Simavi is an international non-profit organisation working towards a world in which basic health is accessible to all. Our goal is to structurally improve the basic health of 10 million people in marginalised communities in Africa and Asia by 2020. By doing so, we enable them to build a better existence and break the cycle of poverty. Our experience over the past ninety years has shown us that investing in water, sanitation and hygiene (WASH) and in sexual and reproductive health and rights (SRHR) is vital for people to be able to lead a healthy life. Therefore we concentrate our efforts in these two areas.

All our programmes are based on three integrated pillars: 1) Empower communities to demand quality services and to practice healthy behaviour; 2) Create a supportive, enabling environment in which all stakeholders are aware of their roles and responsibilities, work together and can be held accountable; 3) Ensure that people use affordable, suitable and sustainable WASH and SRHR services. This is the core of our Theory of Change – it’s designed to ensure that everyone involved, from community to governmental level, works together towards realising sustainable improvement of basic health.

**Background**

A lot of progress has been made towards reaching the Millennium Development Goal on improving sanitation coverage, but a large challenge remains. 2.5 billion people worldwide lack access to improved sanitation and 1.1 billion still practice open defecation. At the same time, sustaining the gains made from increased usage of toilets raises new issues about the management of human waste. 2.7 billion people rely on non-sewer systems for sanitation - these generate a mix of solid and liquid wastes known as “faecal sludge”.

Without proper management, faecal sludge is often allowed to accumulate in poorly designed pits, discharged into storm drains and open water, or dumped into waterways, wasteland and insanitary landfill sites. Only a very small percentage of faecal sludge is managed and treated in a safe and proper manner. This represents a growing problem that 1) Affects public health and 2) Poses environmental risks, particularly in the poor areas of rapidly expanding cities.

### Collection > Transportation > Treatment > Re-Use/Disposal

<table>
<thead>
<tr>
<th>Collection</th>
<th>Transportation</th>
<th>Treatment</th>
<th>Re-Use/Disposal</th>
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<tbody>
<tr>
<td>Households (investors)</td>
<td>Manual or Mechanical pit latrine emptiers Utilities</td>
<td>Local Governments Utilities SSIPs</td>
<td>Local Governments Local farmers, etc.</td>
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**Sanitation and Faecal Sludge Management Service Chain**

*Photo: Caroline Penn*
The Simavi Approach

We believe that in order to overcome critical constraints for scaling up sanitation chain services – especially for the poor - every stakeholder needs to become aware, committed and actively engaged in the issue. Households need to willingly invest in available, affordable, quality and user-friendly sanitation services that are offered by entrepreneurs capable of offering such services. Scalable innovation that addresses the changing needs of the sanitation chain services needs to be promoted.

It is also vital to strengthen policies and regulations that stimulate and enable entrepreneurship and private sector involvement in different aspects of sanitation chain services - and to monitor the quality of the services they provide. Entrepreneurs need access to affordable financial resources (loans, revolving funds) that enable them to address the needs of their target groups. Sufficient investments need to be made to ensure that proper sanitation (including safe management of sludge) within public places (schools, health centres, hospitals) functions properly. Public-private partnership and investments are also required to ensure the appropriate and efficient treatment of faecal sludge.

We address the following key subjects in our approach to sustainably improve sanitation and FSM:

- Multi-stakeholder consultations
- Sanitation services in cities’ informal settlements (slums)
- Entrepreneurship and creating demand for (improved) sanitation
- Emptying/treatment services
- Lobby and advocacy with policy makers to consider the full sanitation chain
- Sanitation chain for institutions
- Facilitate investment in sanitation chain services

Multi-stakeholder consultations
Reasonable national level sanitation policies and standards exist in many countries. However, these mainly focus on collecting part of the sanitation chain (household latrines/containers) and only occasionally extend to a sewage system for the transport of sludge in urban areas. The rest of the sanitation service chain (emptying, transport, treatment and reuse/disposal) seems to be invisible to policy makers.

At local level however, the implementation of all these policies and standards mentioned above constitutes a regular challenge. This is often caused by the lack of knowledge among policy makers/regulators on FSM, the lack of clear definition of roles and responsibilities between different government departments, their insufficient capacity to address these policies, and inefficient monitoring of the service providers.

By engaging with stakeholders at local and national levels, Simavi aims to ensure that these policies encompass the whole sanitation and FSM service chain and that approved policies are implemented at a local level. By empowering communities, in particular women and marginalised groups, we ensure that local demand for proper services is increased and realised. We also

\[1\] A review of Faecal Sludge Management in 12 Cities, 2013, WSP
try to actively approach different political parties to ensure the sustainability of the policy influencing efforts in case of a change of local or national government.

For example, via Simavi’s Sanitation, Hygiene, and Water (SHAW) programme in Indonesia, we have been able to realize sustainable improvement of the health of more than 1 million people by creating a demand for sustainable sanitation services in communities and increasing the willingness to invest and pay for those services.

