

ACTION RESEARCH INITIATIVE

LEARNING BRIEF

ADDRESSING THE HUMAN RESOURCE CAPACITY GAPS IN RURAL SANITATION AND HYGIENE

SUMMARY

Understanding and addressing the human resource (HR) needs and gaps in the sanitation and hygiene sectors is a critical part of achieving universal access to adequate and equitable sanitation and hygiene. To understand the current and future HR needs and gaps of these sectors and identify priority actions and pathways to address barriers, USAID WASHPaLS #2 conducted a sanitation and hygiene sector workforce capacity needs assessment (CNA) focused on sub-Saharan Africa and South and Southeast Asia, including analysis of volunteers, informal, and not formally trained workers who play a particularly important role in rural sanitation and hygiene. Recommendations for action include developing routine coordination, planning, monitoring and standards, prioritizing sanitation skills and fulfillment, and addressing working conditions and stigma.

WHY THIS MATTERS

Although much progress has been made in improving access to adequate and equitable safely managed sanitation services and hygiene, significant challenges remain. One such challenge is the lack of a sufficiently large, appropriately skilled, and diverse workforce in the sanitation and hygiene sectors.

To make informed decisions that contribute to closing gaps in access to safely managed sanitation and hygiene, policy makers, donors, and educational institutions need to understand the sectors' unique HR capacities and needs. HR capacity gaps in rural areas, where reliance on community-based services and on-site sanitation systems is prevalent, are particularly poorly understood.

WASHPaLS #2 conducted a CNA in six countries to assess the HR capacity needed to deliver safely managed areawide sanitation and basic hygiene. The assessment identified barriers and opportunities related to data collection; workforce numbers and capacity gaps; remuneration and working conditions; prioritization; stigma and perceptions; and mismatches between sector needs and training opportunities.

How does this research connect to USAID's Global Water Strategy Action Research Initiative?

This research supports the USAID Global Water Strategy Objective 2 goal of improving area-wide sanitation services. This assessment begins to fill crucial evidence gaps on HR needs in the sanitation and hygiene sector, particularly in rural areas.

By identifying needs, capacities, and gaps in rural sanitation and hygiene HR, this research lays a foundation for USAID and its partners to more effectively identify policies and actions that ensure all people have equitable access to areawide sanitation and hygiene services.

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METHODOLOGY

Based on identified gaps in the evidence, the CNA concentrated efforts on rural sanitation and hygiene. Specifically, the CNA methodology was designed to assess the HR capacity needed to deliver safely managed area-wide sanitation and basic hygiene sustainably and at scale, with emphasis on on-site sanitation.

ASSESSMENT FOCUS

- What are the HR capacity gaps impeding sanitation and hygiene sectors' achievement of universal access to sustainable services?
- What are the different modalities for sanitation and hygiene sectors' capacity development and to what extent have they contributed to achieving and sustaining needed human capital?
- What are the barriers and incentives to access, recruit, promote, and retain existing workforce capacity?
- What are the recommended priority actions to address HR capacity gaps in the sanitation and hygiene sectors?

SYSTEMS APPROACH

To assess and address HR capacity shortages and/or gaps requires a full understanding of four interconnected levels of capacity: individual, organization, enabling environment, and society. This assessment focused on the importance of individual capacity but illustrates that individual capacity is intrinsically influenced by other factors. This system-thinking approach was also reflected in choosing to assess HR needs for all functions required for sanitation and hygiene service delivery, from policy and coordination, to construction, to business development.

DATA COLLECTION METHODS





Key documents & previous studies

Analysis of data from GLAAS 2022, AMCOW, WALIS

KEY INFORMANT INTERVIEWS & FOCUS GROUP DISCUSSIONS



Engagements with representatives from more than 24 (I)NGOs, development partners, regional associations, & training centers and more than 400 country-level key informants

COUNTRY ASSESSMENTS



National assessment: Ghana

Assessments of sample districts: Nigeria, India, Nepal

Focused assessment of smaller set of guiding questions: Rwanda, Philippines

FINDINGS AND RECOMMENDATIONS



#1. Countries lack sufficient information on their sanitation and hygiene HR needs and capacity but, overall, face significant shortages.

Lack of data and HR assessments, especially data disaggregated by sector and data on the informal workforce and volunteers, is a significant challenge affecting sector actors' ability to make informed decisions about sanitation and hygiene HR. Lack of standardization and data collection are likely reasons the sanitation and hygiene sectors are lagging in understanding, planning for, and developing clear workforce career paths. In five of the six study countries, none of the functions in the sanitation and hygiene sectors have adequate HR capacity. The lack of HR needs assessments and sector HR planning also means that many of the functions are currently performed by people without the appropriate skills, and there is a lack of diverse skills and disciplines.

Recommendation: Undertake routine (sub)national HR sector assessments and monitoring and develop coordinated HR plans and standards.

Including conducting WASH sector-wide or sanitation and hygiene-specific HR assessments; developing costed HR strategies linked to national plans; standardizing job positions, descriptions, and qualifications; and ensuring transparent and disaggregated collection of HR data.

#2. As crosscutting themes, sanitation and hygiene are not prioritized among the sector and institutions in which they fall, resulting in lack of jobs.



Rural sanitation and hygiene are interlinked with waste management, health, nutrition, and education, and may be housed in or across multiple ministries. This can cause fragmented oversight and decision-making, lack of champions to advocate for funding, less focus, and less time and effort on addressing sanitation and hygiene issues, including HR and job creation. This lack of prioritization also has budget implications. Local governments are severely limited in their ability to develop local HR capacity, including in terms of available budgets.

Recommendation: Advocate and coordinate to prioritize sanitation and hygiene job creation and fulfillment of the required functions.

