngara and Biharamulo districts are respectively in Muganza (44.4%) and Runazi (33.3%) respectively (see Appendix 17_Table 6).

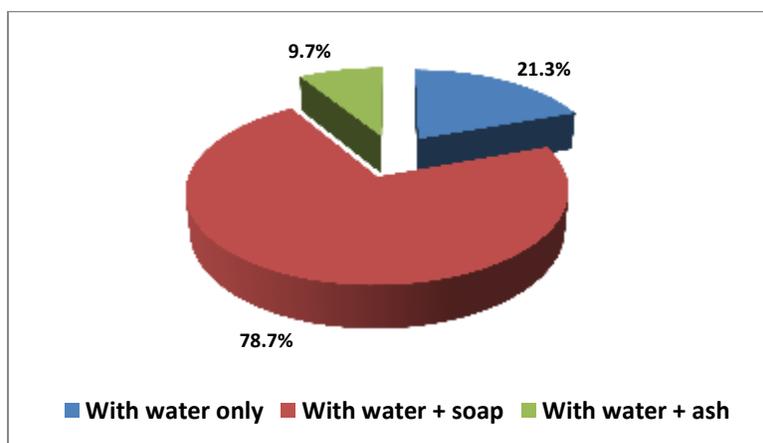


Chart 7: Hand-washing practices

Table 8: Hand-washing practices per programme district

District	N	Hand-washing Practices		
		With water only	With water + soap	With water + ash
Ngara	90	30.0	80.0	1.1
Biharamulo	99	15.2	74.7	7.1
Kibondo	69	18.8	82.6	24.6

Total	258	21.3	78.7	9.7
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6. Critical Moments of hand Washing

The critical moments that people wash hands were generally cited by questionnaire respondents to be before eating practiced by more than half (58.9%: N=258) district community members. After toilet use the proportion is also about half (49.6%: N=258). Other options are cited in Chart 8. Hand washing after toilet use is practiced about evenly in all districts as shown in Appendix 17_ Table 7). However, Ngara HHs practices (40.0%) less than other two districts.

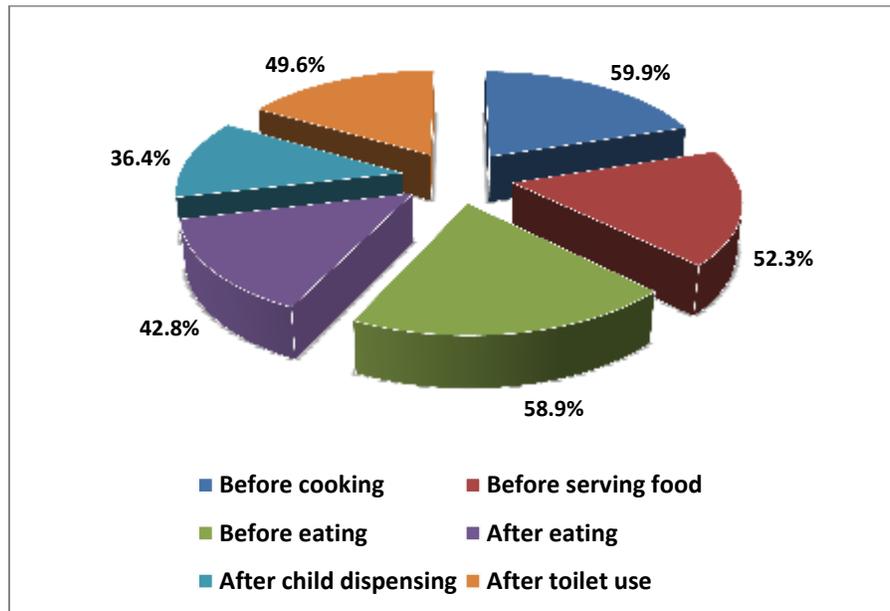


Chart 8: Critical moments for hand-washing practices

Hand washing after toilet use is practiced about evenly in all districts (see Appendix 17_ Table7). However, Ngara HHs practices (40.0%) less than the other two districts. Better hand washing practices than other villages are in Nyarugusu village, Kibondo district (see Appendix 17_ Chart 2). The change is attributed to formed C2C intervening in their communities (see Box 7) which

