# **INTERNATIONAL YEAR OF SANITATION ACTION PLAN FOR NIGERIA**







#### FOREWORD

The Millennium Development Goal (MDG) target for sanitation is to halve, by 2015, the proportion of the world's population without sustainable access to basic sanitation. In Nigeria, this means 70 percent of the population should have access by 2015. Current estimates show that to reach this target 72 million Nigerians must gain access to sanitation facilities over this period.

But at current rates of progress this target will not be met.

Nigeria is not alone. Many countries in Africa and around the world are also not on track to meet the sanitation target. Urgent measures are needed to highlight the importance of the issue and to stimulate action.

The International Year of Sanitation (IYS) was set by the United Nations General Assembly to spotlight the sanitation crisis and to kick-start efforts to accelerate progress. This campaign centers on five key messages targeted at political leaders and policy makers: sanitation is vital for human health; sanitation generates economic benefits; sanitation contributes to dignity and social development; sanitation helps the environment; and improving sanitation is achievable.

The International Year of Sanitation Action Plan for Nigeria addresses this last point. Developed in September and October of this year with the involvement of a large group of stakeholders, the plan defines the scale of the challenge and outlines the actions necessary to meet it – at community, LGA, state and national levels.

The plan sets three targets for 2008 for Nigeria: one, develop enabling environments to sustainably expand sanitation and hygiene programmes; two, build one million latrines; and three, conduct hand-washing campaigns at federal level, in all states and in all LGAs to reach 30 million people. These targets reflect the IYS focus on excreta disposal and hygiene promotion as the two key interventions for maximum benefit. The targets also reflect the need to stress the development of the policies, institutions and other enabling environments to ensure progress in the years to come. And finally, the targets reflect the scale of the challenge: one million latrines need to be constructed *every year* from now until 2015 to meet the MDG target.

Working together, communities, governments, civil society, support agencies and the private sector can achieve these targets for Nigeria.

Dr. Sayyad Abba Ruma Minister Federal Ministry of Agriculture and Water Resources Mr. Ayalew Abai Representative United Nations Children's Fund

## International Year of Sanitation, 2008 Action Plan For Nigeria

Federal Ministry of Agriculture and Water Resources (Department of Water Supply and Quality Control)

With inputs from: Federal Ministry of Environment, Housing and Urban Development Federal Ministry of Health Federal Ministry of Education UNICEF WaterAid

Rural Water Supply and Sanitation Agencies and other state agencies Other members of the National Task Group on Sanitation

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## 1 TARGETS FOR 2008

Target One:	Develop enabling environments to sustainably expand sanitation and hygiene programmes
Target Two:	Build one million latrines
Target Three:	Conduct hand-washing campaigns at federal level, in all states and in all LGAs to reach 30 million people

#### **2** INTRODUCTION

#### 2.1 THE INTERNATIONAL YEAR OF SANITATION

Recognising the impact of sanitation on health, poverty reduction and economic and social development the United Nations General Assembly has declared 2008 as the International Year of Sanitation (IYS) to help accelerate progress on sanitation. Five key IYS messages define the scope of the problem, the benefits of improved sanitation and the need for action.

*Sanitation is vital for human health.* Poor sanitation and hygiene causes death and disease. Every year, 1.5 million children around the world die from poor sanitation.

*Sanitation generates economic benefits.* Improved sanitation has positive impacts on economic growth and poverty reduction.

*Sanitation contributes to dignity and social development.* Sanitation enhances dignity, privacy and safety, especially for women and girls.

*Sanitation helps the environment.* Improved disposal of human waste protects the quality of drinking water sources and improves community environments.

*Improving sanitation is achievable.* Working together, households, communities, governments, support agencies, civil society and the private sector have the resources, technologies and know-how to achieve the sanitation target.

The IYS campaign is a joint effort involving UN agencies, governments, external support agencies, civil society, communities and households. Within the UN system, the UN Department of Economic and Social Affairs (DESA) is the coordinating agency.

A key part of the IYS effort is the development and implementation of national plans of action for accelerating progress for sanitation.

#### Doing Nothing is No Longer an Option<sup>\*</sup>

The excreta of 2.6 billion people is uncollected/untreated and represents a global health crisis. More than 200 million tonnes of human waste (and untold millions of tonnes of waste water and solid waste) goes uncollected and untreated annually around the world – in parts of both developing and developed countries – exposing millions of people to disease and death and continuing a cycle of poverty. More than 2.6 billion people, including 980 million children, live without proper sanitation; every 20 seconds on average a child dies as a direct result. That's 1.5 million preventable child deaths a year;

Proper sanitation and hygiene is a necessary and worthwhile investment for governments at every level in every country. For every dollar spent improving sanitation and hygiene, between \$3 and \$34 is saved in health, education and social and economic development. In addition to countless school days lost to sanitation-related illness, the lack of adequate, separate sanitation facilities denies many girls an education and future economic potential;

Achieving adequate sanitation worldwide is doable. Governments and corporations need to support household and community decision-making processes and help finance the infrastructure and programmes required. The estimated annual cost of reaching the water and sanitation MDG target is \$11.3 billion, less than annual North American spending on household pets;

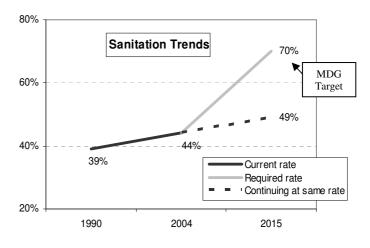
Take the next step. The general public needs to make their support for improved sanitation known to governments at all levels;

Doing nothing is no longer an option.

\* from Join the Movement, the UN brochure on IYS ( http://esa.un.org/iys/ )

#### 2.2 THE STATUS OF SANITATION IN NIGERIA

Nigeria is not on track to meet the MDG target for sanitation of 70 percent access by 2015. United Nations sources estimate that in the last fifteen years rural sanitation access rates have risen just 3%, from 33% in 1990 to 36% in 2004, while urban sanitation access has gone from 51% to 53%.<sup>1</sup> (Note that the Federal Ministry of Agriculture and Water Resources is finalising a new baseline survey that will help to determine current access levels.)



