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USAID WESTERN KENYA SANITATION PROJECT (WKSP)

FY22 ANNUAL REPORT (FEBRUARY 16, 2022 – SEPTEMBER 30, 2022)

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ACRONYMS AND ABBREVIATIONS

ADWP	Annual Development Work Plan
AMREF	African Medical and Research Foundation (also known as Amref Health Africa)
AMLEP	Activity, Monitoring, Evaluation, and Learning Plan
APHRC	African Population and Health Research Consortium
ARO	RTI Regional Office
BOQ	Bill of Quantities
BCC	Behavior Change Communication
BDS	Business Development Services
CBO	Community Based Organization
CCN	Cooperation Cover Note
CEC	County Executive Committee
CHV	Community Health Volunteer
CIDP	County Integrated Development Plan
CGK	County Government of Kisumu
CLT	County Liaison Team
CLTS	Community-Led Total Sanitation
CoK	Constitution of Kenya
COP	Chief of Party
COR	Contracting Officer's Representative
CSIP	County Sanitation Investment Plan
CSO	civil society organization
DCOP	Deputy Chief of Party
DQA	Data Quality Assessment
EMMP	Environmental Mitigation and Monitoring Plan
EOI	Expression of Interest
FSM	fecal sludge management
GIZ	German Agency for International Cooperation
GLUK	Great Lakes University of Kisumu
GOK	Government of Kenya
GSF	Global Sanitation Fund
GUC	Grants Under Contract
GYESI	Gender, Youth, Equity, and Social Inclusion
IEE	Initial Environmental Examination
IRB	Institutional Review Board
J2SR	Journey to Self-Reliance
JD	job description

K-SHIP	Kenya Sanitation and Hygiene Improvement Programme
KEA	Kenya and East Africa
KEPSA	Kenya Private Sector Alliance
KII	Key Informant Interview
KIWASCO	Kisumu Water and Sanitation Company Limited
KNCCI	Kenya National Chamber of Commerce and Industry
KWAHO	Kenya Water for Health Organization
LOA	Letter of Authorization
Lol	Letters of Intent
LREB	Lake Region Economic Bloc
M&E	monitoring and evaluation
MBS	market-based sanitation
MHM	menstrual hygiene management
MOH	Ministry of Health
MoU	Memorandum of Understanding
MP	Member of Parliament
NACOSTI	National Council for Science, Technology, and Innovation
NEMA	National Environment Management Authority
NGO	non-governmental organization
OD	open defecation
ODF	open defecation free
PEA	political economy analysis
PHO	public health officers
PLWD	persons living with disabilities
PMU	project management unit
PPP	Public Private Partnerships
PSE	Private Sector Engagement
PSI	Population Services International
R&D	research and development
RLC	Regional Learning Centre
RTI	RTI International (registered trademark and trade name of Research Triangle Institute)
S&H	sanitation and hygiene
SACCO	Savings and Credit Co-operative Society
SAF	strategic activities fund
SBCC	Social and Behavior Change Communication
SC	Steering Committee

SDG	Sustainable Development Goals
SGBV	sexual and gender-based violence
SMSE	small and medium-sized enterprises
SO	Sub-Objective
SOP	standard operating procedure
STADA	Stawisha Dada organization
STTA	short-term technical assistance
SWAP	Safe Water and Aids Project
TVET	technical and vocational education and training institutions
TOC	Theory of Change
TOR	Terms of Reference
TOT	Training of Trainers
TWG	technical working group
UNICEF	United Nation’s Children Fund
USAID	United States Agency for International Development
USG	U.S. Government
WASH	water, sanitation, and hygiene
WASHPaLS	Water, Sanitations, and Hygiene Partnerships and Learning for Sustainability
WASREB	Water Services Regulatory Board
WKSP	Western Kenya Sanitation Project
WP	work plan
WRA	Water Resources Authority
WSP	water service providers
WSTF	Water Sector Trust Fund
YALI	Young African Leaders Initiative

EXECUTIVE SUMMARY

To help county governments improve their sanitation and menstrual hygiene management (MHM), per Government of Kenya frameworks, the United States Agency for International Development/Kenya and East Africa (USAID/KEA) has launched the Western Kenya Sanitation Project (USAID WKSP). USAID WKSP is a five-year project that engages multiple stakeholders in eight western Kenya counties - Bungoma, Busia, Homa Bay, Kisii, Kisumu, Kakamega, Migori and Siaya - to create a financially sustainable, transformative, replicable, and locally owned sanitation and MHM marketplace that goes beyond (and supplements) the traditional “Do-It-Yourself” model promoted through the community-led total sanitation (CLTS) approach. The objectives of USAID WKSP are: (1) increased access to and uptake of market-based, improved sanitation and fecal sludge management (FSM) products and services; and (2) increased access to and uptake of market-based, improved MHM products and services at the household level. USAID WKSP works towards these objectives through four sub-objectives:

- Sub-Objective 1 (SO1): Analyze the market system, the target market, and the business enabling environment for sanitation and hygiene (S&H)
- Sub-Objective 2 (SO2): Identify, implement, and scale pilots to strengthen the sanitation market system
- Sub-Objective 3 (SO3): Identify, implement, and scale pilots to strengthen the market for MHM products
- Sub-Objective 4 (SO4): Strengthen the enabling environment

This report presents the FY22 (or Year 1/Y1) Annual Report for USAID WKSP, detailing project activities, accomplishments, challenges, and mitigation actions for the reporting period of February 16 – September 30, 2022.