Box 7: Voice of DED (Kibondo District Council)

- C2C clubs have motivated the pupils. Many of them are requesting to become members; and
- We have by-laws whereby, C2C clubs are known; respected and their work has to be reported to District Council (DC).

has changed their behaviour to an extent of installing hand washing facilities in or near toilets. Overall in all project areas 64.7% (N=258) respondents said they had hand washing facilities. Distribution by Districts were as follows: Ngara (21.2%), Biharamulo (23.3%) and Kibondo (20.2%). This indicates an increase from 7% during baseline (2011) to 16% MTR (2012) and 18% during 2013 annual survey. The end term evaluation findings (64.7%) are also above the programme target of 53%.

7. School Children frequency of taking bath

The frequency of school children taking bath was explored as a hygienic behaviour. As shown in the Chart 10, most of the in school children (64%) generally in the programme districts take bath daily. This situation indicates that the improved water accessibility has had a good impact on the school children. When they were asked about the importance of bathing, they responded nicely and pupils are visually clean, indicating that the programme training has imparted adequate knowledge which has been understood. Clean bodies will alleviate water washed diseases on those children. Within villages (Appendix 17_ Chart 3) very few school children take bath at least twice a day and are in Biharamulo district (9.1% with the districts), mostly in Kabukome village (60%: within the village).

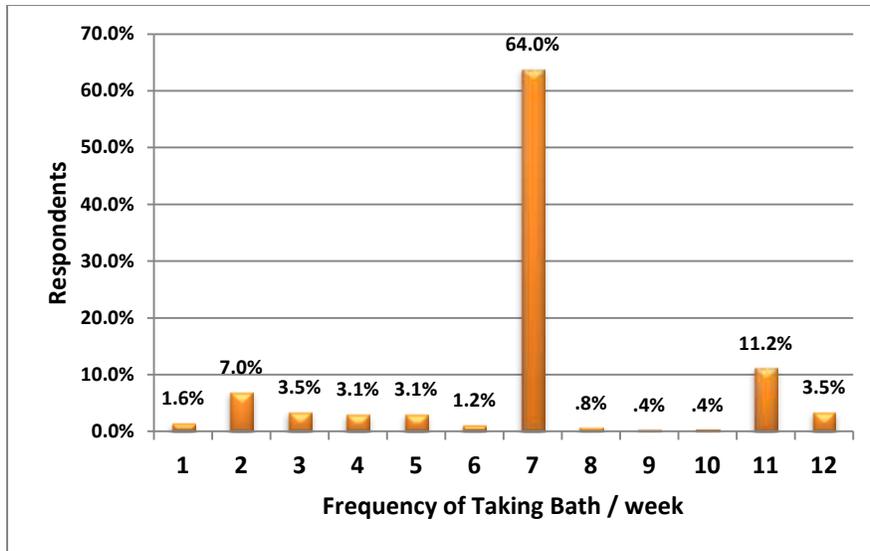


Chart 9: School Children frequency of taking bath

8. Solid Waste Disposal

It was clear from the questionnaire results that solid waste is mostly thrown in a pit (55.4%) in all districts (Chart 11). Only 12.4% of respondents said solid waste is composted into manure. It was not further assessed as to where the composting knowledge was gathered from.