<sup>&</sup>lt;sup>1</sup> WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP). 2006. *Meeting the MDG drinking water and sanitation target : the urban and rural challenge of the decade.* (2004 data set).

While these access and progress rates are comparable to sub-Saharan Africa averages, Nigeria's large population means that more people are living without sanitation (72 million in 2004)<sup>2</sup> than in any other country in Africa. And at these progress rates, the MDG target for sanitation will not be met. If Nigeria does not meet the target, neither will Africa as a whole.

But more important than targets is the impact of the lack of improved sanitation on Nigerian communities. Poor sanitation causes diarrhoea, and the Nigeria diarrhoea prevalence rate, at 18.8%, is very high.<sup>3</sup> This leads to high child mortality rates due to direct deaths from diarrhoea (diarrhoea is the second largest killer of children in the country, behind malaria) and to other diseases linked to high diarrhoea prevalence including acute respiratory infection, cholera, polio and others. Poor sanitation is also a major contributing factor to low education enrolment and achievement rates, to malnutrition, to lagging economic and social development, and to poverty as a whole.

See the Sanitation Fact Sheet for more information on sanitation in Nigeria.

#### 2.3 THE INTERNATIONAL YEAR OF SANITATION (IYS) TARGETS FOR NIGERIA

While there is more to sanitation than latrine construction and hand-washing, the global IYS programme focuses specifically on these interventions due to their vital importance for health and development, and as a way to concentrate collective efforts for maximum impact.

The latrine target is not new. It has already been set by Nigeria through the Millennium Development Goals (MDG) process. The figure of one million is calculated using existing sanitation coverage rates and MDG Target 10: "halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation" (see more on these calculation in Section 3, below).

Similarly, the goal of promoting hand-washing with soap is also not new. The Federal Ministry of Agriculture and Water Resources and its partners have been promoting hand-washing through a variety of interventions including state hand-washing campaigns (over 20 such campaigns were carried out in 2006 and 2007).

In Nigeria, the need to develop enabling environments for sustained progress is of

critical importance, and has thus been included as the first of the three targets. Together, the interconnected targets represent the three core pillars of a standard water and sanitation sector conceptual framework<sup>4</sup>



<sup>&</sup>lt;sup>2</sup> WHO/UNICEF JMP, as above

<sup>&</sup>lt;sup>3</sup> National Planning Commission and ORC Macro. 2003. *Nigeria Demographic and Health Survey* (*DHS*).

<sup>&</sup>lt;sup>4</sup> Developed originally as the Hygiene Improvement Framework by USAID Environmental Health Programme, currently used by other sectoral agencies including UNICEF in various forms.

#### **3** RATIONALE, ASSUMPTIONS AND STRATEGIES

#### **3.1 DEVELOP ENABLING ENVIRONMENTS (TARGET 1)**

Given the scale of the sanitation gap and Nigeria's growing population, it is imperative that conditions are put into place to ensure sanitation programmes continue to grow. The IYS campaign is a way to "kick start" this process, but ultimately the sanitation target can only be achieved through well-designed and implemented programmes based on a solid institutional and financial base.

Developing enabling environments is at the core of the current sectoral programme and is guided by existing and upcoming policy, strategy and guidance instruments (see box). Specific activities to strengthen enabling environments for sanitation and hygiene promotion are highlighted in the plan of action points in Section 5 and 6. The key areas of intervention include:

- policies and strategies that promote sustainable acceleration of progress (e.g. the new rural sanitation and hygiene scaling up strategy)
- institutions that provide resources and skills (e.g. LGA WASH Units)

# Selected Policy, Strategy and Guidance Documents

- National Water Supply and Sanitation Policy, 2000
- National Water-Sanitation Policy, 2004
- National Environmental Sanitation Policy, 2005
- Rural Water and Sanitation Strategic Framework, 2004
- National Water and Sanitation Policy (new), draft
- Strategy for Scaling-Up Rural Sanitation and Hygiene, draft
- National Sanitation Guidelines, draft
- increased levels of investment for sanitation and hygiene
- the decentralisation of financial resources and management in accordance with existing policies and with NEEDS
- greater coordination of programming amongst Government and support agencies
- greater participation from the private sector and civil society
- increased accountability, transparency, responsiveness and equity in resource allocation
- availability of reliable data for planning, implementation and monitoring
- communication and awareness building

#### **3.2** BUILD ONE MILLION LATRINES (TARGET 2)

#### Target Calculations and Assumptions

One million latrines per year starting in 2008 has been calculated as the requirement for Nigeria based on the MDG target of 70% for sanitation by 2015.

Using the MDG monitoring figures from the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP),<sup>5</sup> about 800,000 household latrines/toilets must be constructed every year from 2008 to 2015 to meet the Nigeria MDG sanitation target of 70% coverage by 2015, based on the national standard of ten people per latrine.

<sup>&</sup>lt;sup>5</sup> The WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation data are the official figures for monitoring sectoral progress globally.

	Population	Number of People
		with Access
1990 (JMP) (44% coverage)	91 million	35 million
2004 (JMP)	129 million	57 million
2007 (estimate)	~145 million	~61 million
2015 (MDG target of 70% coverage)	176 million	123 million
# of people that need to gain access from	om 2008 to 2015	62 million
# of people per year (over 8 years)		7.75 million
# of latrines per year (@ 10 people per	775,000	
Sources: JMP and UN Population Divis	ion	
Calculations and Estimates: See Annex	(1	

In reality, more household latrines will need to be constructed because of the inevitable breakdowns/abandonment of some latrines in the 2008-2015 period.

