

Core indicators

Required for all interventions using MPC

WASH

There are no WASH outcome indicators that should be systematically included in all MPC. The inclusion of WASH outcomes in a project including/utilizing MPC modality is conditional to:

1. the implementation of a market analysis prior to the project design showing that critical WASH market systems can respond adequately to an increased demand of WASH services and commodities;
2. the inclusion of WASH related costs in the MPC transfer value, based on the relevant MEB or other means of calculation;
3. the implementation of further types of interventions and modalities alongside the MPC as recommended during the response analysis and design phase to meet sector outcomes. The Global WASH Cluster recommends using MPC with a mix of other approaches such as local WASH market support, community engagement, capacity building, behavior change, direct service delivery, vouchers, labelled or conditional cash transfer where relevant;
4. the participation of relevant WASH technical human resources to support the management / coordination of all phases of the project (level of assessment, response analysis, design, implementation and monitoring);

If these conditions are met, one or several MPC-Contributing Indicators listed below should be included.

If these conditions are not met:

- the achievement of WASH indicators at outcome level cannot be assured at sector standards and no WASH outcome indicator should be included;
- the WASH indicators listed in the “MPC-Contributing Indicators” section below can still be used to monitor the situation (but not the project’s results) and take actions to improve the project’s design when necessary.

Core Qualitative Question

Strongly recommended for all interventions using MPC

N/A

MPC-Contributing Indicators

Required for all interventions in which the sector is reflected in the MEB, unless other indicators for that sector supersede them for a given program or response

WASH

Wherever the conditions listed in the *Core Indicators* are met, the following WASH outcome indicators can be included in the project’s monitoring framework, depending on the WASH subdomains included in the MPC transfer value. As stated above, all these indicators can also be used outside the project monitoring framework to monitor the situation only (and not the project’s results).

- If water supply related cost are included in the transfer value:

- Percentage of beneficiary households with adequate access to water for Drinking, Cooking, and Personal and Domestic Hygiene at agreed standards**1,2,3
- Percentage of beneficiary households possessing minimum list of WASH NFI in their household, following agreed standards, and with visible signs of use **4
- If sanitation related costs are included⁵ in the transfer value:
 - Percentage of beneficiary households with adequate access to a toilet at agreed standards **1,2,3
 - Percentage of men, women, boys and girls who last defecated in a toilet (or whose faeces was last disposed of in a safe manner)*6,7
- If hygiene related costs are included in the transfer value:
 - Percentage of beneficiary households possessing minimum list of WASH NFI in their household, following agreed standards, and with visible signs of use **1
 - Percentage of beneficiary households with a handwashing place⁸ identified including soap and water in their household, with visible sign of use. **

¹ Emergency WASH standards are usually set up by the Government or the National WASH cluster/sector coordination platform. If not, SPHERE standards can be applied.

² In some setting, water supply or sanitation related costs can be “hidden” in other costs (example: water cost included in the rent, in urban setting wastewater treatment is included in water bill), so water or sanitation expenditure would not necessarily appear as such in the transfer value; but this indicator can still be included if the three other conditions listed in the *Core Indicators* are met.

³ This indicator can be partly self-reported by beneficiaries, but survey enumerators should be properly trained in WASH monitoring to interpret beneficiaries’ answers. For example:

- when the standards are related to the quantity of water per person and per day, the survey enumerator should be able to calculate it based on the HH answers;
- when the standards include water quality, the survey enumerator should be able to assess the safety of the water that is used (for instance chlorination procedure in the HH water container);
- When the standards are on toilets, the survey enumerator must assess several characteristics associated to location, types, safety and dignity use...).

Therefore, depending on the standard, several questions should be asked to appraise if the conditions to fulfil the indicator are met or not. In addition to self-reporting, physical check is also required to properly measure this indicator and evaluate the public health risks.

⁴ This indicator is used as an additional indicator to assess water quality: in many cases water quality depends on the type of recipients used for transporting and storing water inside the HH.

⁵ In many cases, sanitation costs will be a large one-off initial cost (ex: build a latrine), with very few regular costs after that. In such cases this initial cost would need to be included only in the first cash transfers, or addressed through another modality than MPC.

⁶ Included as a mean to monitor more precisely sanitation related output (beside access).

⁷ Defecation related practices might vary a lot within the HH between children, adults, women and men. This indicator would therefore need to be broken down at least per age and when relevant by gender.

⁸ Handwashing place can be a handwashing facility (for example: tap with basin), a mobile handwashing device (jug and basin) or just a place where handwashing is practiced.

- Percentage of beneficiary men, women, boys and girls reporting washing hands with soap at critical times^{9,10,11}. *

Note on indicators' measurement

Above-listed WASH outcome indicators can only be measured using a mix of monitoring tools, including:

- Usual MPC Post Distribution Monitoring questionnaires, where questions on recent WASH related expenditures are included;
- KAP (Knowledge Attitude Practice) questionnaires;
- Physical check of household level WASH NFI or infrastructures (water recipient, handwashing place, household latrine);
- Physical check of community level WASH infrastructure (water point, water intake, water treatment plant, public latrine);
- Focus group discussion separated by gender and age.

Comparison between WASH-related expenditures and achievements of WASH-related standards can give some indications on the immediate effect of cash transfers, but it will be often difficult to measure precisely to which extend the achievement of WASH outcomes are related to the cash transfers only¹².

Context-Specific Indicators

Strongly recommended to gather one or more, based upon the priorities of affected people, the agency and the response

WASH

In some countries where MPC is implemented at scale, the MPC post distribution monitoring can include the measurement of the abandon of WASH-related negative coping strategies. This is particularly important in contexts where MPC is used as a first line response. The following indicators are given as example:

- Percentage of households using an unsafe water source because they cannot afford using a safer water source;
- Percentage of households practicing open defecation because they cannot afford paying for public latrine or building a latrine;
- Percentage of households who had to spend their savings to purchase basic WASH related goods such as water, hygiene items, baby items, etc...;
- Percentage of households who had to reduce essential WASH related basic needs expenditures such as hygiene items, water, baby items, etc...;

⁹ Handwashing practices might vary a lot within the HH between children, adults, women and men. This indicator would therefore need to be broken down per age and gender

¹⁰ "Critical times" should be defined by the national WASH cluster/sector coordination platform depending on context and target group (before eating, after defecation, before handling food, before feeding babies etc.)

¹¹ In general, this indicator is better collected through a KAP survey rather than a PDM questionnaire

¹² Reasons for lack of access to WASH commodities or services are too numerous: distance, culture, social norms, quality of public water or sanitation services etc... It is advised to have additional opened/semi-opened questions in the PDM questionnaire, such as: "What improvements in water/sanitation/hygiene are directly linked to the cash received?", "If your access to water/sanitation/hygiene is not according to standard, why is it so? (It is too far, I don't like the taste/design, It is too expensive, I have been prevented from accessing it, etc...)"

The monitoring of these indicators before and after successive rounds of MPC distribution can give an indication on whether WASH-related needs are satisfied at a very basic level – i.e. there are no negative coping strategies related to them. This is a very low level of WASH outcome, and such indicators are useful in some contexts only.

- An asterisk (*) indicates that quality is self-reported (i.e. quality is acceptable to the beneficiary). Reference to Sphere standards may be used in surveys, but objective measurement may not be possible or advisable.
- Two asterisks (**) indicates that, while also self-reported, a technical specialist should provide at least periodic checks on quality.