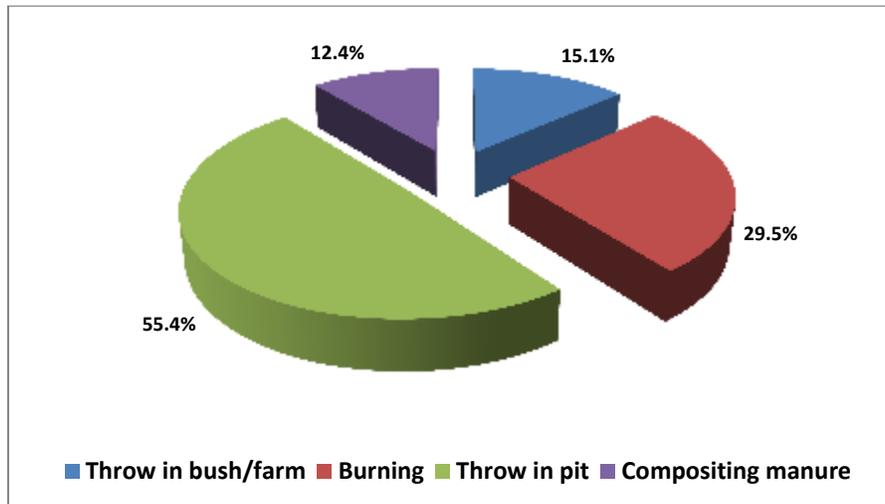


Chart 10: Solid waste disposal methods generally used in programme districts

However, composting of solid waste into manure is mostly done in Kibondo District in Gwarama village (8.7%) as shown in Chart 12 and Appendix 17_Table 8). This is the outcome of Concern agriculture programme which has been integrated with WASH in all three districts.

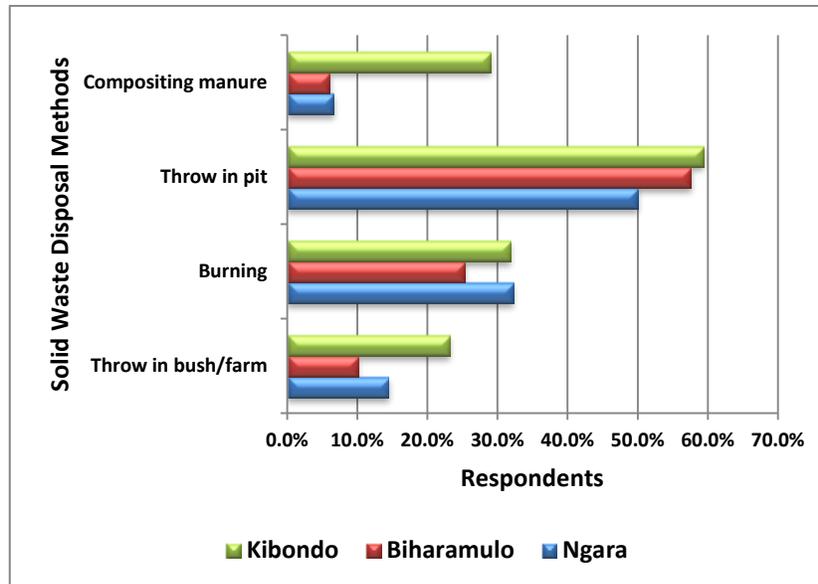


Chart 11: Solid waste disposal method per programme district

3.4 Programme Outcome/Impact

The performance of the programme has been progressively moving towards the overall and specific objectives compared to previous values as shown in Appendix 19.

3.4.1.1 Contribution to the improvement of the health and livelihoods of poor communities in Tanzania and to the achievement of the MDGs

The output addresses software activities of WASH infrastructure. Based on the planned indicators, the implementation status is good and has achieved the intended goals of Concern Tanzania as ascertained by beneficiaries (Box 8). Thus, the sustainable access to clean and safe water, sanitation and hygiene practices in Ngara, Biharamulo and Kibondo districts, in Western Tanzania therefore, ascertains improved livelihood of not only current people but those in future as well.

Box 8: Voice of Head Teacher (Kibuye Primary School)

We had a very serious shortage of latrines in this school with 538 pupils (282 girls and 256 males) and 9 teachers (1 female and 8 males); and

Indicators of change:

- Congestion in latrines have been reduced compared to what we had in the past;
- Improved school attendance of pupils;
- Stomach diseases have been reduced; and
- Pupils are drinking water without supervision since last year

3.4.1.2 Enhanced community health through sustainable access to clean and safe water, sanitation and hygiene practices in Ngara, Biharamulo and Kibondo districts, in Western Tanzania

The baseline survey conducted before the WFP in 2011 was supported by community during field visits that there has been high incidences of water borne and water washed diseases due to inadequate domestic water supply, poor sanitation and hygiene practices. Peeling a leaf from interviews and FGDs at school, community and household level, a number of problems related to WASH were mentioned which included long walking distances to water sources, poor hygiene practices and inadequate latrines. So, implementation of WASH facilities has enhanced health of community, children and HHs at large (Appendix 20).