For the project, Y1 represented a transition period, as USAID WKSP moved from start-up in Q2-3 to operational mode in Q4. Start-up activities covered staff recruitment and onboarding, procurement of essential office and work infrastructure, and overall team coordination. The project completed initial contractual deliverables, such as the Y1 Work Plan; Activity Monitoring, Evaluation, and Learning Plan (AMELP); Grants Under Contract (GUC) Manual; and two quarterly reports (Q2 and Q3). In parallel, the project launched critical technical activities that prioritized county-level stakeholder coordination and collaboration. These included outreach and co-creation activities with county governments; engagement of various private sector stakeholders at multiple levels (from fundis to the Lake Regional Economic Board/LREB); coordination with national government agencies and USAID/KEA sister projects; implementation of stakeholder political economy analyses (PEAs); and initiation of various baseline assessments.

The following summarizes key USAID WKSP activities in Y1, starting with cross-cutting stakeholder coordination and collaboration and followed by specific tasks under each project sub-objective.

STAKEHOLDER COORDINATION AND COLLABORATION

County inception meetings. USAID WKSP introduced the project to key county stakeholders, initiating assessments of the sanitation and MHM landscape in each of the target counties and establishing a shared vision of expanding access to sanitation and MHM services. Eight county

inception meetings were held across target counties to further facilitate creation of a conducive environment for collaboration and partnership. Key county stakeholders from the departments of health, water, environment and climate change, economic planning, gender and education were represented at these meetings. Other participants included development partners, entrepreneurs, water and sanitation services providers, and private sector players. The inception meetings took place during the county annual work plan development period, May-June 2022. USAID WKSP and stakeholders used this opportunity to lobby for increased resource allocation for sanitation and MHM.

County co-creation and planning process. USAID WKSP conducted joint planning workshops with county departments and water and sanitation service providers. The process in the 8 counties pieced together county priorities in MHM and sanitation service provision, as spelled out in county integrated development plans (CIDPs), county annual work plans, and USAID WKSP priority areas. These documents informed the criteria for identifying areas for joint intervention, including activities prioritized by the respective county government's annual development plan 2022/2023 with a budgetary allocation. Other criteria for joint intervention include quick-win activities that required low-cost investment for maximum output. All these factors, put into consideration, led to the development of a costed, county-specific list of interventions.

Lake Region Economic Bloc (LREB) co-creation process. USAID WKSP conducted a co-creation process with LREB, which provided an opportunity for the project to identify areas of complementarity with the regional body in four key areas: (1) strengthening policy and regulatory frameworks, (2) enhancing coordination and planning among USAID WKSP counties, (3) strengthening inter-county monitoring and evaluation for WASH, and (4) increasing financing to the sanitation and hygiene sector. This partnership will advance the call for increased allocation of resources among LREB counties through the regional platform, which aims to attract increased opportunities and investment in the region through private sector participation.

Signing of joint workplans. The co-creation process aimed to strengthen the USAID Local Systems Framework by instilling sustainability principles, to ensure that sanitation and MHM activities are county owned and county led. This process culminated in the signing of joint work plans with Bungoma County and LREB. In Bungoma, the signing process was led by the Chief Officer Health, [REDACTED], accompanied by the County Director of Public Health and Sanitation; County Gender Officer, Nzoia Water and Sanitation Company; and representatives from the education department who witnessed the signing. The Chief Executive Officer, [REDACTED], led the LREB delegation and committed to working with USAID WKSP to enhance private sector participation in sanitation and MHM and improve the socioeconomic status of residents in the region.

County Integrated Development Planning (CIDP III) Meetings. USAID WKSP supported and participated in CIDP III planning meetings in Kisumu County. The objective of the meetings was to engage county government departments in the planning, financing, and implementation of sanitation and MHM activities that should be prioritized in the next CIDP. County government departments were represented by their respective directors (from public health and sanitation sectors and planning), chief officers (from water, environment, and climate change sectors), and directors of Technical Vocational Education Training (TVET). These meetings also involved water service providers and other key WASH partners in the counties. Following review of the CIDP II to identify gaps, access to urban and rural water, urban and rural sanitation, and MHM services and products emerged as priorities, and the county intends to adopt a market-based approach over the next five years to improve its sanitation and MHM situation. The CIDP is a plan prepared by all

counties to guide development over a five-year period integrating long-term spatial, sector and urban plans with inputs from the Governors’ manifesto, national government plans and programs, past county development performance, and the views and expectations of other development actors and the public at large.

