WASHPIUS BRIEF The Power of Integration to Multiply Development Impact



Why Integrate?

Integration supposes that together sectors can do more than alone. For decades the development community has tried to improve lives sector by sector without considering the whole interdependent system, with limited success in achieving the larger goal of improved lives. The actions of a single sector cannot bring the transformative, sustained changes required to improve the lives of people living in poverty. Horizontal rather than vertical programming provides an opportunity for a more integrated approach that mirrors people's lives. But integrated programming is more difficult to measure and demonstrate so donors have been reluctant to support it.

WASH itself is already an integrated model as it links water, sanitation, and hygiene into one entity—WASH. Adding additional layers and sectors makes it even more holistic. For example, the term WASH replaced WatSan as hygiene was



Integration is about enabling different sectors to work together for a common result. Under the



USAID-funded WASHplus project integration was a strategic approach to attain desired health and development outcomes and combined WASH with nutrition, education, HIV, and neglected tropical diseases programs.

Working in Zambia's Eastern Province, WASHplus, through its SPLASH project, showed that integrating WASH improvements into schools can lead to increased attendance and a healthier learning environment.



recognized as a critical element along with water and sanitation for health impact. Despite the name change, keeping hygiene front and center is a struggle—and an example of the need for and challenges around integration. In discussions around the Sustainable Development Goals, WASHplus and others successfully advocated to include hygiene as part of sanitation within

Goal 6: Ensure Access to Water and Sanitation for All.

This brief provides an overview of integration, and the companion program tools and slide decks provide more details on how WASHplus integrated activities in different countries and why integration matters.

What Does Integration Mean to WASHplus?

WASHplus integrated WASH into nutrition, HIV, neglected tropical diseases (NTDs), and education. In each instance, the integrated program yielded results benefitting both sectors. WASHplus has embraced the concept of integration on a continuum—where possible developing deliberate integrated programs and where not, integrating WASH as opportunities unfold. Along this integration continuum, some sectoral partners deliberately **co-locate** in the same geographic area to reach the same target beneficiaries; others **share tools and approaches**, which heighten collaboration and communication between sectors; or they deliberately work together to **plan and implement joint programming** in two or more sectors. At this final stage the different sectors recognize the value to each sector of

Integration Continuum

co-locate

share tools/ approaches plan/implement joint programming



In Mali, WASH was integrated into nutrition programming in several ways: malnutrition screenings and referrals, household visits (shown here), and cooking demonstrations. Trained relais conveyed WASH messages along with advice on breastfeeding and complementary feeding. integrating and embrace the potential for an even higher level outcome than sectors could attain separately.

Under WASHplus, integration served these main objectives:

- Helped ensure success in reaching each sector's objectives (see box at right)
- Aimed to achieve higher level goals with both sectors contributing
- Increased program reach or scale

Opportunities for Integration

WASHplus's objective to create supportive environments for healthy households and communities required it to develop comprehensive, integrated approaches. Integration served as an organizing principle for almost every WASHplus activity. The entry points were sectoral, systemic, and/or **physical**. In prior USAID-funded WASH projects, bringing **sectors** such as WASH and education or WASH and nutrition together was never routine, but that changed with WASHplus. In Mali, WASHplus was directed to develop an integrated WASH-nutrition program, and USAID/Zambia requested that WASHplus implement a large WASH in Schools program called SPLASH (Schools Promoting Learning Achievement through Sanitation and Hygiene). While integration often occurs across sectors, it also happens systemically, across different levels of a system-national, district, and community. In Kenya, WASHplus developed an integrated WASH-HIV model that was cascaded down from province to district to the household levels through multiple channels. **Physical** integration—placing people from different sectors in the same space—can help to motivate or spur change. In Zambia, SPLASH staff was housed in the district Ministry of General Education (MGE) office space creating inter-sectoral teams with ministry staff. This enabled advocacy to include WASH activities in strategic district and provincial MGE plans and budgets, and WASH indicators in MGE monitoring tools.

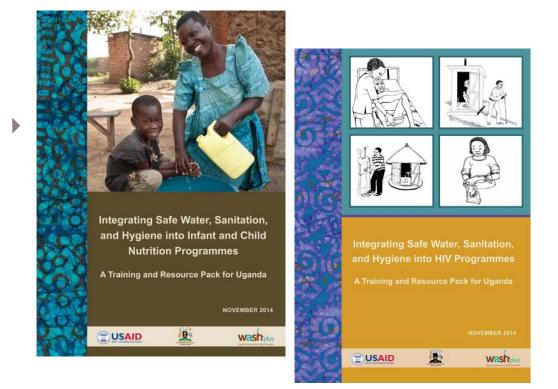
An additional important integration pathway is planned vs. opportunistic integration. In many countries, WASHplus planned the integrated activities, joining different sectors to facilitate change.