Box 9: Voice of Head Teacher (Murukumbo Primary School)

- The programme is very good. It has met the need of the hour (timely intervention);
- We close the latrines in the evening and we follow up the cleanliness; and
- Pupils are washing their hands with soap after toilet use using "kibuyu shirizi"

The field visits and FGDs (see Box 9) ascertained that the improved water sources (despite of the distance), and provision of sanitary facilities has improved the health of the people. All the interviewees said that the health situation has improved especially reduced diarrhoea cases and measles, which have been confirmed by dispensary records (Table 11) which show a significant decrease in the prevalence of the top ten diseases in Ngara district. Diarrhoea cases and eye infections seem to be increasing for both under 5 years of age. For Diarrhoea the increase is 2323% for under 5 and 2.7% for above 5; while for eye infections under 5 years is 27.5% and above 1.4%.

The results could be possibly the outcome of programme training which has triggered many people to go to hospital and hence, a different result from what was observed during the mid-term. Moreover, there could be an observer error in the recording of hospital data. All in all, there is no way that someone could ascertain that all the patients were from the project area since it is a district that borders neighbouring country. The evaluators noted the changes in community health and even perspective of answering the questionnaires which was very encouraging and indicated a good work done by the programme team.

Throughout the implementation process, a good balance of implementation has been maintained between the software and hardware activities to ensure both quality and sustainability of the programme according to the programme teams' views. Following an intensive implementation of both new and rehabilitation of water supply infrastructure, the water point density mapping indicated that water coverage has increased from 77%, 62% and 49% in 2012 to 87%, 72% and 70% as of November 2013 in Ngara, Biharamulo and Kibondo respectively.

3.5 Sustainability

The sustainability of the programme was assessed in terms of its ability to continue delivering benefits to the beneficiaries after Concern worldwide support has been completed. Sustainability has therefore been evaluated with respect to the effectiveness of the established groups/committees e.g. water management committees, WUGs and CtCs to support programme activities' implementation.

3.5.1 Institutional/local ownership

Institutional ownership is one of the main drivers or strengths of the implementation of programmes due to RBA, partnership, advocacy, and HAP approaches. Such undertaking strengthen/form LGA and community entities such as water management committees, WUGs, sanitation/hygiene employees (C2C), sanitation groups) to fulfil their responsibilities and work together towards ownership as per the requirements of NRWSSP. For example, the District Water Department which worked together with the programme team has included the sustainability component in their plans and developed a programme monitoring system. The programme monitoring system by the district is important since it involves determining what data to collect, how, when and who will collect the data, analysis of data, reporting progress and storage of data in a user friendly language ready to be used by any stakeholder.

The training component was noted, during the evaluation, as the main programme activity important for enhancing the effectiveness of the established groups to ensure sustainability of the project. The training component dwelt on creating sense of ownership and empowerment. Progress reports indicate that village leaders in all 71 project villages, totalling 2,130 people, have been trained on project management skills. The evaluation team observed that the training has enabled village leaders to play a vital part in the leadership and decision making in villages and the training has ensured their joint participation effectively in programme implementation. Moreover, all 325 planned WUGs were formed and 2,273 committee members received training on governance and financial management while 320 members received training on O&M of water points.

It is also reported that the programme has been organising exchange visits to successful WUGs. About 40 (89%) of the 45 WUGs visited by December 2013 had successful projects within the programme area. Interview with some of members of established village groups indicated that they were knowledgeable and able to handle project management processes. This was ascertained by the high level of positive response to the questions raised by the evaluation team. All (100%) interviewed groups indicated a high level of understanding of their role to operate and sustain the facilities after Concern Tanzania concludes the programme. The community leaders, members of water management committees and other community members also said that they have the capacity to manage the WASH facilities in a sustainable

way. In addition, community members pledged that the biggest gift they will give the development partner is to keep the facilities working all the time they promised. This is a very promising commitment and one could read it out of the district officials talking that it is a genuine utterance. On the other hand LGAs are committed to the provision of WASH facilities to the community, for improved livelihood, as part of their mandate. Where a development partner has assisted the LGAs will make sure that the facilities are working as expected. Operational and maintenance issues within the community level of handling will be done by the community members themselves, but, those which are beyond their capacity will be handled at district level.

