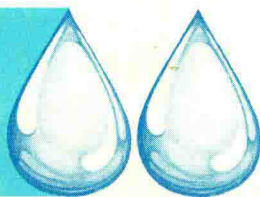
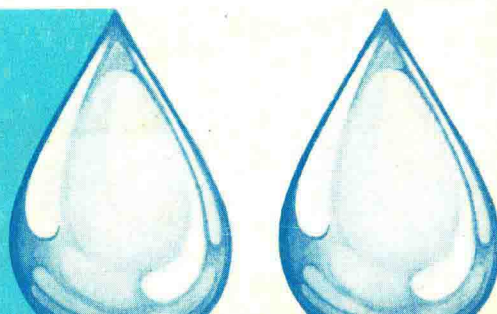
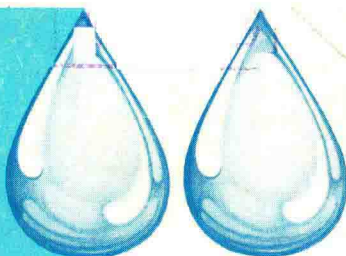




NATIONAL DECADE PLANS:



**EIGHT
QUESTIONS
THEY ANSWER**



248 International Drinking Water Supply
and Sanitation Decade

② National Decade Plans:
Eight Questions They Answer



①

WORLD HEALTH ORGANIZATION, GENEVA, 1982

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The World Health Organization is a specialized agency of the United Nations with primary responsibility for international health matters and public health. Through this organization, which was created in 1948, the health professions of more than 155 countries exchange their knowledge and experience with the aim of making possible the attainment by all citizens of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life.

By means of direct technical cooperation with its Member States, and by stimulating such cooperation among them, WHO promotes the development of comprehensive health services, the prevention and control of diseases, the improvement of environmental conditions, the development of health manpower, the coordination and development of biomedical and health services research, and the planning and implementation of health programmes.

These broad fields of endeavour encompass a wide variety of activities, such as developing systems of primary health care that reach the whole population of Member countries; promoting the health of mothers and children; combating malnutrition; controlling malaria and other communicable diseases including tuberculosis and leprosy; having achieved the eradication of smallpox, promoting mass immunization campaigns against a number of other preventable diseases; improving mental health; providing safe water supplies; and training health personnel of all categories.

Progress towards better health throughout the world also demands international cooperation in such matters as establishing international standards for biological substances, pesticides and pharmaceuticals; formulating environmental health criteria; recommending international non-proprietary names for drugs; administering the International Health Regulations; revising the International Classification of Diseases, Injuries, and Causes of Death; and collecting and disseminating health statistical information.

Further information on many aspects of WHO's work is presented in the Organization's publications.

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INTRODUCTION

The International Drinking Water Supply and Sanitation Decade has stimulated the development of national plans in many countries. These activities have led to the preparation of much valuable information that is required for making decisions, in order to:

- ensure that all important aspects of the subject have been identified and related to one another;
- define a framework, and the objectives, for actions by governments, communities, and organizations;
- make good use of scarce resources;
- view development projects in their proper context;
- clarify the basis for decisions on financing, investment, coverage, and infrastructure development;
- discuss and justify programmes with national decision-makers and external cooperation agencies.

The planning experiences of a number of developing countries have provided a basis for outlining the desirable contents of a national “Decade” plan.¹ The outline that follows is presented in the form of eight questions that a plan should answer — rather than as a list of specific information to be compiled — in order to:

- focus attention on substance, rather than form;
- permit national planners and decision-makers to adapt it — by emphasis and by elimination — to their own national situations;
- enhance the feasibility of discussion among the many people involved in the planning/decision process, by minimizing the use of technical jargon.

Technical guidance for detailed planning work is available in a broad array of specialized documents, a selection of which is listed by source on pages 17-18.

¹ Some of these experiences are based on field work supported by the United Nations Development Programme (UNDP); the Agency for Technical Cooperation, Federal Republic of Germany (GTZ); and the Swedish International Development Authority (SIDA).

THE EIGHT IMPORTANT QUESTIONS

The information that a “Decade” Plan should present can be summarized by answering eight major questions:

1. **WHAT ARE THE NEEDS?**

The country’s situation as regards the provision of safe water and sanitation now and in the future, in the light of Decade goals and the country’s own resources.

2. **WHICH OF THE NEEDS SHALL WE BE ABLE TO MEET AND WHEN?**

The objectives of the national policy, and the improvement targets sought for specific periods.

3. **HOW SHALL WE MEET THEM?**

General strategies, specific tactics, and methods selected to attain the objectives and targets.

4. **WHO IS TO DO WHAT?**

Identification of responsibilities for action among agencies of the government and among organizations, communities, and families.

5. **HOW CAN WE STRENGTHEN THE HEALTH IMPACT?**

Provisions to back-up the installation of water supply and sanitation facilities in support of health objectives.