The involvement and collaboration between multi-stakeholders (government and social organisations, entrepreneurs and donors) ensured increased access to these sustainable sanitation services.

Sanitation services in cities’ informal settlements

About 1 billion people live in slums around the world with few or no sanitation options. In these settlements people often live in small crowded areas without space to construct latrines. Therefore most people either defecate in the open or use so-called ‘flying toilets’: plastic bags that are used to defecate in before being thrown over the fence or into the road. Where there is space for the construction of community latrines, security (an important consideration for women) and emptying options (due to narrow access) remain important issues.

To overcome this global challenge Simavi strategically focuses on entrepreneurship, innovation and public-private partnership. For example, Simavi introduced a viable business promoting ‘PeePoo’ bags in Kibera, the largest informal settlement in Nairobi, Kenya. These bags provide a user and environment-friendly solution and were accompanied by a campaign involving hygiene promotion, awareness raising and community dialogue covering the whole spectrum of sanitation chain services.

In Dhaka, Bangladesh, Simavi partnered with Dhaka Water and Sewage Authorities (DWASA) and Vitens Evides International (a private Dutch company) to ensure the provision of sustainable sanitation services to the inhabitants of Low Income Communities (LIC) receives sufficient attention during the relevant making decision processes and when planning and implementing WASH programs for LICs.

Entrepreneurship and creating demand for (improved) sanitation

To stimulate the construction or improvement of household latrines, Community Led Total Sanitation (CLTS) strategies are applied in combination with social sanitation marketing and a WASH behaviour change programme. On the supply side, sanitation entrepreneurs and pit emptiers are strengthened to develop and scale up their businesses through the provision of business development, marketing skills (to create demand and raise awareness), management and technical training. In addition, links are established with micro-credit lines/micro finance institutes for households and entrepreneurs to stimulate and create investment opportunities. In Bangladesh, for example, thanks to a strategic partnership with WSP-World Bank, more than 200 sanitation entrepreneurs were provided with loans and technical capacity strengthening support to start up or expand their sanitation businesses.

Emptying/treatment services

The majority of emptying services around the world are performed manually or mechanically by local or self-employed masons or pit emptiers, most of whom fail to deliver reliable or customer-friendly services, lack proper knowledge about the importance of proper handling of faecal sludge and the danger it poses to the environment and the health of the community (and even their own personal health). Simavi provides training to both manual and mechanical pit emptiers on emptying pits in a safe, hygienic manner and transporting sludge safely to officially designated treatment plants (if available) or a place that poses the least possible health risk for the community.

Methodologies for sludge treatment and re-use are available, but the willingness and opportunities (legislation) for this often remain limited. In most instances when other hygienic options to treat and re-use the waste are not available, the sludge is transported to a municipality owned sludge treatment plant. Simavi supports the development and implementation of decentralised, low-cost technologies that:

1) Don’t require the allocation of large squares of land; 2) Makes the safe re-use of waste possible; 3) Can be embraced by small to medium size entrepreneurs.
Facilitate investment in Sanitation Chain Services
The finance sector has little or no experience in investing in sanitation businesses and there is also little interest in exploring the market for sanitation reuse products. However, large investment is needed to solve the problem of entire sanitation chain services in urban areas. To meet this need, Simavi collaborates with Micro Finance Institutes (MFIs) to ensure affordable micro finance products and soft loans are available to local entrepreneurs that work on the entire sanitation chain. In addition, we act as a mediator to channel finances from businesses/investors to small or medium size entrepreneurs that guarantee proper service delivery.

Lobby and advocacy to consider the full sanitation chain
Policymakers in most countries do not engage in - or prioritise - providing, regulating or facilitating the scaling up, emptying, or transport services of non-sewage sludge. In most cases they actually lack the required capacity or interest to do so. Furthermore, despite the high risk that a lack of proper treatment facilities represents to public health, public institutions are not even willing to provide land for sanitary landfills or treatment plants. There is often no clear mandate for any public institution to take responsibility of non-sewage sludge, nor any regulation on where or how privately held companies or entrepreneurs should responsibly dispose of sludge.

Simavi engages in dialogue with policy makers at different levels to demand for a strong political commitment to:
1) Addressing the issues related to a full sanitation chain,
2) Creating an enabling environment and clear regulation for sanitation entrepreneurs and
3) A clear institutional mandate/strategy to designate governmental department responsibility roles and responsibilities for the full sanitation chain. As the main stakeholder for safeguarding public health, Simavi demands that governments invest in efficient treatment plants, or at least provide sufficient sanitary landfills for the safe disposal of faecal sludge.

Sanitation chain for institutions
Simavi works closely with relevant stakeholders/authorities (e.g. Ministry of Education, parent-teacher associations, Ministry of Health, etc.) to demand that the necessary arrangements are made for future operation and management services for institutions such as schools and health facilities. Due attention is paid to the whole sanitation chain for institutions (e.g. schools, health facilities, etc.). This runs all the way from the initial proper design of systems to the costs of emptying pits/septic tanks.