Furthermore, the evaluation team were informed through interviews with key informants, mainly local government leaders and FGDs, that there is now conducive environment for CSOs and LGAs participation in the development processes and partners are honouring their commitment made during the planning process. The action is progressively building the community capacity to sustain low-cost technologies and continuing promotion activities. For example, WUGs and partners reported and were observed by the evaluation team that they are effectively mobilising and supporting communities in the construction of improved latrines and continuous education and awareness raising on the prevention of water-borne and diarrhoeal diseases. The result has been an upgrading of the latrines in the community and households have appreciated the benefits of having an adequate latrine. Interview with programme partners and FGDs (Box 10) ascertained that stakeholders are working together and have become more and more accountable. This has been achieved through continued capacity building in O&M, and joint coordination meetings.

Box 10: Voice of Biharamulo District Council Staff
 There is very high level of ownership of the provided WASH facilities

3.5.2 Technical sustainability

A number of technical options for WASH exists which community members could select from basing on the level of service that they can afford and are willing to pay for, and user friendly. It was observed in Ngara, Kibondo and Biharamulo districts that, the constructed latrines can accommodate a number of groups at school community though the program did not include teachers in the provision of latrines. However, the future need is to continue to provide latrines for teachers and people with disabilities without forgetting the special needs of change room for girls and urinals for both girls and boys.

It is reported that technical guides have been provided in consultation with the District Councils to ensure easy implementation and support the O&M for continued use (sustainability) purposes. It will be good to develop an O&M guide before handover specifically for those technical parts (e.g. hand pumps and solar power systems) which could be difficult to handle in future. Trained people may move to greener pastures and leave the villages in dilemma but, the guide can help the technical people who would be available at any level. A number of measures have been taken (Table 9) to ensure technical sustainability including training of beneficiaries (especially users) in O&M.

Table 9: Status of Technical Sustainability

Sustainability Measure	Evaluation Findings
Latrines designs that accommodate a number of groups at school (including disabled and girls) and community.	The designs used have accommodated all groups at school community. This means people with disabilities have been considered as well.
Involvement of District Council in a number of technical aspects of the programme to ensure easy implementation and support of the operation and maintenance when the programme has ended.	<ul style="list-style-type: none"> • O&M guidelines have not been prepared; • Technical human resource is available at district level; • At district level technical support was provided and the communities contributed labour and resource mobilisation; • Technical human resource to handle O&M activities is available:- <ul style="list-style-type: none"> – In each school teachers have been trained to teach children to take proper care of water and sanitation facilities, and to monitor that they maintained. – In each village members of WUGs have been trained; and hence, • In some schools and communities, breakdown of (S)WASH facilities have been properly repaired by the beneficiaries themselves.
Formation of C2C clubs	These are available in schools and they are doing good job of becoming agents of change at school and in the community. They have developed songs, drama and poem groups which are used to pass over the WASH messages to other school members and community members at large

Sustainability Measure	Evaluation Findings
	whenever occasions happen.
Safeguarding health through safe disposal of excreta and solid waste	Has been covered in training.
Formation of WUGs, WUAs, water point committees	Has been done in order to oversee the workability of all constructed facilities.

3.5.3 Financial sustainability

Concern Tanzania analyses O&M costs and uses technologies appropriate for the communities to be able to sustain as presented and discussed in Section 3.1.3. Shallow wells, protected springs lasting up to 20 years with low-cost to the community have been constructed/ rehabilitated. Three tripartite MoUs (one in each programme district) have been signed that involve Concern Tanzania, LGAs and CSO partners and which detail roles and responsibilities of each partner. On top of that, the funding agreements are being signed on yearly basis between Concern Tanzania and individual partner assigned to implement the programme activities. At village level, all supported communities with WASH facilities reported that they have started water funds which will be used in case of a need to repair any broken part of the constructed facilities. So far 79 water funds have been established but only 68 are functional. However, the level of community contribution is very slow and low to ascertain complete O&M requirements let alone cost recovery. For example, spare parts for India Mark II and Afridev type of hand pumps are not readily available in the market. Their spare parts are also expensive comparing to buying a new complete hand pump. The cost of a new India Mark II hand pump in the programme areas costs TZS 2,750,000 (almost USD 1,697 – April, 2014 exchange rate), while the cost of spare parts is TZS 3,810,000 (about USD 2,351) comprising of pump head is TZS 1,500,000 (almost USD 925), cylinder is TZS 750,000 (approximately USD 423) and riser pipes with rods 13 pieces is TZS 1,560,000 (about USD 963). Few WUGs would afford these costs.