WASH Stakeholders Forum. USAID WKSP participated in a quarterly WASH stakeholders forum in Bungoma County. The meeting was supported by AMREF Health Africa, and included representatives from USAID WKSP, Ace Africa, Save the Children, Vestergaard, Evidence Action, and Red Cross. USAID WKSP used this opportunity to share project interventions on the market-based approach to MHM and sanitation. Access to improved sanitation in the county currently stands at 49 percent. The County Department of Health and Department of Water, Environment and Climate Change committed to strengthening the sanitation and MHM agenda through allocation of resources and joint lobbying for prioritization of these areas.

Health Stakeholders Forum targeting new county leadership. Following the transition of county government leadership in Homabay County, USAID WKSP supported a health stakeholders forum chaired by Her Excellency, Governor [REDACTED]. In attendance were the Chief Officer Health, Director Public Health and Sanitation, County Public Health Officer, and representatives from partners, academia, and the departments of water, environment, and climate change. USAID WKSP shared an overview of project interventions in the county, which elicited interest from the county leadership, given the focus on sanitation and MHM. Her Excellency, the Governor committed to support project interventions and echoed the importance of county-owned and county-led interventions to enhance the sustainability of interventions.

SUB-OBJECTIVE 1: ANALYZE THE MARKET SYSTEM, TARGET MARKET, AND BUSINESS ENABLING ENVIRONMENT FOR SANITATION AND HYGIENE

Political Economy Analysis (PEA). USAID WKSP performed a baseline applied PEA to undercover challenges, opportunities, barriers, and feasible actions to improve sanitation and MHM in its target counties. The PEA topic was “Why are county governments not effectively engaging the private sector in sanitation and hygiene budget discussions?” USAID WKSP held discussions with 30 stakeholders from government, private sector, and civil society organizations. The PEA findings show that private sector actors do not actively participate in budget public participation processes, but opportunities exist for new governments to change the narrative. USAID WKSP proposed to work with county governments to enhance county engagement with the private sector by developing a key stakeholder map for each target county and further embedding private sector participation plans on ways to increase inclusive support to sanitation and MHM. The final PEA was submitted to USAID for review and approval.

Baseline assessments. USAID WKSP started a comprehensive market system analysis to identify gaps, discern potential customers, and map service and business development providers in sanitation and MHM, to enable the project to better target resources and develop relevant R&D activities. In addition, USAID WKSP will conduct an enabling environment review to identify county-level gaps that impede access to market-based sanitation and MHM products and services. This review will involve analyzing CIDPs and annual development plans and determining effective regulatory frameworks, minimum service standards, and policies on business/enterprise friendliness, access to finance, customer protection, and other areas. The project applied for ethical and scientific clearance from AMREF’s Institutional Review Board (IRB) and the National Council for Science, Technology, and Innovation (NACOSTI), and was still awaiting approvals by the end of the reporting period.

SUB-OBJECTIVE 2: IDENTIFY, IMPLEMENT, AND SCALE PILOTS TO STRENGTHEN THE SANITATION MARKET SYSTEM

Stakeholder mapping. To leverage on existing market-based interventions in respective counties, USAID WKSP undertook a stakeholder-mapping exercise to identify key actors that will support catalytic interventions in year one. The project identified 845 artisans and 246 enterprises as potential participants in the sanitation and MHM market space. In addition, to institutionalize market-based interventions through local entities and continue growing the market, the project further identified eight technical vocational educational institutions (TVETs). These institutions will play a key role in building the capacity of small-scale service providers to adapt, improve, and expand their current operations and practices.

Coordination mechanisms for market-based sanitation. To promote effective implementation and coordination of USAID WKSP interventions, the project supported planning meetings in target counties. The objective of the meetings was to select sub-counties of operation and further develop quarterly implementation plans with implementing sub-county officers. County public health management teams, water sanitation service providers, and sub-county public health officers (PHOs) actively participated in the meetings. The selection of sub-counties of operation was based on (1) potential for market-based interventions, (2) status of urban sanitation with respect to safely managed sanitation services provision, and (3) locations where MBS has potential based on existing sanitation and MHM enterprises.

Capacity building. USAID WKSP focused on motivating promising entrepreneurs to enter the sanitation marketplace. As part of the project's goal to build the technical capacity of fundis in offering high-quality and varied products and services to different segments of consumers in respective counties, USAID WKSP conducted a five-day Trainer of Trainers (TOT) workshop at the Rotary TVET in Kisumu from July 11-15, 2022. Participants (25 men and 5 women) included masons, PHOs, community health volunteers (CHVs), and the TVET instructors. This training aimed to strengthen sanitation product/service system offerings by enhancing the technical skills of artisans in developing sanitation infrastructure and helping them diversify their product offerings. Through this training, WKSP introduced the plastic slab, pre-cast split rectangular slab with SATO mold, pre-cast circular slab with SATO, pre-cast circular slab with bamboo

FIGURE 1. USAID WKSP AND LAKE REGIONAL ECONOMIC BLOC



LREB CEO [REDACTED] exchanges signed Letter of Intent with USAID WKSP COP [REDACTED] to facilitate greater private sector engagement in the sector

FIGURE 2. MASONS



Practical session and innovative approach at the masons training in Kisumu on reinforcing round pre-cast toilet slab using local materials

reinforcement and lid, and pre-cast inverted slab with SATO, as shown in Figure 2. Slab cost ranges between KES 2000-3000, depending on the SATO product installed.