In addition to these household latrines, additional latrines and toilets must be constructed in institutions (schools and health centres) and in public places (markets, autoparks, etc.). Current estimates indicate that over half a million latrine/toilet compartments are required in primary schools alone, and more will be required for health centres and in public places.

Thus, the overall target has been set at one million, to take into account all requirements factors.

But even when the MDG target of 70% is met in 2015, it will still leave over 50 million people without access to sanitation – about the same amount as in 1990. This is a good reason to go beyond the bare minimum necessary to meet the MDG target.

	Population	Number of People with Access	Number of People without Access
1990 (JMP)	91 million	35 million	56 million
2015 (MDG target of 70%)	176 million	123 million	53 million

#### **Rationale and Strategies**

In conformance with national policy, constructing and paying for household latrines is the responsibility of households themselves. Neither government nor external support agencies will pay for household latrines.

However, households need assistance to do this. The role of government and its partners is to provide the necessary "software" support to empower communities and households to recognize the problem of open defecation and construct their own sanitation facilities. It also involves ensuring that the resulting demand for latrines can be met by training and equipping local artisans and entrepreneurs to help people build their own latrines, and by making appropriate building material available. It includes funding and implementing a wide-range of activities to build enabling environments, as discussed above.

Institutional and public sanitation facilities, on the other hand, will be partially or fully subsidised by governments and, in some cases, external support agencies.

#### **Technologies**

The MDG goal is for "basic sanitation", which usually means a simple low-cost pit latrine that is safe to use. In Nigeria, the national policy specifies an improved traditional pit latrine as the minimum standard. In many cases such latrines can be built mainly from local materials by households and communities with the support of community WASCOMs (Water and Sanitation Committees), sani-centres and entrepreneurs. Upgraded technologies (such as a VIP latrine, or a flush toilet), when households want and can afford it.

Institutional and public sanitation facilities constructed will be toilets or latrines that meet national standards as specified by the relevant ministries and policy instruments (Federal Ministries of Agriculture and Water Resources, Federal Ministry of Environment, Housing and Urban Development, Federal Ministry of Health and Federal Ministry of Education).

#### Target Areas

To achieve significant, sustainable health benefits in communities, every household should use a latrine, not just some households. The goal is to eliminate the practice of open defecation in the entire community. Therefore, it is better to concentrate latrine promotion efforts: instead of constructing a small number of latrines throughout LGAs, it is better to focus efforts on fewer communities to achieve 100% coverage and 'open defecation-free status'. By the same rationale, it will be better to also concentrate resources initially in selected LGAs.

#### 3.3 HAND-WASHING CAMPAIGNS (TARGET 3)

#### The Importance of Hand-washing with Soap

Access to improved sanitation facilities does not, on its own, necessarily lead to improved health. There is now an abundance of evidence showing the critical importance of hygienic behaviour for reducing sanitation-related sickness and death. Hand-washing with soap after defecating and before eating or preparing food is particularly important. It has been shown to significantly reduce the incidence of diarrhoea, which is the second leading cause of death amongst Nigerian children (after malaria), as well as other diseases. The promotion of hand-washing is also a key strategy for controlling the spread of Avian Influenza.

Because of the importance of hand-washing with soap, its promotion is a focus of the hygiene component of the global and Nigerian IYS programmes.

#### Strategy: Hand-washing Campaigns

Campaigns are a way of reaching many people with messages about the importance of hand-washing. They often involve high profile decision makers (including Governors and First Ladies), and other celebrities. Because of this, hand-washing campaigns are a key part of the overall hygiene promotion efforts.

Other ways to influence behavioural change and promote hand-washing include, for example, hygiene lessons for children in schools and the encouragement of children to

demonstrate good hygiene to their families and communities. These efforts will continue in addition to hand-washing campaigns.

## 4 ESTIMATED COSTS

Responsibility for financing the Nigeria International Year of Sanitation targets will be shared amongst government bodies, support agencies and households. Government and support agencies will fully fund the enabling environments and hand-washing campaign targets' costs. In addition, government and support agencies will fund the costs of institutional and public sanitation facilities as well as the software costs associated with household latrines. Households will be responsible for the labour and costs for household latrine and toilet construction.

The total cost for meeting the three IYS targets is estimated to be \$141 million (17.6 billion Naira). Governments and support agencies will be responsible for just under three quarters of this amount (\$103 million) with the balance coming from households. See tables below for cost estimates and Annex 3 for detailed calculations.

These estimated costs are not insignificant. However, they represent only one dollar per capita over the entire year. The estimates are also significantly lower than Nigeria's share of the global estimate of \$10 billion per year to meet the MDG target for sanitation<sup>6</sup>.

Target Cost Estimates			Financing
	Naira <sup>7</sup>	US\$	Responsibility
Target 1: Enabling environments	2.3 billion	18.5 million	Government, support agencies <sup>8</sup>
Target 2: A million latrines (total) <sup>9</sup> (see also sanitation costs breakdown, below)	14.9 billion	119.5 million	Government, support agencies and households
- Household latrine hardware costs	4.8 billion	38.4 million	Households
- All other costs (institutional and public sanitation facilities plus household latrine software costs)	10.1 billion	81.1 million	Government, support agencies
Target 3: Hand-washing campaigns	0.38 billion	3.1 million	Government, support agencies
Grand Total	17.6 billion	141.1 million	
Total for Households	4.8 billion	38.4 million	
Total for Government and Support agencies	12.8 billion	102.7 million	

<sup>&</sup>lt;sup>6</sup> IYS web site. http://esa.un.org/iys/

<sup>&</sup>lt;sup>7</sup> Exchange rate of 1:125 used in these calculations

<sup>&</sup>lt;sup>8</sup> Including external support agencies as well as other non-government sources of funding including civil society organisations and the private sector

<sup>&</sup>lt;sup>9</sup> Includes cost estimates for one million household latrines plus institutional and public latrines (see Annex 3 for details)