Furthermore, WUGs have been formed and received extensive training in O&M; the water users are willing to pay and agreed to handle all water fees and support to vulnerable groups who are unable to pay. Community members through FGDs confirmed that they do not want to commercialize the O&M since the people with disabilities will not benefit from the services. Sanitation groups have been/are trained to support improved latrine construction through small income-generation after demand is created by PHAST and C2C. Participation/ownership from inception has been inculcated through training and participation in different levels of programme implementation to ensure financial sustainability.

3.5.4 Environmental sustainability

The simple technologies used (spring protection, use of affordable for repair hand-pumps) are unlikely to cause groundwater depletion complication. Moreover, strategies have been developed and promoted pertaining to conservation of the environment through protecting water catchments and supporting communities with knowledge and skills of taming the environment. For example, it was ascertained during the evaluation visits that all the improved spring sources have been fenced and this was proven by the evaluation team when they visited the sources (Appendix 13). Furthermore, by-laws at village level have been formulated in order to guard the provided facilities.

Sensitisation sessions are going on especially on the aspect of recommended distances of communities' houses with respect to water points. Concern Tanzania is generating data on issues of water availability, environmental risks, community willingness to pay, lessons learnt, impeding factors to sustainability of the programme and others. Some of the generated information is shared in relevant meetings at local/national level as confirmed by Concern Tanzania partners during the evaluation fieldwork.

4 LESSONS LEARNT AND BEST PRACTICES

The conceptual model (Figure 1) was used to identify lessons learned and best practices that can be used and contribute to future engagement and strengthen the on-going relationship between the European Union and Concern Worldwide, and applied to future programming both within Concern Tanzania and Concern globally. Moreover, some major lessons from projects geared towards improving basic sanitation practices, as observed by Weinger (2009) indicate that:

- Health benefits are rarely a motive. It is necessary to find out what people really care about and build programs around those motives; and
- Economic status does not necessarily determine sanitation aspirations.

Pertaining to Weinger's observation the lessons learnt and best practices that can be scaled up, from the implementation of the WFP as observed, using the conceptual model (Figure 1), during the final evaluation visits include:

A. Programme team

- i) A good synergy of the implementation programme team and community is important for realisation of the expected objectives or goals.
- ii) Working as a team is good and offers quality outputs. It was clear from the field visit that the programme implementation success was a result of programme staff working as a team as noted also during the MTR.
- iii) There is need to handle carefully the conflicts arising during programme implementation and utilization of provided WASH facilities at school and community level. Wise handling of conflicts results in adequate handling and guarding of WASH facilities.

B. Community level

- i) Community participation or involvement right from the on-set of the programme assures active co-operation of beneficiaries with the implementing team.
- ii) Working with community members always requires a high degree of patience and team work since community members have got their own pace of working. Forcing them results in demoralisation of handling the programme activities.
- iii) Influential persons in the community can be used as change agents as well for WASH issues. They can be used to break any barriers in community. These are people whom the community respects and hence, listen to them whenever they talk.
- iv) Some form of motivation for food and psychological motivation of CORPS increases community participation contribution and builds commitment towards programme implementation.
- v) Too many community contributions at the village level and thus, burdening the households. Every development programme at the village level requires community contribution. These contributions need to be harmonised at community level.

C. Integration of District authorities

- i) Integrating district plans and those of Concern Tanzania is highly important in order to get good synergy and output with adequate impact and to avoid duplication of efforts. This has been reflected in co-ordination joint meetings organized by the District Councils which assures smooth implementation of the programme activities. They often assist in solving community problems like timely mobilization of local construction materials.