Through preliminary discussions with masons, TVET instructors, PHOs and consumers, USAID WKSP identified five sanitation products for promotion in target counties. These products were selected based on demand, replicability, and compatibility with existing sanitation systems. They include SATO products (SATO pan, SATO stool, SATO flex and Aim slab), precast SATO retrofitting slabs, WKSP full latrine solution, full SAFI latrine, and SAFI rings. As a follow-up to the TOT, USAID WKSP conducted local mason trainings in Kisumu and Migori counties to enhance their capacities and technical skills on the construction of improved sanitation technologies and products. 54 masons, 45 PHOs, six TVET instructors 6 CHVs benefitted from the training. As a result, 118 people also gained access to basic sanitation across the two counties, through installation of SATO products to existing latrines by trained masons.

To expand the reach of initial sales and marketing activities and create demand for USAID WKSP promoted products at the community and household level, 31 (24 male, 7 female) PHOs from Kisumu and 43 (35 male, 8 female) PHOs from Migori were inducted into the USAID WKSP approach to MBS. This provided them with an in-depth understanding of the approach and the envisioned role of county governments, enterprises, entrepreneurs, and private sector actors in the marketplace.

Customer reach study. USAID WKSP conducted a sales and marketing discovery activity from August 22-September 1, 2022) to understand the strengths, opportunities, and restraints in the region that could affect the project's access targets. The findings indicated that there is no universally recognized toilet standard in the marketplace. In addition, however well organized the government may be and whatever the amount of training it has already received on promoting sanitation products, this will not necessarily translate into sales. There is a need for cooperation, by which masons partner with hardware owners and CHVs to create a value-added customer experience.

SUB-OBJECTIVE 3: IDENTIFY, IMPLEMENT, AND SCALE PILOTS TO STRENGTHEN THE MARKET FOR MHM PRODUCTS

MHM Barriers and Enablers Assessment. USAID WKSP will undertake a study to understand the MHM landscape in the eight counties. The study will assess access to menstrual products, preferred menstrual products, gaps in the menstrual products supply chain, access to menstrual waste disposal, sanitation and washing facilities and services, access to information on menstruation and MHM, male involvement in MHM, and social norms and how they influence menstrual experiences. The study will also identify myths and taboos around menstruation, bottlenecks in private sector engagement in MHM, and the political, economic, legal and regulatory environment and how it affects MHM programming in the 8 counties. WKSP has hired a consultancy firm to carry out the study. The study received approval from the AMREF Ethics and Review Board, and preliminary results are expected by the end of November 2022.

Establishment of MHM Steering Committees. The GoK National MHM Policy 2019–2030 recommends establishment of a multisectoral body to coordinate MHM in various counties (or “MHM Task Force”). Since the term “task force” implies a short-term function, and since MHM is congruent across various sectors (in addition to sanitation), USAID WKSP has committed to refocus its support for counties to set up longer-lasting MHM Steering Committees. USAID WKSP developed a generic Terms of Reference (ToR) to guide the eight target counties of Migori, Homa Bay, Kisii, Kisumu, Siaya, Bungoma, Kakamega and Busia in forming their respective County MHM

Steering Committees. The ToR development process entailed bilateral discussions with counties on whom to include, roles and responsibilities, and day-to-day running of the committees. The policy recommends that the MHM Steering Committees be co-chaired by the department of public health/environmental health and the department of gender. USAID WKSP facilitated the establishment of three MHM steering committees in Homabay, Migori and Kisii counties.

MHM advocacy and outreach. USAID WKSP commemorated National MHM Day by preparing materials aired on Kenya's Ramogi radio station. The project reached 37,229 people with information on menstrual hygiene, across Siaya, Kisumu, Homabay, Migori, and Nairobi counties. In addition, USAID WKSP organized a webinar in July 2022 to take stock of achievements and advances in the implementation of the national MHM Policy. The presentations focused on lessons learned and opportunities partners can leverage to support the government in policy implementation. The webinar drew speakers from the Ministry of Health in Kenya, USAID/KEA and the African Coalition on Menstrual Health, and was attended by a total of 284 participants. This webinar also heralded the official inauguration of Kenya's MHM Community of Practice, which will be holding sessions on MHM every quarter.

SUB-OBJECTIVE 4: STRENGTHEN THE ENABLING ENVIRONMENT

Private sector engagement. To catalyze private sector participation and investment in market-based sanitation and MHM, USAID WKSP held a workshop for delegates from county governments, private sector, entrepreneurs, innovators, and donors on September 26-27, 2022. This workshop sought to (1) create an opportunity for key actors to understand entrepreneurs' perceived barriers and risks in engaging in sanitation and MHM businesses, (2) strengthen and/or initiate dialogue between counties and the private sector, to enhance access to improved sanitation and menstrual hygiene in target counties, and (3) establish and build stronger partnerships between USAID WKSP, the private sector, and county governments toward improved sanitation and MHM. The workshop was attended by over 200 delegates from county governments, LREB leadership, the private sector (represented by the Kenya National Chamber of Commerce and Industry (KNCCI) and Kenya Private Sector Alliance (KEPSA)) and other non-state actors, including CBOs and civil society organizations (CSOs) in the sanitation and MHM space. Key action points were generated for LREB, county governments, KNCCI, and partners.