Including advocating for investment in rural sanitation and hygiene sectors and the importance of job creation in rural areas; local governments applying cross-sectoral planning of programs and tasks, staffing, workload, and capacity development; and central governments strengthening local job creation through incentive schemes and rewards for local government achievement of objectives in sanitation and hygiene.

#3. Rural sanitation and hygiene sector workforce conditions are poor.



Unattractive remuneration and working conditions, particularly in the public sector, make it difficult to attract a highly skilled or motivated workforce. Remuneration tends to be better with (I)NGOs, development partners, and larger private sector companies, but the projectized and contract-driven nature of the work mean staff are contracted temporarily, leading to loss of institutional knowledge and low job security. Employers tend to lack clear gender equality and social inclusion (GESI) policies, and women are more likely to take on volunteer positions. With limited institutional actors and formal jobs available, the public sector and (I)NGOs depend heavily on volunteers. However, there are limited opportunities for volunteers or non-formally-skilled workers to upskill or grow into official or fixed positions. Many well-trained professionals move to more respected sectors, making brain drain a real challenge.

Recommendation: Improve sanitation and hygiene sector workforce conditions.

Including working toward comparable working conditions and remuneration for rural sanitation and hygiene sector staff; developing appropriate recruitment policies, acts, guidance, and local government allocations; formalizing volunteers or volunteer schemes by increasing access to capacity development opportunities, ensuring clear and fair incentives, and establishing schemes to enable (talented) volunteers to transition into formal local government positions; and developing and using GESI policies and national HR strategies/plans to build diversified local government teams across the sanitation and hygiene functions.

#4. There is limited attraction and persistent stigma to work in the (rural) sanitation and hygiene sectors.



People regard sanitation as an unattractive sector to work in. This is partly because of the poor working conditions and remuneration, but is also the result of persistent stigma and society's perceptions of the sector. Although several countries are taking steps to increase the visibility of the important work being done and "rebrand" these jobs, many people do not want to be associated with sanitation jobs or are not allowed to work in the sector by their families. For most private sector actors, market-based sanitation is not generally an attractive business, limiting stable and better-paid employment opportunities.

Recommendation: Dignify sanitation and hygiene roles and break down stigma and barriers.

Including campaigns to eliminate barriers and stigma around sanitation and hygiene roles; breaking down barriers for female and youth engagement in the sanitation and hygiene workforce; facilitating private sector engagement in sanitation and hygiene by improving the business environment and working conditions; and examining the channels, implications, and (unintended) consequences of formalization of informal service providers.

#5. HR demand, supply, and training opportunities are mismatched, leading to competency gaps and a lack of skills diversity.



There is insufficient supply of graduates with needed skills and a mismatch between sector requirements and graduates, particularly for rural sanitation. There is a lack of lower-level education or capacity development opportunities, including patchy offering of technical and vocational education and training (TVET) opportunities, and competency gaps exist for both soft/transferrable skills, such as leadership or administration, and more technical skills. Lack of coordination between sector needs and supply results in unequal offerings across geographies or topics, and training that is focused on what trainers think is needed instead of on expressed training needs. However, the growth in digital learning offers major opportunities, and relevant interdisciplinary education offerings have increased in recent years.

Recommendation: Strengthen and improve coordination and supply of sanitation.

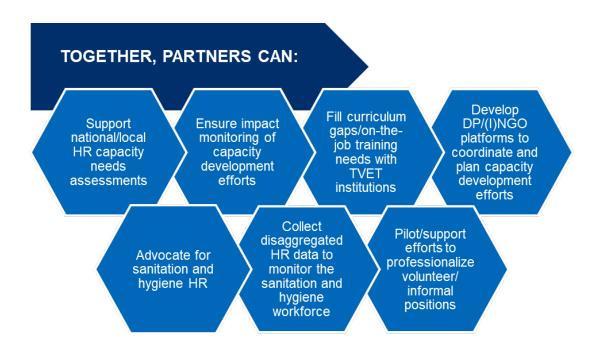
Including development of national government-led and/or development partners coordination mechanisms for sector capacity development; strengthening national formal education structures; strengthening diversified ways of practical, continued, or on-the-job learning; reviewing and collaborating on curricula and open-source materials to ensure an up-to-date, appropriate, and interdisciplinary offering of courses and subjects; impact monitoring of capacity development initiatives to inform and continuously strengthen offerings, and developing specific competencies identified as HR capacity gaps.



Sanitation and Hygiene workers of Bharatshila GP, Banka, Bihar, India (USAID WASHPaLS #2)

WAY FORWARD

This assessment is the first step in a longer-term process to engage multiple partners at global, regional, and local levels in the development and implementation of concerted, coordinated actions to address the HR capacity gaps in the rural sanitation and hygiene sectors. To this end, the assessment is accompanied by a guiding tools for the development of country action roadmaps, outlining proposed actions and examples by countries' sanitation progress and HR context. These will be published under a separate cover. Beyond supporting country-level action planning, below are some additional examples of actions that development partners can undertake.



ACKNOWLEDGEMENTS

This brief is based on a Capacity Needs Assessment prepared by the Water, Sanitation, and Hygiene Partnerships and Learning for Sustainability (WASHPaLS) #2 project. Kirsten de Vette and Carolien van der Voorden oversaw the analysis, with essential contributions from Bertha Darteh, Isaac Monney, Nanpet Chuktu, Shadrack Guusu, Vincent de Paul Kabalisa, Anand Shekhar, Bhimsen Devkota, Anita Shrestra, Jay Tecson, and Arnel Gonzales. The authors would like to thank the following individuals for their valuable input and insightful suggestions: Morris Israel and Lucia Henry (Tetra Tech), and Jesse Shapiro (USAID).

The full Capacity Needs Assessment Synthesis Report is available here.

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