Sanitation Facilities Cost Breakdown	Estimated Cost		
	Naira	US\$	
Household sanitation facilities	9.6 billion	76.8 million	
Institutional sanitation facilities (total)	3.5 billion	27.7 million	
- in primary schools	3.1 billion	24.5 million	
- in health centres	0.39 billion	3.2 million	
Public sanitation facilities	1.9 billion	15.1 million	

Key Activities and Responsibilities		mment Age	encies	Commun	CSOs	External
	Federal	State	LGA	ities	and the Private Sector	Support Agencies
Develop collaboration and partnership mechanisms amongst key stakeholders						
Prioritise sanitation and hygiene within development plans						
Ensure all sectoral programmes include significant components for sanitation and hygiene						
Increase funding levels for sanitation and hygiene programmes from existing budgets						
Raise new funds for sanitation and hygiene						
Finalise and widely disseminate harmonised policy and strategies						
Enforce national standards for sanitation and hygiene facilities in schools and health						
Continue to support the creation of environmental health clubs in primary schools						
Conduct targeted research for improved technologies and methodologies						
Develop and disseminate guidance material for implementing agencies						
Hold training sessions on new sanitation methodologies for state and LGA facilitators						
Provide continuous support to implementing agencies, especially LGA WASH Units						
Form community water, sanitation and hygiene committees (WASHCOMs)						
Promote the formation of sani-centres in communities						
Increase the number of women in LGA WASH Units and WASHCOMs						
Create demand for 'open defecation-free' communities and household latrines						
Construct new and improved household latrines						
Construct sanitation and hand-washing facilities in schools, health centres & public spaces						
Refine and develop media tools for hand-washing promotion						

Key Activities and Responsibilities		Government Agencies			CSOs	External
	Federal	State	LGA	ities	and the Private Sector	Support Agencies
Recruit political leaders and other prominent persons for hand-washing promotion						
Conduct high-profile hand-washing campaigns						
Continue to promote hand-washing through community hygiene promoters and schools						
Coordinate activities through the National Task Group for Sanitation, and state task groups						
Monitor and document progress, and hold frequent consultations to disseminate results						

#### DETAILED PLAN OF ACTION<sup>10</sup> 6

## 1. Federal Level

	Action by:	Supported by:
Advocacy and Funding		
Advocate for the prioritisation of sanitation in the national development agenda (e.g. ensuring sanitation is featured in NEEDS2) by stressing the scale and seriousness of the problem (including the declaration of a "sanitation emergency"), developing advocacy material and engaging decision makers.	NTGS <sup>11</sup>	NPC, Line Ministries, ESAs and other NTGS members
Carry out coordinated advocacy for sanitation in the National Assembly (e.g. on World Water Day and World Toilet Day)	Parliam. Sub- Committees on Water Res. and on the Environment	NTGS, UNICEF, WaterAid and NTGS members
Advocate for the allocation of additional funds for sanitation from existing government sources (e.g. MDG Fund)	NTGS	ESAs and other NTGS members
Raise new funds for sanitation from the donor community, and from the private sector (e.g. Unilever)	NTGS	ESAs, NGOs
Advocate for a greater emphasis on sanitation within existing donor-supported projects (including projects outside of the sector, e.g. education, health and community development projects)	NTGS	ESAs, NGOs

#### Policy and Strategy Development

Finalise and disseminate National Strategy for Scaling-up Rural Sanitation and Hygiene	NTGS	UNICEF, DFID and other NTGS members
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<sup>&</sup>lt;sup>10</sup> This plan of action was developed with inputs from participants in the National Consultation on Planning for the International Year of Sanitation in Nigeria, Oct. 23, 2007. <sup>11</sup> The National Task Group on Sanitation (NTSG) is an instrument for coordination. It is not an implementation agency and does not have an implementation budget. In this table, it should be understood that NTSG is acting as a coordinator, not implementer.

	Action by:	Supported by:
Finalise and disseminate national WASH communication strategy to all stakeholders at federal and state levels	NTGS	WSSCC, WaterAid and other NTGS members
Ensure that sanitation and hygiene are prominent components in the new National Water and Sanitation Policy	FMWR	NTGS
Continue the process of mainstreaming hygiene promotion and life skills education within the primary school education curriculum and teacher training courses	FME	FMH, NTGS

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Finalise and disseminate the Implementation Guidelines for Sanitation	NTGS	UNICEF and other NTGS members
Conduct a national CLTS sensitisation workshop, and the zonal CLTS orientation workshops	NTGS	WaterAid and other NTGS members
Provide training on alternative sanitation methodologies	NTGS	ESAs and other NLTGS members
Ensure the existence/availability of a core group of sanitation technology and methodology resource people for states through promotion of training of trainer programmes	NTGS	ESAs and other NLTGS members
Dissemination of alternative models/examples for sanitation programming to States (see research, below)	NTGS	FMAWR
Dissemination of minimum standards on sanitation and hygiene facilities for schools and for health facilities	FME, FMH, FMAWR	NTGS
Develop and disseminate standards and best practices for the construction of toilets, latrines and handwashing facilities in markets, autoparks and other public spaces	FMEHUD, FMH, FMAWR	NTGS

	Action by:	Supported by:
Research and Piloting		
Sponsor and disseminate research on the economic and social cost and benefits of sanitation (including the calculation of a cost/benefit ratio for sanitation in Nigeria)	NTGS	NPC, WaterAid, UNICEF
Sponsor and disseminate research/piloting on CLTS derivates/alternatives, especially for urban and large rural communities	NTGS	NPC, WaterAid, UNICEF
Conduct evaluations of ongoing CLTS alternatives (e.g. of the UNICEF-supported 'promo period' model)	NTGS	UNICEF, other NTGS members, NPC
Sponsor and disseminate research/piloting on improved technology for riverine areas	NTGS	UNICEF, NPC
Pilot and disseminate research on the use of micro-credit to support the construction of household and communal toilets and latrines	NTGS	NPC