Figure 3 below shows the USAID WKSP highlights for Y1.

FIGURE 3. USAID WKSP HIGHLIGHTS



MANAGEMENT AND OPERATIONS

During the reporting period, USAID WKSP operations focused on startup in Q2-3 and on setting the foundation for stakeholder collaboration and coordination approaches in Q3-4 that will subsequently facilitate partnerships, assessments, public/private stakeholder engagement and learning. At startup, USAID WKSP ensured that all key staff were recruited, submitted all key deliverables (such as the GUC Manual), and implemented administrative and financial startup requirements. For example, USAID WKSP completed the recruitment and onboarding of 27 staff, 14 of whom began work in Q4. All staff completed training workshops on critical operational and compliance requirements. By early Q4, USAID WKSP had concluded most startup activities with the opening of the Kisumu office in July 2022. Procurement of initial startup equipment and onboarding of the research and development (R&D) lead was completed by the end of Y1. Additionally, the project successfully negotiated office spaces for its county teams embedded in county governments. The Bungoma, Busia, Kakamega and Migori county governments started setting up these offices in Q4. The project is currently negotiating with Kisii and Siaya county governments for office space and estimates that all county offices will be up and running in Q1 Y2. Meanwhile, together with USAID and GoK, USAID WKSP participated in monitoring, evaluation, and learning (MEL) and planning workshops to develop the first- and second-year work plan. The team produced results expected for the eight targeted counties, work plans for Y1 and Y2 (FY23), the Environmental Mitigation and Monitoring Plan (EMMP), and the MEL plan. These deliverables were submitted to USAID on schedule for review and approval.

PROJECT OVERVIEW

The Government of Kenya (GoK) faces the dual challenges of providing access to basic sanitation, available to 30 percent of the population in 2017, and menstrual hygiene management (MHM) services, given that 65 percent of women and girls cannot afford sanitary pads and have no access to adequate disposal facilities. In line with its goal to achieve 100 percent open-defecation-free (ODF) status by 2030 and to provide citizens with a clean and secure environment (per the GoK Vision 2030 agenda), the GoK is working to establish policies on environmental sanitation, hygiene, and MHM by setting frameworks for county governments to legislate and invest in these areas (including market-based solutions). The GoK has also initiated the ODF Rural Kenya Campaign, adopting Community-Led Total Sanitation (CLTS) as the core strategy to advance sanitation service delivery.

To help county governments improve their sanitation and MHM, per GoK frameworks, USAID/KEA launched USAID WKSP, a five-year program that engages multiple stakeholders in eight western Kenya counties to create a financially sustainable, transformative, replicable, and locally owned sanitation and MHM marketplace that goes beyond (and supplements) the traditional “Do-It-Yourself” model promoted through the CLTS approach. In USAID WKSP’s approach, customers can easily find and procure the products and services they need, and enterprises are motivated to improve their products and services and invest in marketing and sales.

The objectives of USAID WKSP are: (1) increased access to and uptake of market-based, improved sanitation and fecal sludge management (FSM) products and services; and (2) increased access to and uptake of market-based, improved MHM products and services at the household level. USAID WKSP works towards these objectives through four sub-objectives:

- Sub-Objective 1 (SO1): Analyze the market system, the target market, and the business enabling environment for sanitation and hygiene (S&H)
- Sub-Objective 2 (SO2): Identify, implement, and scale pilots to strengthen the sanitation market system
- Sub-Objective 3 (SO3): Identify, implement, and scale pilots to strengthen the market for MHM products
- Sub-Objective 4 (SO4): Strengthen the enabling environment

PHASED IMPLEMENTATION

USAID WKSP, in consultation with project counties, identified pilot sub-counties as part of the phased implementation in the eight target counties, to allow for quality outputs and balanced resource allocation. The project initiated this phased implementation with MBS and MHM activities, as described in subsequent sections of this report. This configuration uses a combination of datasets to determine market readiness of the selected MBS sites in each of the target counties, including OD rate, poverty level (HDI), population density, availability (or lack) of MBS implementers, and active sanitation and MHM enterprises in specified sub-counties – all of which are essential elements to understanding the barriers and drivers to safely managed sanitation and hygiene within the market-based approach. The phased approach adopted by USAID WKSP is as follows:

Phase One (May 2022 onwards): Two counties were selected for initial targets: **Busia**, in the sub-counties of **Matayos**, **Butula**, and **Samia** (urban, low HDI, high density, low OD), and **Homabay**, in the sub-counties of **Rangwe** and **Rachuonyo North** (rural, low HDI, low density, high OD). This

provides a blend of urban–rural settings to allow for research and development and validation of appropriate interventions related to pilot services, products, and approaches. Phase One began in mid-Q3, overlapping into Phase Two.