D. Cross-subsidization of knowledge

- i) The idea of Concern Tanzania programme team taking some of their staff members' time off office in order to assist the partners' office as a capacity building strategy is highly commendable. During the evaluation meeting, the partners cited and appreciated this effort. They said that they are becoming more and more confident in handling issues at hand. It is therefore important to see to it that, where capacity is lacking, in-house programme implementers can assist each other.
- ii) Children are good teachers who contribute to the enhancement of the sanitation and hygiene knowledge to their parents as observed in C2C clubs during the final evaluation visits. The children have been used as change agents in wide-spreading the understanding and use of hand washing tippy-tap (kibuyu-chirizi), which they have re-named it as "chombo-chirizi" (meaning tippy vessel)..

- iii) The Rights-based Approach (RBA) training was good for programme staff and partners and enabled them to engage themselves more in advocacy work. This has resulted into continued relationship with LGAs in facilitating community facilitation meetings organised by the District Councils.

E. Training

- i) The gender trainings have been very effective as women and men are all participating actively in addressing programme implementing issues. A number of them said that the programme facilities are theirs and they will continue to guard them for continued use.
- ii) Women are participating actively in meetings relative to how the situation was in the past.
- iii) Community training on WASH through PHAST methodologies has increased community's understanding and awareness and hence, resulting into behaviour change and adaptation. This should be a gist for every WASH programme.

5 CONCLUSION AND RECOMMENDATIONS

5.1 Conclusions

5.1.1 *Relevance*

The evaluation has established that the programme overall objective and specific objective are all in line with the priorities of the needs of the communities in the target wards. These also align to national policies/strategies, EU and Concern Worldwide priorities as well as MDGs. The specific objective, in particular, focused on enhanced community health because of inadequate access to WASH facilities. The data obtained from the Ngara health department (Appendix 20) ascertains that the project has been very useful to the beneficiaries. Across the beneficiaries and all programme stakeholders it was evident that the situation of water and sanitation related diseases in the programme areas after implementation of Concern Tanzania programme for the year show progressive improvement (Appendix 18). Thus, the strength of the programme lies in the fact that it has delivered results and reached the intended beneficiaries and impacted many beyond its designs levels.

5.1.2 *Efficiency*

The evaluation findings have established that value for money has been realised with the completion of programme activities within the budgeted resources despite of the implementation challenges discussed in this report. Moreover, the quality of the constructed WASH facilities was satisfactory although there is always room for improvement. In addition, the programme implementation process was well designed to ensure maximum participation of all stakeholders as per roles and responsibilities entrusted to each. All programme actors discharged their roles and responsibilities efficiently.

5.1.3 *Effectiveness*

Accomplishment of WASH facilities (Appendices 11-13) indicates that the programme goal and objectives have been clearly achieved to an appreciable high degree. Although behavioural change takes time, the realised changes are worth noting. The important and significant aspect is that there is a significant community change in dependency syndrome though there is still pockets of resistant to contribution towards development activities. Furthermore, there is significant move to gender equality and recognition of people with disability as equal groups of people in the society. The contribution of the programme to this achievement is comprehended.

5.1.4 *Sustainability*

Sustainability is widely defined in programmes of this nature as to what constitutes sustainability. However, in the context of Concern Tanzania WFP, the programme implementation process (using participatory approaches discussed herein the report) and planned activities have been designed to ensure sustainability. Most of sustainability related activities such as capacity building at district and community levels has been efficiently and effectively executed and completed. The level of community awareness, sense of ownership and responsibility is high compared to baseline and MTR findings. This has been due to (i) sustainable water supply infrastructure that is managed by communities, (ii) community empowerment in construction of latrine facilities, and (iii) involvement of communities through participatory methodologies.

5.1.5 *Outcome and Impacts*

Behavioural and attitudinal change takes time to significantly influence improved sanitation and hygiene practice. Nonetheless, it is worthy to note that both school children and the community are progressively moving towards good sanitation and hygiene practices as evidenced during the evaluation exercise. The health data also indicate that the community in the three programme districts (Ngara, Biharamulo and Kibondo) there is a significant impact reduction of the diseases of poverty i.e. malaria, acute respiratory infections and diarrheal diseases). This due to (i) increased access to adequate, clean and safe water (98.9%) through provision of sustainable water supply infrastructure (ii) improved household and school sanitation (99.2%) and (iii) improved knowledge attitude and practices of good health and hygiene

behaviour (treatment of drinking water – 67.1%; hand-washing practices – 78.7%; and proper solid waste disposal– 55.4%) of targeted poor communities and school children.