#### Latrine Construction

Promote accelerated latrine construction nation-wide through the development of enabling environments as described above	NTGS	
Facilitate the construction of institutional toilets and latrines (in schools and health centres) as per national standards	FME, FMH	NTGS
Promote and facilitate the construction of public toilets and latrines in markets, autoparks and other public spaces (including with the involvement of private sector entrepreneurs through PPP arrangements)	FMEHUD, FMH, FMAWR	NTGS

#### Hand-Washing Promotion

Develop and disseminate hand-washing promotional material (for print and electronic media) appropriate for use at the national level (and adapt into the three main Nigerian languages) based on existing material available nationally and/or internationally	NTGS	NOA and other NTSG members
Explore partnerships with the private sector (especially soap companies) and with the film industry for hand- washing promotion	NTGS	

	Action by:	Supported by:
Launch national and zonal WASH Campaigns (as per existing draft WASH Campaign plan)	NTGS	WSSCC, WaterAid, UNICEF and other NTGS members
Within WASH campaign, hold public hand-washing media event with participation of First Lady and/or President, parliamentarians and/or other prominent persons.	Parliam. Sub- Committees on Water Res. and on the Environment, Office of the Presidency	NTGS, NOA
Construct hand-washing and water supply facilities in schools and health centres through federally-funded programmes.	FMEHUD, FMH, FMAWR	NTGS

#### Monitoring

Continue to work towards harmonised/coordinated sectoral monitoring processes and standards for sanitation (e.g. ongoing FMA&WR National WatSan Baseline Survey, UNICEF MICS, JMP platform, DHS 2008)	NTGS	WHO/UNICEF JMP Platform, FMAWR, NPC, MDG Office
Sponsor study to measure national reach of the hand-washing campaign	NTGS	UNICEF
Monitor and document progress, and hold frequent consultations to disseminate results	NTGS	

## 2. State Level

	Action by:	Supported by:
Coordination, Advocacy and Fund Raising		
Form a State Task Group (or Steering Committee) for Sanitation (STGS) including key agencies and stakeholders involved in sanitation at state level	State Planning Commission	NTGS, State Line Ministries, RUWASSA, State Water Agencies (SWSAs) <sup>12</sup>
Advocate for increased profile and funding for sanitation in State development programmes, including SEEDS2	STGS, NTGS, RUWASSA	State Ministry of Water Resources, ESAs, NGOs
Advocate for sanitation and hygiene in the State Assembly	STGS, RUWASSA	State Planning Commission, NTGS
Advocacy and action for a State Law for the establishment of LGA WASH Departments	STGS, State Planning Commission	RUWASSA, SWSAs
Ensure donor-funded State development projects from all relevant sectors include adequate provision and funding for sanitation (e.g. the DFID Lead States Programme, the World Bank Community-Based Urban Development Programme)	Planning Commission, STGS, ESAs	NTGS
Ensure donor-funded State Water and Sanitation projects (e.g. JICA and AfDB projects) include significant sanitation components	Planning Commission, STGS, ESAs	NTGS
Develop a state investment plan for sanitation and hygiene promotion as a tool for fund-raising and the monitoring of target achievement	Planning Commission, STGS, RUWASSA, SWSAs	Line ministries

<sup>&</sup>lt;sup>12</sup> In addition to RUWASSAs, which have responsibility for rural water and sanitation, states have a variety of agencies within several possible state ministries (e.g. Ministry of Water Resources, Ministry of Environment) that have responsibility for urban water and/or sanitation. They are referred to here collectively as SWSAs.

	Action by:	Supported by:
Adopt and operationalise approved national policies at state level	State Min. of Water Res., Other Minist.	STGS, NTGS, ESA
Develop a state investment for water and sanitation and hygiene promotion to ensure that the goal is met using water as motivation and compliance"	Line Ministries	STGS

#### Guidance and Capacity Building

Support LGAs to conduct baseline surveys for household and school sanitation (using mainly existing sources of information)	RUWASSA, SWSAs, Min. of Educ.	Planning Commission
Disseminate National Strategy for Scaling-up Rural Sanitation and Hygiene to state and LGA stakeholders	RUWASSA	
Disseminate Implementation Guidelines for Sanitation to LGAs and other stakeholders	RUWASSA, SWSAs	
Ensure active participation of key state and LGA stakeholders in zonal CLTS workshops	RUWASSA	
Conduct training of trainer sessions for state-level sanitation resource people on new sanitation promotion methodologies	RUWASSA, SWSAs	ESAs, NGOs, CSOs
Assist LGAs to develop action plans for scaling-up sanitation activities (either as a separate plan, or as part of ongoing sectoral planning processes)	RUWASSA, SWSAs	NGOs, CSOs
Assist LGAs in the development of sanitation and hygiene projects to access state and federal funds	RUWASSA, SWSAs	STGS, NTGS
Provide ongoing technical assistance to LGAs for implementation of sanitation plans, with an emphasis on intensive support for CLTS	RUWASSA, SWSAs	ESAs, NGOs
Ensure school and health centre sanitation initiatives use technologies that meet national standards	Min. of Educ.	STGS
Promote the formation of school environmental health clubs (EHCs) in all primary schools	Min. of Educ.	RUWASSA, SWSAs
Support LGA WASH Units/Depts. to carry out mobilisation/sensitisation activities to promote sanitation behavioural change from harmful traditional practices	RUWASSA, SWSAs	ESAs, NGOs, CSOs

	Action by:	Supported by:
Latrine Construction		
Promote accelerated household latrine construction state-wide through the development of enabling environments as described above	RUWASSA, SWSAs, STGS	State Planning Commission, Line Ministries
Promote and facilitate the construction of public toilets and latrines in markets, autoparks and other public spaces (including with the involvement of private sector entrepreneurs through PPP arrangements)	RUWASSA, SWSAs, STGS	State Planning Commission
Construct institutional toilets and urinals (in schools and health centres) through state-funded programmes	Min. of Health and Educ.	RUWASSA, SWSAs, STGS