6. **WHAT RESOURCES MUST BE DEVELOPED?**

Development and financing of institutions and staff, and of equipment, knowledge, and management systems.

7. **WHEN WILL THE STEPS BE TAKEN?**

Identification of projects and priorities and phasing of actions.

8. **HOW DO WE ENSURE PROGRESS?**

Management of development, control of services, and evaluation of operations and impacts.

1. WHAT ARE THE NEEDS?

A. *What main features of the country affect water, sanitation, and health?*

- the major geographical, climatic, and hydrological features;
- the present and projected population, and the size distribution of settlements;
- the status and trends of the economy and the pattern of income distribution, i.e., “ability to pay”;
- the educational, social, and cultural factors that are relevant to the use of water and the practice of sanitation.

B. *In comparison with the “Decade” goal of Water Supply and Sanitation for All, what is the present status?*

- the numbers and percentages of the urban and rural populations now provided with an adequate level of water supply and sanitation facilities (clarify what is considered “adequate”);
- considering population trends and existing programmes, the extent of coverage expected in 1990 and in 2000;
- the proportion of the population with a “safe” potable water supply — as regards biological and chemical pathogens and the continuity of supply;
- the way in which drinking-water systems relate to other water systems, such as for agriculture, industrial processing, and general household use.

C. *How does the water/sanitation situation affect the health status of the people?*

- the proportions of the total mortality and morbidity that are caused by diseases related to water and sanitation;
- how these diseases are distributed in relation to age group and type of settlement, and among groups that are not provided with safe water supply and sanitation;
- the diseases that require preventive action, as well as the provision of water and sanitation, for their reduction.

D. *How is the water supply/sanitation sector organized and managed?*

- the distribution of responsibilities among the agencies of government, at each level of administration — central, intermediate, and local; the differences between urban and rural areas;
- the nongovernmental organizations that are involved in the sector and their functions;
- how planning in the sector is related to the more general planning and budgeting processes of the country;
- the legal and operational linkages between the sector and other sectors, such as education, agriculture, health services, industry, water resources, energy, and environmental protection;

- the roles of communities, individuals, and families in the development, operation, and financing of water supply and sanitation;
- the modifications that are required to the existing laws to make them complete, coherent, and consistent; enforcement of the existing water legislation;
- how the sector (classified according to its main components) is financed in respect of capital as well as recurrent costs.

E. *How adequate are the existing resources in relation to the current and future requirements of the sector?*

- the water resource situation by major regions; the extent to which these resources are dependent on hydrology, hydrogeology, and vegetation cover, as well as on population trends, industrial and agricultural development, and land use patterns;
- the quantity and quality of the manpower available to the water supply and sanitation sector, considering each operational category of personnel and the ability of the country's educational system to provide the necessary training;
- the ability of national industry to equip and maintain the current water supply and sanitation system; its capacity to meet increased demand;
- the social and community organizations that are or could be effective in influencing people's behaviour in water use, sanitation, and health promotion;
- the proportion of government development funds being invested in the sector;
- in general, the capacity of the government and various population groups to supply funds, material, and labour to improve coverage and quality;
- the willingness of people to pay for water supply and sanitation facilities, in accordance with their perceived needs.

F. *What are the needs, obstacles, and possibilities in relation to "Decade" goals?*

- the critical needs (and their distribution among areas and population groups) for improved provision of water supply and sanitation and for improved health and wellbeing;
- the critical shortcomings in the sectoral system;
- the major obstacles to improvement in the national situation;
- the factors that represent significant potential resources for improvements.

2. WHICH OF THE NEEDS SHALL WE BE ABLE TO MEET AND WHEN?

A. *What government policies determine sectoral objectives?*

- the declared national objectives for provision of safe water and sanitation facilities in the near, medium, and long term; the form in which they are expressed (e.g., legislation, policy declarations, national development plans, indicative budget allocations);
- the declared national objectives for reductions in mortality and morbidity that are related to water supply and sanitation; the form in which they are expressed;
- the declared national objectives in other development sectors that imply expectations of the water/sanitation sector in future periods.

B. *In the light of these policies, what are the sector's objectives?¹*

- the sector's objectives, by development plan periods, for the improvement of coverage, service levels, and quality — in percentages and numbers;
- the division of sectoral objectives between the improvement of existing water supply/sanitation facilities and the provision of additional facilities.

C. *How can these objectives be translated into targets, by periods?¹*

- the breakdown of sectoral objectives by time-periods and by urban/rural populations (and by further prescribed and logical classifications), the results to be related to identified milestone dates.

¹ The initial estimated objectives and targets may have to be modified in the light of resource considerations. The plan should set forth the final policy decisions based on these deliberations.