5.2 Recommendations

- i) Concern Tanzania has gathered vast knowledge and experience of working with communities pertaining WASH and SWASH facilities. It will be interesting if they could find a package to put down these experiences in a book for other people to tap instead of re-inventing the wheel.
- ii) Simple shallow well technology and spring protection have contributed to clean and safe water but have not significantly reduced the long walking distances and time spent for fetching water. In future, water supply interventions may continue to consider focusing on gravity schemes (which was Concern's priority but was constrained by availability of sources of water to gravitate and topography) and solar powered water projects which apart from having remarkable impact, they can also be well managed;
- iii) Some of the impacts come long after programme implementation, say 3 to 5 years, it may be reasonable to consider locating some funds to enhance monitoring of projects 3 to 5 years after project completion;
- iv) The community felt that the time allocated for trainings especially for technical aspects is inadequate. They recommended more follow ups and practical sessions on artisan courses especially repair of water pumps.
- v) The community lacks basic working tools to carry out repairs of their water points. Prepare an O&M guideline which will also identify the type of spare parts needed and related repair tools. In addition, the sources of spare parts should be identified and if possible in future projects of similar nature spare parts traders should also be included as programme partners.
- vi) Hygiene behaviour change is not abrupt but changes occur slowly in community. Increasing awareness campaign and strengthening monitoring and evaluation strategies is necessary. Tailor made refresher courses on WASH should be designed and implemented to areas where behavioural change is too slow. The District Council can continue to do this.
- vii) Community leaders are instrumental in mobilizing community members to contribute to the development activities such as construction of water supply schemes and the school improved sanitation and hand-washing facilities. They should continue to be given their due respect.
- viii) Negative political influence impedes the good implementation of any programme. Politicians should be handled by programme team in conjunction with the district authorities.
- ix) Concern Tanzania is good at WASH issues and since there is need, the organisation can expand its services to other needy beneficiaries in the country.
- x) Although water coverage has increased, there are places in uncovered districts' areas with much need. Concern Tanzania should look into the possibilities of reaching these areas.
- xi) Concern Tanzania has a very strong hygiene component where the link between hygiene, disease, and nutrition can be explained. A waste water utilisation component with vegetable gardening can be planned but also ensure people understand the benefits of eating more diverse food so that they do not sell everything. Villages where there are poor quality drinking water and poor water handling practices should be focused first.

5.3 Follow up of incomplete project activities

All construction activities have been almost completed but for minor correction works cited in this report, for cases where the evaluation team visited. It is however worthy to note that, some of the proposed components herewith need another project funding because they cannot be achieved in a period of one year as they need time and resources. This is especially for activities that require behaviour change and trainings (items ii- v here-under).The following programme activities still need to be revisited and new strategies formulated to bring about significant impacts:

- i) Rehabilitation of non-functional water points/ Construction of rainwater harvesting facilities in schools
 - Mukibogoye village – pipes should be plastic to avoid oxidation of pipes due to low pH of water; and
 - RWHT package should go to Rusumo Primary School that has nothing.
- ii) Community and partner water point management with respect to:
 - Training of WUGs in operation and maintenance of water points; and

- Water quality testing and disinfection.
- iii) RBA and advocacy has not been effectively done, especially in:
 - Rolling out relevant sections of NAWAPO, NWSDS, NRWSSP to communities and partners ; and
 - Facilitating and supporting exchange visits of WUGS given the fact that most of WUGs in villages visited were still in the emerging stage of development.
- iv) Community mobilisation in improved sanitation need further consideration in:
 - Training of CORPS to mobilise communities on sanitation;
 - Awareness creation in the communities on the importance of improved sanitation facilities;
 - Community mobilisation and support in construction of household improved latrines; and
 - Monitoring of latrine construction.
- v) Community capacity in improved hygiene behaviours is still low. Consider:
 - Conducting a KAP survey as a basis for monitoring change in sanitation and hygiene practices; and
 - Community awareness raising in personal and environmental hygiene via theatre, house to house visits and public meetings.