#### Hand-washing Promotion

Develop state-level hand-washing promotional material (in English and state languages) based on national- level materials (or use national-level material as is)	RUWASSA	NOA, ESAs, NGOs, State media outlets
Explore and develop partnerships with the private sector to promote/sponsor hand-washing events	RUWASSA	ESAs, NGOs
In coordination with national/zonal WASH campaigns, hold State public hand-washing media event with participation of First Lady and/or Governor and/or other prominent persons	RUWASSA	ESAs, NGOs, State media outlets
Construct hand-washing and water facilities in schools and health centres through state-funded programmes.	Min. of Health and Educ.	RUWASSA, SWSAs, STGS

#### Monitoring

	RUWASSA,	STGS, State
Ensure that household and school/health unit sanitation progress/status is included in ongoing State sectoral	SWSAs, Min.	Planning
monitoring programmes	of Health and	Commission, Line
	Educ.	Ministries
	RUWASSA,	RUWASSA,
Monitor and document progress, and hold frequent consultations to disseminate results	SWSAs, Min.	SWSAs, Min. of
	of Health/Ed.	Health and Educ.

## 3. LGA Level

	Action by:	Supported by:
Legislation, Advocacy and Fund Raising		
Prioritise sanitation and hygiene within LGA development plans (including LEEDS2)	LGA Authority	LGA Wash Dept./Unit
Access existing federal and state-level funds and programmes for sanitation and hygiene	LGA Wash	State
The cost existing rederar and state rever runds and programmes for sumation and hygiene	Dept./Unit	RUWASSA State House of
Create LGA WASH Units/Departments		Assembly
Identify private sector sources of funding for sanitation and hygiene	LGA Wash	
Draft and enforce bylaws at LGA level to support sanitation and hygiene promotion	Dept./Unit LGA Authority / Council	LGA Wash Dept./Unit

#### Guidance and Capacity Building

Promote the formation of gender-balanced WASHCOMs/WASCOMs in communities.	LGA Wash Dept./Unit	LGA Authority
Provide training on CLTS and other new sanitation methodologies for WASHCOM members	LGA Wash Dept./Unit	NGOs, ESAs, RUWASSA
Provide ongoing outreach services and technical support to WASHCOM members.	LGA Wash Dept./Unit	NGOs, ESAs, RUWASSA
Promote the establishment of private sector sanicentres or the use of existing shops to market latrine slabs, hand- washing facilities and other hygiene and sanitation products.	LGA Wash Dept./Unit	NGOs, ESAs, RUWASSA
Provide orientation and support to interested private sector operators on sanitation technology (e.g. latrine slab construction) and promotion (sanitation marketing techniques).	LGA Wash Dept./Unit	NGOs, ESAs, RUWASSA

	Action by:	Supported by:
Promote and support the replication of externally supported projects (e.g. by UNICEF or WaterAid) ongoing in focus communities to other communities in the LGA.	LGA Wash Dept./Unit	NGOs, ESAs, RUWASSA
Increase the number of women in LGAs WASH Departments	LGA Authority	

#### Latrine Construction

Promote accelerated household latrine construction throughout the LGA through the development of enabling environments as described above.	LGA Wash Dept./Unit	LGA Authority, NGOs, ESAs, RUWASSA
Construct public toilets and latrines in markets, autoparks and other public spaces through directly funded projects and/or projects with private sector entrepreneurs (PPPs)	LGA Authority	LGA Wash Dept./Unit, Sanicentres / entrepreneurs

#### Hand-washing Promotion

Conduct high-profile hand-washing campaigns at LGA level.	LGA Wash Dept./Unit	NGOs, ESAs, RUWASSA, NTGS, Media
Promote, train and support community hygiene promoters through WASHCOMs.	LGA Wash Dept./Unit	NGOs
Ensure hand-washing promotion is part of the agenda for all meetings/events in communities that are organized by the LGA WASH Unit.	LGA Wash Dept./Unit	LGA Authority
Construct hand-washing and water facilities in primary schools and health centres through LGA programmes	LGA Wash Dept., LGA Education Dept.	LGA Authority, NGOs, ESAs

# 4. Community Level

	Action by:	Supported by:
Legislation, Advocacy and Fund Raising		
Advocate with community leaders (including faith-based and traditional leaders) to prioritise the goal of an 'open defecation-free' community and the need for latrines in all households.	LGA Wash Dept./Unit, WASHCOM	LGA Council, RUWASSA
Through the use of CLTS or other mobilisation strategies, create demand amongst community members for the construction of household latrines.	WASHCOM, Community Hygiene Promoters, NGOs, CBOs	Traditional and faith- based leaders, LGA WASH Dept./Unit
Draft and enforce community and/or LGA bylaws to support sanitation and hygiene promotion	Community leaders, WASHCOM	LGA Council, LGA Wash Dept./Unit

#### Guidance and Capacity Building

Establish a representative, gender-balanced WASHCOM/WASCOM in the community.	Community leaders	LGA Wash Dept./Unit
For households interested in constructing their own latrines: provide advice on minimum safe standards and suggested construction materials and techniques.	WASHCOM	LGA Wash Dept./Unit
For households interested in purchasing slabs and materials: encourage sanicentre operators and/or other private sector entrepreneurs to market latrine slabs and related products in the community, and to provide latrine construction services to households.	WASHCOM	LGA Wash Dept./Unit

#### Latrine Construction

Construct a new household latrine using local materials and household labour or using services and products	Households,	WASHCOM,
	Entrepreneurs	LGA Wash
purchased from sanicentres/entrepreneurs.	/ Sanicentres	Dept./Unit