- In Kenya, the entry point was integrating WASH into HIV care and support activities with the President's Emergency Plan for AIDS Relief (PEPFAR) funding. WASHplus developed integrated materials with government actors and trained community health and home-based care workers in WASH activities that are crucial to HIV-affected households.
- In Mali, WASHplus developed a comprehensive WASH-nutrition program that served 180 communities in three districts.
- In Burkina Faso, the project is implementing a pilot with NTD funding from USAID to develop a model for integration that can be shared across the country and among other actors interested in WASH-NTD integration.

ACHIEVING OBJECTIVES IN MULTIPLE SECTORS

- Mali: a joint WASH and nutrition program led to a decrease in referrals for moderate and severe malnutrition, an 81 percent increase in open defecation free communities, and a 2.8 percent reported diarrhea decline in intervention vs. control areas.
- Zambia: increasing access to latrines, water, and hygiene in Eastern Province schools led to lower student absenteeism and greater teacher retention and increased the community's access to WASH through spillover effects of the school WASH program.
- Kenya: WASHplus integrated WASH into HIV programming and equity and inclusion into the national community-led total sanitation programs. This resulted in improved policies at the national level and improved access to sanitation for underserved and vulnerable populations.

Job aids and training resources focusing on integrating WASH into nutrition and HIV programming were developed and tested in Uganda and used in many training sessions to strengthen key competencies of other USAID implementing partners and key stakeholders.



In other countries, integration was not jointly planned from the start. Rather, as time and opportunity allowed, WASHplus incorporated WASH elements into ongoing programs. In Uganda, WASHplus introduced WASH components into existing nutrition and food security programs. While many integration successes happened in Uganda, they were difficult to measure because the established monitoring systems could not be changed to include the new WASH components.

Integration Challenges

Funding Streams

Financing integration presents challenges as most funding is siloed within a specific sector. WASHplus's health/child survival funding allowed the project to explore integrated approaches with the nutrition and maternal and child health sectors. WASHplus also received specific funding to integrate WASH into NTD and HIV programming. However, when funding is specific to certain outcomes and indicators, it can present challenges. Zambia's SPLASH project, for example, was challenged to respond to and report on both education and WASH indicators and be accountable for meaningful results in both sectors. Different government sectors or implementing partners have different budgeting cycles, and responding to funders' priorities can make planning and implementing joint activities almost impossible. Interpreting integration flexibly allowed WASHplus to operate along the continuum as illustrated above—from joint planning and implementation in Kenya, Mali, and Zambia to being more opportunistic in Bangladesh and Uganda.

FUNDING CHALLENGES

WASHplus developed an integrated WASH-nutrition activity in Mali that was funded for two years. The project was extended for an additional 6 months with an infusion of funding. When submitting the new work plan, WASHplus was asked to remove the nutrition elements because the funding was "water" money. However, WASHplus was able to retain the vital nutrition activities that were part of this deliberately integrated activity by using funds remaining from the previous year.

One-Way vs Two-Way Integration

While a two-way integration approach seems most collaborative and reasonable—for example integrating WASH into nutrition programming and integrating nutrition into WASH programming—WASHplus's experience played out as one-way integration of WASH into another sector (e.g., WASH into nutrition programming). Traditionally, WASH activities in countries have focused on improving infrastructure, with engineers focused on constructing and measuring numbers of water points or latrines or numbers of people served. These sectoral actors are often not conversant in health, nutrition, or HIV issues. WASHplus found it most feasible to engage in one-way integration, particularly because WASH activities were required to achieve the other sector's outcomes.

Collaboration

Collaboration can be complex. Effective collaboration for integration means understanding the motivating factors and models for success of the target sector and what indicators need to be measured. Integration is facilitated when professionals from different sectors sit together in the same office and participate in joint planning exercises, as happened in Zambia. It is helpful when funders or program managers provide incentives to integrate. This can be a mandate, as in Kenya where WASHplus and other USAID partners were asked to coordinate, or it can be more subtle as in Uganda where implementing partners came together to solve a problem.