Phase Two (July 2022 onwards): This phase began two months after kickoff of Phase One, and features counties with a blend of rural, urban, and peri-urban populations, including **Siaya**, in the sub-counties of **Ugunja** and **Gem** (rural, low HDI, low population density and high OD), **Migori**, in the sub-counties of **Awendo**, **Kuria East**, and **Suna East** (peri-urban, high HDI, low density, high OD), and **Kakamega**, in the sub-counties of **Khwisero**, **Matungi**, and **Lurambi** (urban, high HDI, high density, low OD).

Phase Three (September 2022 onwards): The third phase began four months after the start of Phase One in an overlapping and complementary approach. This phase involves the last three counties: **Bungoma**, in the sub-counties of **Tongaren** and **Kanduyi** (peri-urban, high HDI, low OD), **Kisii** in the sub-counties of **Mugirango South**, **Nyaribabe Masaba**, and **Nyaribari Chache** (peri-urban, high HDI, high density, low OD), and **Kisumu**, in the sub-counties of **Kisumu West** and **Nyando** (urban, high HDI, high density, low OD).

OVERARCHING MILESTONES

The following lists the overarching milestones in Y1:

SUB-OBJECTIVE 1: ANALYZE THE MARKET SYSTEM, TARGET SYSTEM, AND BUSINESS ENABLING ENVIRONMENT FOR SANITATION AND HYGIENE

- Conducted a PEA that involved key persons in the county public health department. The analysis revealed an opportunity to support private sector involvement in sanitation and MHM through new leadership currently in place. Moving forward, the report will highlight key areas for follow-up with regards to roles and responsibilities for key actors in enhancing private sector actor participation. These activities have been captured in the year two work plan and include technical support in the development of CIDP III and private sector engagement through regional and county forums.
- Prepared and set up six baseline assessments focusing on MHM, household sanitation and market sizing, supply chain, strategic sanitation and hygiene investment, scoping of financial institutions and sanitation companies for sanitation and hygiene financing, and enabling environment for sanitation and hygiene services delivery. This led to a comprehensive understanding of the sanitation market system to identify gaps, discern potential customers, and map BDS providers for both MHM and sanitation to enable the project to better target resources and develop relevant R&D activities.
- Held introductory meetings in all eight counties with county health department representatives to share goals, methodology, and data-collection plans for the six baseline assessments and clarify their content. This led to county ownership and understanding of the objectives of the baseline assessments.

SUB-OBJECTIVE 2: IDENTIFY, IMPLEMENT, AND SCALE PILOTS TO STRENGTHEN THE SANITATION MARKET

- Held eight sub-county implementation planning meetings in respective counties to discuss the preparation of joint implementation plans. This led to coordinated implementation of sanitation interventions in the target counties.
- 289 people (166 female, 123 male) accessed basic sanitation in Migori, Kisumu, Bungoma and Kisii counties through construction and installation of sanitation products as a result of USAID WKSP project interventions. These 289 people accessed basic sanitation through either retrofitting of latrines or installation of new latrines through the use of sato products.
- Conducted TOT for 17 masons, 13 PHOs, one CHV, one technical and one vocational instructor on six new sanitation products. These led to enhanced skills among participants on construction of improved and affordable sanitation products.
- Trained 64 masons and 45 PHOs on improved sanitation technologies, including construction of the full toilet solution in Migori and Kisumu counties. The trained masons applied their skills through construction and installation of sanitation products in their communities in the target counties of Kisumu and Migori.

- Trained 74 PHOs in Migori and Kisumu counties on MBS approaches, who later provided technical support to artisans post-training to ensure quality control of sanitation products being constructed or installed within their respective counties.
- Conducted a sales and marketing scoping to understand strengths and weaknesses in MBS, via 64 interviews across three counties of Kisii, Kisumu and Busia.
- Conducted planning meetings with five water and sanitation service providers (BUWASCO, KIWASCO, HOMAWASCO, GUWASCO and KAKWASCO) to identify gaps and opportunities and jointly plan USAID WKSP support to enhance access to safely managed sanitation services.

SUB-OBJECTIVE 3: IDENTIFY, IMPLEMENT, AND SCALE PILOTS TO STRENGTHEN THE MARKET FOR MHM PRODUCTS

- Facilitated the establishment of MHM Steering Committees in three counties (Migori, Homabay and Kisii). The process entailed formulation, review, and validation of ToRs for the committees. Busia, Bungoma, Kisii and Siaya County have formed MHM steering committees that await validation of the ToR and approval of selected committee members by respective health department leaderships. Once validated and approved, the MHM committees will be considered established. Establishment of steering committees is a process that requires domestication of national guidelines to be adopted at the county level, and development of ToRs to guide the operations of the committees. Establishment of similar committees in the remaining counties is planned for the subsequent implementation period, in accordance with the project work plan.
- On international MHM day, May 28, 2022, provided 37,229 people with information on menstrual hygiene across Siaya, Kisumu, Homabay, Migori, and Nairobi counties through Ramogi Radio Station. This data cannot be disaggregated, as it represents total radio listenership during USAID WKSP's MHM campaign.