	Action by:	Supported by:
Construct public toilets and latrines in markets, autoparks and other public spaces through directly funded projects and/or projects with private sector entrepreneurs (PPPs)	Community leaders, WASHCOM, Sanicentres / entrepreneurs	LGA Wash Dept./Unit

#### Hand-washing Promotion

nana-wasning Fromotion		
Appoint and train community hygiene promoters to conduct door-to-door hand-washing promotion and conduct regular promotion meetings in the community	WASHCOM	Community leaders, LGA Wash Dept./Unit
Conduct hand-washing campaigns in the community through special hygiene promotion events and as part of other community meetings and events.	Community Hygiene Promoters, WASHCOM, NGOs, CBOs	LGA Wash Dept./Unit

### 7 ANNEXES

## ANNEX 1. KEY DATES FOR PLANNING

19 November 2007	World Toilet Day and launch of Sanitation wedge of End Water Poverty Campaign
21 November 2007	Launch of IYS globally (UN HQ)
TBD	Launch of IYS regionally (UN Regional Commissions)
6 December 2007	Launch of IYS in Nigeria (tentative)
18-20 February 2008	AfricaSan+5 Minister's Meeting, Durban, South Africa
15-21 March 2008	Sanitation and Hygiene Week (some countries)
22 March 2008	World Water Day
27 May 2008	Nigeria Children's Day
16 June 2008	Day of the African Child
7 April 2008	World Health Day
5 June 2008	World Environment Day
28 June 2008	National Environmental Sanitation Day
8 September 2008	World Literacy Day
6 October 2008	World Habitat Day
19 November 2008	World Toilet Day

#### **ANNEX 2: TARGET CALCULATIONS FOR A MILLION HOUSEHOLD LATRINES**

# Nigeria International Year of Sanitation Latrine Target Setting Calculations

#### 1/ Progress from MDG baseline year (1990) to 2004 (Source: WHO/UNICEF JMP official MDG figures, 2006 report)

	Population			Sanitation Coverage, Percent			Numbe	Access	
	Total	% Rural	% Urban	Urban	Rural	Total	Rural	Urban	Total
1990	90,557,000	65%	35%	51%	33%	39%	19,424,477	16,164,425	35,317,230
2004	128,709,000	52%	48%	53%	36%	44%	24,094,325	32,743,570	56,631,960
No. of people who gained access, 1990 to 2004:					4,669,848	16,579,145	21,314,730		

No. of people who gained access, annual average:

#### 2/ Numbers Covered in 2007

- assumption: same rate as of progress as in previous period (in terms of number of new people gaining access)

	Number of People with Access			
	Rural Urban Total			
2007	25,095,007	36,296,244	61,199,402	

333.56

1,184,225

1,522,481

#### 3/ MDG Target in 2015 (Source: JMP plus official UN Population estimates for 2015)

MDG target for sanitation:

70% coverage, total sanitation

	Total Population	% Rural	% Urban	Rural Pop.	Urban Pop.
2015	175,715,000	44%	56%	77,490,315	98,224,685

#### 4/ Number of latrines/toilets required to meet the MDG target

#### Total

# of people that should have access in 2015 # of people that need to gain access from 2008 to 2015 # of people per year (over 8 years) # of latrines per year (@ 10 people per latrine)	123,000,500 61,801,098 7,725,137 <b>772,514</b>
Rural # of people that should have access in 2015 # of people that need to gain access from 2008 to 2015 # of people per year (over 8 years) # of latrines per year (@ 10 people per latrine)	54,243,221 29,148,214 3,643,527 364,353
Urban # of people that should have access in 2015 # of people that need to gain access from 2008 to 2015 # of people per year (over 8 years) # of latrines per year (@ 10 people per latrine)	68,757,280 32,461,036 4,057,629 405,763

Assumption for rural and urban calculations:

- 70% MDG target applies to both rural and urban (i.e. target is 70% with urban/rural coverage parity)

#### 5/ Target setting: a million latrines

- almost 800,000 new latrines per year must be built for the next 8 years

- figure is higher, in reality, because:

- in some areas the ratio of 10 people per latrine will be lower, thus more latrines must by built
- the figures do not take into account the large number of institutional latrines that are required, especially in schools
- the figures also do not take into account the inevitable breakdowns/abandonment of some latrines in the 2008-2015 period

- note that even achieving the MDG target (@800,000/year) would still leave 52 million people without access, almost as many as in 1990 (55 million)

- therefore, target is set at one million

## **ANNEX 3: COST ESTIMATE CALCULATIONS**

Inputs	Naira	US \$	Pay- ment:	Notes
1a/ Household Sanitation				
Household Latrine, rural				
Hardware	3,500	28	House- hold (HH)	estimated national average - slab: 1000, superstructure+excavation: 2500
Direct software support	3,500	28	Gov + ESAs	estimate: equivalent to hardware
Total, per latrine	7,000	56		
Grand total, 800,000 latrines in rural areas	5,600,000,000	44,800,000	HHs, Gov, ESAs	800,000 is based on the assumption that more work will be carried out in rural areas in 2008 than in urban areas
Grand total, software costs only for 800,000 latrines	2,800,000,000	22,400,000	Gov + ESAs	
Household Toilet, urban	10.000	0.0		
Hardware	10,000	80	HH	estimate
Direct software support	10,000	80	Gov + ESAs	estimate: equivalent to hardware cost
Total per toilet	20,000	160		
Grand total, 200,000 latrines in urban areas	4,000,000,000	32,000,000	HHs, Gov, ESAs	200,000 is based on the assumption that more work will be carried out in rural areas in 2008 than in urban areas
Grand total, software costs only for 200,000 toilets	2,000,000,000	16,000,000		
Grand total, 1 million latrines, all costs	9,600,000,000	76,800,000	HHs, Gov, ESAs	
Grand total, 1 million latrines, hardware costs only	4,800,000,000	38,400,000	HHs	
Grand total, 1 million latrines, software costs only	4,800,000,000	38,400,000	Gov + ESAs only	

