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An evaluation of user-centred community engagement in emergency sanitation



OXFAM

Executive Summary

In 2017, the Humanitarian Innovation Fund (HIF) launched a challenge to pilot rapid community engagement for user-centred sanitation. All the projects were characterized by a commitment to take users' ideas and feedback on board and act upon them. Within the limits of each project's scope, all partners followed through on their engagement with users and implemented solutions to the communities' main problems. Satisfaction and perceptions of safety broadly improved across all projects.

Between December 2017 and October 2018, four pilot projects were implemented in early-onset or protracted emergency contexts in Bangladesh and Iraq (Save the Children, with design partner *Eclipse*); Uganda (Welthungerhilfe, with design consultancy *Snook*); and Lebanon (Qatar Red Crescent Society). All partners aimed, to some degree, to incorporate User-Centred Design, which places the (sanitation) user at the centre of the design process. Oxfam was the Research and Evaluation partner; it developed a community engagement evaluation methodology and evaluated the four partner projects to understand the extent to which communities participated, how the partners altered their designs in response to user engagement, and the

effect of the participation on sanitation use, maintenance and satisfaction. This report is based on the findings from the four project evaluations and the partners' monitoring data.

Overall, community feedback during the evaluations indicated that in all four projects people felt adequately consulted about their needs and concerns. This appeared to be irrespective of the approach used by the different agencies. All partners used formal surveys to identify community concerns, followed by discussion sessions. In three of the projects, staff and community members jointly prioritized the survey problems and agreed solutions ('co-creation'); these became the principal designs for implementation. **Each project**

invested considerable effort in consulting their communities. This suggests that even in short projects, time can be made to consult in a meaningful way.

The evaluations found it difficult to assess the impact of different consultation types and frequency as other factors affected the results, such as high levels of informal face-to-face contact and hygiene promotion. Nonetheless, **three of the four projects largely determined needs and implemented the latrine design directly using the results from the initial survey data** (with minor adaptations based on subsequent feedback). This indicates that, with well-designed surveys and adequate, representative sampling, **agencies can find out a good deal about people's views in a relatively short space of time.**

While some formal complaints systems were established, feedback was mostly face-to-face. Although the consequence of this was a loss of anonymity, it was not evident that people felt unable to provide feedback.

Dissatisfaction arose primarily because of limited project scope and a failure to act on feedback.

Managing community expectations was a challenge for all projects. Negotiation skills were essential – restricted budgets and contexts limited the options, and disappointment was easily generated. The partners often struggled to decide on the boundaries for negotiation – some of the community members were not given enough opportunities to provide feedback and influence latrine design, while others (often people with special needs) were given multiple opportunities. Designs had to balance the users' ideal solutions with technical, financial and contextual constraints.

Projects which communicated the project's scope early and effectively and used more tightly focused survey questions seemed to better manage expectations.

Overall, strong consultation plus successful negotiated prioritization and strong follow-through to implementation of community solutions appeared to lead to more appropriate latrines. Satisfaction increased significantly in three of the four projects. It was linked to the projects' responsiveness to community feedback as well as the quality and tangible value of the project deliverables. Lighting and locks in particular led to improved perceptions of safety.

There was insufficient evidence to link user-engagement in design with levels of community ownership. However, cleanliness – lack of which was raised during initial surveys as a key problem in three of the four projects – clearly improved. **For short-term projects, this was a major achievement.** Attitudes to cleanliness may also have been influenced by hygiene promotion and whether users had communal or individual household latrines (users are more likely to clean and maintain their own latrines). Further monitoring is needed to test the causal links between

user-informed, more appropriate latrines and the expected increase in latrine use and ownership.

All three of the HIF project agency leads said that organizational issues were as critical to success as the methods they used. HIF's predictable, flexible budget facilitated an iterative approach. Staff buy-in was mostly high – and essential particularly among managers and technical leads as well as support personnel. **The staff of all four teams liked and valued the user-centred approaches, and all plan to use them in future projects.** It seems that with a focused commitment to engaging users, several common organizational barriers could be surmounted: all projects ensured that time was available, maximized their resources to enable engagement, established relationships with communities through the process and, where they could, implemented users' design suggestions.

Promising practices from the projects which merit further testing include using a simple, structured framework for engaging users (a launch, survey, design, construction and iteration sequence), interactive digital surveys, and adaptable project plans, budgets and procurement systems. Save the Children–Eclipse's touch-interactive digital survey tool stands out as a promising innovation because it was engaging, accessible for all ages and levels of literacy, and quick to use. Co-creation also has potential as an approach to engaging communities in a negotiated prioritization of design solutions; whether it can be adapted to use at scale needs testing.

The main potential for greater community engagement may be when projects shift from provision of emergency communal latrines to improved, shared or household latrines. **First-phase latrines could act as rapid prototypes around which communities can provide feedback, promoting subsequent iterations as the emergency stabilizes.** It is striking that the concerns and needs raised by communities in the four pilot projects were very similar – they include design features to enable privacy (e.g. locks), safety (lighting, child-friendly), cleanliness, smell, and adaptations for people with special needs (e.g. handrails, steps). **This implies that such design fundamentals of safety, privacy and dignity will always be community priorities** and could be built into sanitation design much earlier in an emergency. Iteration and an ongoing cycle of community engagement would complement best practice sanitation tools, such as Sani Tweaks, promoting better design and further testing of the hypothesis that more appropriate latrines will increase use and ownership and therefore lead to improved health outcomes.

Front cover photo: QRCS staff and a community member discussing drainage problems during the ethnographic survey. Photo: Qatar Red Crescent Society 2018