SUB-OBJECTIVE 4: STRENGTHEN THE ENABLING ENVIRONMENT

- Conducted eight inception meetings with key stakeholders (including county departments of health, water, education, gender, water service providers, and partners LREB, UNICEF, Practical Action, CARE-K, North Gem CBO among others) in eight target counties, to establish a shared vision of expanding access to sanitation and MHM services.
- Co-created workplans in all eight counties, with participation from the departments of health, water, environment and climate change, education, and gender, as well as respective water sanitation service providers.
- Signed joint work plans with the county government leadership of Bungoma and LREB.
- Participated in two stakeholder WASH forums in Kisumu County to discuss the WASH agenda for CIDP III.
- Participated in a WASH forum in Bungoma county, organized by AMREF Health Africa. The forum provided an opportunity for USAID WKSP and its partners to lobby for prioritization of sanitation and MHM in the county. This meeting led the county government, through the

department of health, to commit to allocate resources to sanitation and MHM in the CIDP and subsequent annual development plans

- In Homa Bay county, supported a health stakeholders forum chaired by Governor [REDACTED], with 122 participants from county government departments and partners.
- In partnership with KNCCI and LREB, successfully organized a two-day private sector workshop with over 200 participants, with an investment workshop that brought together county government representatives and private sector players to discuss opportunities for investment in sanitation and MHM services.

FY22 PERFORMANCE DATA TABLE

Table I shows USAID WKSP's performance data in YI. However, the targets set were subject to revisions following completion of the baseline assessments in early Y2 and the revision of the AMELP submitted during start-up. Meanwhile, the project achieved other important activities reflected in the table below and the Overarching Milestones section.

TABLE I. USAID WKSP INDICATIVE PERFORMANCE MONITORING RESULTS FOR FY22 (YI)						
#	PERFORMANCE INDICATOR	BASELINE	YI TARGET	YI ACHIEVEMENTS	% ACHIEVED YI TARGETS	COMMENTS
GOAL INDICATORS						
G1	Number of people gaining access to safely managed sanitation services as a result of U.S. Government (USG) assistance (HL 8.2-3)	TBD	0	0	N/A	Baseline value of this indicator will be established following the completion of baseline assessment. This indicator is not due ready for reporting in YI as no target was set considering start-up preliminary activities/interventions.
G2	Number of people gaining access to basic sanitation services as a results of U.S. Government (USG) assistance (HL 8.2-2)	TBD	0	289	N/A	Baseline value of this indicator will be established following the completion of baseline assessment. While the project did not have a target for this indicator in YI, it reached 289 people (123 M and 166F) with access to basic sanitation as a result of the construction of 55 latrines in six counties (Migori, Kisumu, Kakamega, Bungoma, Homa Bay, Kisii) following the training of artisan/masons.
OBJECTIVE I: INCREASED ACCESS TO AND UPTAKE OF MARKET-BASED IMPROVED SANITATION AND FECAL SLUDGE MANAGEMENT (FSM) PRODUCTS AND SERVICES						
I.1	Number of new sanitation products offered by USAID WKSP-affiliated enterprises (custom)	TBD	4	2	25%	Baseline value of this indicator will be established following the completion of baseline assessment. However, following training of masons, two products were introduced into the market through USAID WKSP (pre-cast SATO retrofitted slabs and the full toilet solution).
I.2	Number of outlets stocking sanitation products	TBD	32	1	3%	In YI, the project conducted sanitation enterprise mapping and sensitization on sanitation products. The project will continue to work with enterprise identified to stock the sanitation products. Following the masons training, one outlet in Kisumu West is stocking SATO products.

1.3	Percentage change in sales of firms/enterprises receiving USG-funded assistance	TBD	0	NA	NA	This indicator is not due for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.
1.4	Number of sanitation products sold (custom)	TBD	50,000	NA	NA	This indicator is not due for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.
1.5	Number of sanitation services facilitated (custom)	TBD	50,000	NA	NA	This indicator is not due for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.
1.6	Percentage of supported enterprises that continue to deliver basic sanitation products and services after 12 months (custom)	TBD	16%	NA	NA	This indicator is not due for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.
1.7	Percent change in supported sanitation/MHM enterprise profits (custom)	TBD	10%	NA	NA	This indicator is not due for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. This indicator will be reported in Y2 as data on barriers and enablers on sanitation and MHM will be used to determine the value of baseline.
OBJECTIVE 2: INCREASED ACCESS TO AND UPTAKE OF MARKET-BASED IMPROVED MENSTRUAL HYGIENE MANAGEMENT (MHM) PRODUCTS AND SERVICES AT THE HOUSEHOLD LEVEL						
2.1	Number of women/girls with improved MHM practices as a result of WKSP activities (custom)	TBD	53,000	NA	NA	While baseline value of this indicator will be established following the completion of baseline assessment, the project target was arrived at using one percent of the population of the Water Resources Authority (WRA) in the eight counties. USAID WKSP will conduct key SBCC activities after baseline data collection through the MHM enablers and barriers report to inform on improved MHM practices.