1b/ Institutional/Public Sanitation			
School sanitation + hand-washing costs	facility unit		
Latrine (hardware only)	100,000	800	per compartment, based on UNICEF programme costs for standard 3-compartment school latrines
Urinal (hardware only)	18,750	150	per individual urinal compartment, based on UNICEF prog. costs for a standard 8-compartment urinal

Inputs	Naira	US \$	Pay- ment:	Notes
Urinal/latrine cost per pupil only	917	7.3		based on national standard of 1 facility per 50 pupils, ratio of 1 toilet:2 urinals (i.e. for every 150 pupils, 1 latrine compartment and 2 urinals to be built)
Urinal/latrine cost total (including requirements for both pupils and teachers)	1,100	8.8		20% additional to take into account facilities for teachers, estimate (1 for every 4 pupils)
Hand-washing facility, per school	200,000	1,600		per school
Hand-washing facility, cost per pupil	200	1.6		estimate of one facility per school of 1000 pupils
Total hardware costs per pupil	1,300	10.4		
Direct software support	390			estimate: additional 30%
Grand total (per pupil)	1,307	10.5	Gov + ESAs	total cost inclusive of washing facilities, urinal, latrine and software costs (but not including water supply costs)
No. of primary students to be served (#)	18,750,000			total primary school pupils less those already served with existing school facilities, see separate target calculations
Total Cost, school sanitation, to serve 18.75 million primary school students	24,500,000,000	196,000,000		see separate school calcs: 250,000 latrine compartments required to serve the 9.9 million students in schools with no or insufficient facilities
Total cost, school sanitation in 2008 (one- eighth of total cost)	3,062,500,000	24,500,000		assuming total production is evenly spread over the 8 years remaining until the MDG target year of 2015
Health Centre sanitation + compartment)	hand-washing facility (	per	Gov + ESAs	unit costs equivalent to schoo costs (estimated)
Toilet compartments required (#)	16,800			estimated based on facility pe bed/outpatients standards, see target calculations
Total urinals required (#)	33,600			as above
Hand-washing facilities required (#)	4,200			at one for every block of 4 latrine compartments
Total Cost, health centre/hospitals toilet compartment	3,150,000,000	25,200,000		16,800 toilet and urinal compartments required (see separate calculations)
Total cost, health centre toilets in 2008 (one-eighth of total cost)	393,750,000	3,150,000	Gov + ESAs	assuming total production is evenly spread over the 8 year remaining until the MDG target year of 2015

Inputs	Naira	US \$	Pay- ment:	Notes
Public sanitation + hand-wa	shing facility		Gov +	one 3-compartment unit only
(per health centre)	sing nucliny		ESAs	one 5 compartment unit omy
Total 3-compartment latrines (#)	38,700			requirement estimate: 50 3- compartment public latrines per LGA
Total cost, hardware	11,610,000,000	92,880,000	Gov + ESAs	
Direct software support	3,483,000,000	27,864,000	Gov + ESAs	estimate: additional 30%
Total cost, public toilets	15,093,000,000	120,744,000	Gov + ESAs	
Total cost, public sanitation facilities in 2008 (one-eighth of total cost)	1,886,625,000	15,093,000	Gov + ESAs	assuming total production is evenly spread over the 8 year remaining until the MDG target year of 2015
Grand total target for	10,142,875,000	81,143,000	Gov +	
government and ESAs (all institutional and public costs, plus direct software costs for household sanitation), 2008	10,142,075,000	61,143,000	ESAs	
Grand total sanitation, including all costs	14,942,875,000	119,543,000		
/ Hand-washing Campaigns				
LGA campaigns				
LGA WASH campaign, per LGA	406,250	3,250	Gov + ESAs	estimate: 25% of a state campaign (below)
Grand total for 774 LGAs	314,437,500	2,515,500		
State campaigns				estimate: based on costs of 2007 WASH campaigns
ESA direct costs	375,000	3,000	ESA	
State partner direct costs	500,000	4,000	Gov	
Support costs from national level	750,000	6,000	Gov + ESAs	
Total, per State	1,625,000	13,000		
Grand total, 36 states plus FCT	60,125,000	481,000		
National campaign				estimate: approx. 10X state campaign, ESA and Gov sharing
ESA direct costs	3,750,000	30,000	ESA	
Federal partner direct costs	5,000,000	40,000	Gov	
Grand total	8,750,000	70,000		
Grand total, 774 LGA, 36 state, 1 FCT and 1 national campaign	383,312,500	3,066,500	Gov + ESAs	

Inputs	Naira	US \$	Pay-	Notes
			ment:	

3/ Enabling environments				
National				
Total national costs	508,750,000	4,070,000	Gov + ESAs	estimate: based on UNICEF national AWB budget \$1.058 M plus gov. inputs \$42 K which serves 10 states, then multiplied by 3.7 to take into account expansion from 10 states to 36 states plus FCT
State				
Total state costs	1,800,258,125	14,402,065	Gov + ESAs	estimate: based on 2007 UNICEF AWP budget figures, less school/health direct hardware costs (see AWP calcs worksheet)
Grand total, enabling environments	2,309,008,125	18,472,065		
Grand Total, three targets, ESA + Gov costs	12,835,195,625	102,681,565		includes everything except for hardware costs for household latrines

Total in relation to estimated global total		
Estimated cost of meeting sanitation target globally per year	10,000,000,000	10 billion dollars per year (IYS estimates)
Percentage of Nigeria unserved to global unserved	2.8%	2.6 billion unserved globally, 72 million unserved in Nigeria (JMP 2004 figures)
Nigeria "share" of global cost estimate	276,923,077	
Percentage of global "share" for Nigeria this cost estimate represents	37%	Above estimate (\$102M/year) to estimate of Nigeria percentage of global funding