3. HOW SHALL WE MEET THEM?

A. *What general strategies are to be employed in meeting objectives and targets?*

- the main features of the approach to be used in urban and rural areas (and subclasses of each), including methods to be used, standards for service and maintenance, inducements, contributions, technical assistance, and intersectoral cooperation;
- the phasing of the strategy over the medium and long term, considering immediately feasible steps, when funds will become available, the build-up of human and technical resources, community readiness to proceed, and reduction of logistic obstacles;
- how phasing is affected by planned developments in the health service sector, other sectors, and comprehensive area development projects.

B. *What are the key tactics to be used in the strategy?*

- how agents of this and other sectors are to function in promotional activities and education, and in installation, operation, and use of new or improved facilities;
- how technical resources, including skilled personnel, are to be distributed, by level and area;
- the level at which decisions are to be made to proceed with specific domestic or community installations (and the criteria to be used);
- how communities are to participate in planning, decision-making, and financing, and in enjoyment of the benefits;
- how community requests and self-help activities are to be stimulated.

C. *What methods are to be used to implement the strategies?*

- the criteria used (e.g., affordability, acceptability, dependability, simplicity, self-reliance) to determine the appropriate methods to be employed in various regions;
- the range of methods to be made available in water supply, in sanitation, and in health education; how far they will be standardized;
- the roles of users, agents, and officials in making choices among alternative methods in specific cases;
- what the selection of method implies as regards manpower, materials, equipment, spare parts, and degree of institutional development.

D. *By means of what kinds of programmes and subprogrammes are these strategy decisions to be implemented?*

- whether implementation is to be organized according to the components of the plan — manpower, institutional development, facilities provision, supplies, and equipment — or in the form of regional programmes that include all such components, or by some combination of subject and area organization;
- the programme structure that is decided upon;
- the links between these programmes and relevant development programmes in various sectors.

4. WHO IS TO DO WHAT?

A. *How are governmental responsibilities to be fixed, distributed, and co-ordinated?*

- at the central level, the specific functions and powers of each agency comprising the sector, or involved with it;
- the structures and processes to be used in coordination at this level;
- the roles and responsibilities of each agency's officials and field units at the intermediate and local levels of government; how these are related to the responsibilities of other governmental officials at these levels — provincial governors, district officers, mayors;
- how coordination is to be obtained at each level and between levels.

B. *Possibilities for other statutory bodies and private organizations to fit into the programme?*

- special authorities/organizations that could be established or expanded to carry out development and operational functions;
- the social, educational, and economic organizations that are to contribute to the support, promotion, supply, and continuity of the programme;
- the linkages to be developed and the management of continuing relationships.

C. *How are communities to be included in the programme's processes?*

- leadership structures in urban and rural areas that are to act as representatives and agents for community organization and participation;
- the role of village development committees and specialized health or water committees in building, maintaining, and promoting the use of water and sanitation facilities;
- the legal responsibilities of local or village bodies in respect of their own water supplies;
- the responsibilities of the water committee for sanitation;
- the functions of various community bodies (including local nongovernmental organizations in the development of local systems, in operations and maintenance, and in education of the public);
- the connections of these local structures with governmental entities.

D. *What are the roles of households and individuals?*

- the respective roles of indigenous leaders and of government agents with regard to families;
- the initiatives that households can take to safeguard their health, improve their own facilities, and participate in the planning process and plan implementation;
- how indigenous leaders and government agents will interact in the planning and implementation processes.

5. HOW CAN WE STRENGTHEN THE HEALTH IMPACT?

A. *How will the safety of water supplies be ensured?*

- how and by whom the safety of domestic water supplies is to be ensured — through design, sanitary facility location, and monitoring;
- how communal water supplies are to be protected against contamination and pollution — through design, user education, emission control, monitoring, and water treatment;
- support of local monitoring activities by means of laboratory services, water treatment supplies, and enforcement powers.

B. *How can behavioural changes help to achieve the potential health benefits of improved facilities?*

- the types of family behaviour that should be developed and reinforced, as regards proper water use, waste disposal, and domestic hygiene;
- how educational efforts are to be linked with efforts to develop facilities;
- the role of community sanitary workers or community health workers in health education;
- how the health education potential of other community resources — schools, agricultural extension, literacy campaigns, social and worker organizations, etc., — are to be developed and encouraged;
- how consumer appreciation of the health benefits resulting from improved water supply and sanitation facilities can be increased with a view to obtaining more community participation in the planning, construction, operation, and maintenance of sector installations.

C. *How are “Decade” developments and benefits to be linked with primary health care?*

- how proper emphasis on sanitation is to be ensured;
- how the development of sanitation and water supply is to be integrated with the other basic elements of primary health care at the village and neighbourhood levels;
- coordination of planning, decision-making, resource development, and operations;
- use of the primary health care reporting system to monitor status and progress in reducing water-related diseases.

D. *How are “Decade” developments and benefits to be linked with other sectors?*

- integration with irrigation, rural development, and other community projects;
- liaison with literacy and other basic community education projects.