Communicating Effectively Across Sectors

Communication among actors from different sectors can be complicated. The language, vocabulary, and meanings differ widely; messaging can be complicated and more difficult to explain in a concise way. Therefore, understanding the different frames of reference is critical as is learning how to discuss the issues. WASHplus has tried to understand the paradigms of these other sectors—nutrition, education, NTDs, HIV—and then communicate using their language and frameworks. Establishing the WASH-NTD pilot activity in Burkina Faso, WASHplus spent significant time explaining the project and developing relationships with local government partners from three ministries: health; education; and agriculture, hydraulics, water, sanitation, and food security (see quote at right).

Measurement

When an integrated program is designed at the outset with indicators for multiple sectors equally emphasized, outcomes can be clearly targeted and measured. Not having common indicators is a challenge. While each sector has its own indicators, without key indicators that measure integration it is difficult to make the case that integrating is better than not integrating. Currently, no set of indicators exists that can measure whether integration is being implemented well. Finally, additional research is needed to determine whether integrated activities work better than sector-specific activities. This integration is important. Thirty years ago we did things together, but now we do not. Life in the village is integrated, so we must be integrated in supporting them.

—Provincial Director of Agriculture, Hydraulics, Water Sanitation and Food Security, Burkina Faso





Contributing to the Evidence Base that Supports Integrated Programming

WASHplus has found that when the WASH sector is committed to integration, it can explain the benefits to target sectors by showcasing examples and citing evidence about how a WASH component can enhance the partner sector's impact. WASH might be the key to girls staying in school and teachers staffing more remote schools, and it could be a critical factor to successfully lowering undernutrition in small children.

Since WASHplus started, the landscape for integrating WASH has changed dramatically. The WASHplus endline study has shown in Zambia that proper WASH facilities—well-constructed latrines, handwashing stations, and girl-friendly washrooms—attract students

and teachers to school and keep them there. Data from the endline study in Mali show the joint WASH-nutrition program has resulted in a statistically significant positive change in WASH and nutrition practices as compared to the baseline.

WASHplus uses its country experience in WASH integration to support global efforts—helping to build the evidence for integration as well as offer tools and experiences to support scaling up integrated efforts within countries or expansion to new countries. Activities have included developing a global how-to document on WASH and nutrition with the World Health Organization, UNICEF, and USAID; case studies and presentations on WASH and nutrition and WASH in Schools at global conferences; and learning briefs and slide decks to share experiences and learning with the global community.

Further, momentum is building externally, beyond existing pockets of funding, and is spilling over into the larger development landscape. When funders are called by the international community to contribute (e.g., to WASH, menstrual hygiene management), that mandate is transferred to projects or request for proposals. This in turn raises the profile of integration and provides opportunities to test and document best practices. This cycle is iterative and helps fuel the momentum and build the evidence.

Interdisciplinary groups need to develop indicators that can measure the impact and cost effectiveness of integration. Research is needed to test whether integrated efforts do yield greater or more sustainable results than single initiatives. As the world evolves and accepts the growing interconnectedness of people's lives, development programing will necessarily have to address the whole system and become more horizontal and inclusive.

In Kenya, more than 8,000 community health workers in charge of at least 400 community units were trained on WASH-HIV integration and inclusive sanitation. It is estimated that over 1.6 million Kenyans were reached with inclusive sanitation messages, which led to more accessible latrines for the elderly and infirm.

The following slide decks and training materials serve as a companion to this learning brief and can be found on the WASHplus website, www.washplus.org. The slide decks outline what integrated programming looked like in the different WASHplus countries and how WASHplus integrated WASH into different sectors.

- Why WASH Matters for....
 - Education •
 - HIV •
 - NTDs
 - Nutrition •
- Integrated programming in different countries
 - WASH and Nutrition Bangladesh •
 - WASH and Nutrition Mali •
 - WASH, HIV, and Nutrition Uganda
 - WASH, HIV, and Inclusive Sanitation Kenya •
 - WASH and NTDs Burkina Faso •
 - WASH in Education Zambia



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Small Doable Actions For Keeping Food Safe: Food Handling & Preparation ers with soap and flowing w

What is WASHplus?

The WASHplus project supports healthy households and communities by creating and delivering interventions that lead to improvements in water, sanitation, and hygiene (WASH) and household air pollution (HAP). This multi-year project (2010-2016), funded through USAID's Bureau for Global Health and led by FHI 360 in partnership with CARE and Winrock International, uses at-scale programming approaches to reduce diarrheal diseases and acute respiratory infections, the two top killers of children under age 5 globally.

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