2.2	Number of people reached with information, education and communication campaigns designed to increase public awareness of MHM (custom)	TBD	201,917	37,229	N/A	While baseline value of this indicator will be established following the completion of baseline assessment, the project reached people after the rolling out of MHM events and webinar.
2.3	Percentage of women/girls reporting improved menstrual waste disposal options (custom)	TBD	0	N/A	N/A	This indicator is not due for reporting in YI as no target was set considering start-up and preliminary activities/interventions.
2.4	Number of new MHM products offered by USAID WKSP-affiliated enterprises (custom)	TBD	5	0	N/A	Baseline value of this indicator will be established following the completion of baseline assessment including the MHM enablers and barriers report.
SUB-OBJECTIVE 4: STRENGTHEN THE ENABLING ENVIRONMENT (SUPPORTS BOTH OBJECTIVE 1 AND 2)						
3.1	Number of water and sanitation sector institutions strengthened to manage water resources or improve water supply and sanitation services as a result of USG assistance (HL 8.3-3) *	40	16	16	100%	During the county implementation planning meetings, the county and sub-county public health departments and water service providers were sensitized on market-based sanitation and on the roles for each actor to support effective implementation of sanitation and MHM activities.
3.2	Value of new funding mobilized to the water and sanitation sectors as a result of USG assistance (HL 8.4-1)	TBD	NA	NA	N/A	This indicator is not due for reporting in YI as no target was set considering start-up and preliminary activities/interventions such as engaging the county governments and private sector players for support and inclusion of funding in the CIDPs, ADPs and AWP.
3.3	Number of pro-business county-level policies and regulations proposed, adopted, implemented (custom)	TBD	8	2	25%	While this indicator is not due for reporting in YI as no target was set considering start-up and preliminary activities/interventions, the project has proposed to support the domestication of the Environmental Health and Sanitation Policy and MHM policies in Kakamega, Migori, Homabay and Migori counties and two pro-business policies in Kakamega and Kisumu counties during WASH forum activities.
3.4	Number of USG engagements jointly undertaken with the private sector to achieve a U.S. foreign assistance objective (PSE-1)	0	8	8	100%	USAID WKSP is anticipated to initiate private sector engagement through its activities and is assuming baseline level at zero at YI. The project will however complete its baseline assessment to set anticipated life of project targets. In YI, the project coordinated and worked with private sector players through eight co-creation activities and the private sector engagement event in Q4 with LREB, KNCCI, and others.
4.1	Number of training courses/curricula developed for	0	4	2	50%	USAID WKSP is anticipated to conduct multiple training and is assuming baseline level at zero at YI. The project will

	sanitation and hygiene market employment or entrepreneurship (custom)					however complete its baseline assessment to set anticipated life of project targets. In Y1, the project developed training curricula on basic masonry for artisans/masons and on market-based sanitation for PHOs.
4.2	Number of women and youth engaged in sanitation and hygiene businesses (custom)	TBD	NA	NA	NA	This indicator is not due for reporting in Y1 as no target was set considering start-up and preliminary activities/interventions. Baseline value of this indicator will be established following the completion of baseline assessment that includes capacity evaluation of enterprises on several topics including women and youth involvement.
4.3	Number of women-led enterprises supported within the WASH sector (custom)*	TBD	NA	NA	NA	Baseline value of this indicator will be established following the completion of baseline assessment that includes a capacity assessment to understand the profiles of the enterprises and inform interventions on Business Development Services including women involvement.
4.4	Percentage of villages receiving direct promotional activities (custom)	TBD	30%	NA	NA	In Y1, USAID WKSP focused on foundational activities that included capacity building of masons, CHVs, PHOs, on improved sanitation activities and conducted sales and marketing discovery activities to inform subsequent promotional activities. The project will use baseline data to establish the values for baseline target and collect data at the village level once SBCC activities are rolled out.
4.5	Percent of customers satisfied with services/products (custom)	TBD	60%	NA	NA	This indicator requires that the project offers the services and products from partners before a survey is done to establish the perceived customer's satisfaction. The project will do customer satisfaction survey in Y2.

PROGRESS

This section summarizes USAID WKSP's implementation progress for Y1 in each of the four key sub-objectives. In Y1, USAID WKSP focused initially on start-up operations, including securing project personnel, procuring goods and services for the central office in Kisumu, preparing and submitting early deliverables per agreed timelines (e.g., work plan, grants manual), and engaging with key sector stakeholders to determine priorities and inform the project's planned activities. In parallel, the project conducted several situational evaluations, including a stakeholder PEA on the perception of improved sanitation and MHM, and developed and initiated baseline assessments on market conditions, MHM barriers and enablers, and other subjects. USAID WKSP also implemented strategic capacity-building activities and collaborated with the public and private sectors via multiple consultations and events, to identify opportunities for enabling better access and service provision in sanitation and MHM.

During Y1 implementation, USAID WKSP took account of the ongoing COVID-19 pandemic and countrywide elections, with operations support from RTI's office in Nairobi. USAID WKSP did not encounter any significant disruptions from either COVID-19 or political instability.

SUB-OBJECTIVE I: ANALYZE THE MARKET SYSTEM, TARGET SYSTEM, AND BUSINESS ENABLING ENVIRONMENT FOR SANITATION AND HYGIENE

In Y1, USAID WKSP initiated several activities to help understand the market ecosystem in its eight counties of operation, recognize local priorities, and identify opportunities for technical support and facilitation. These activities included stakeholder PEA and baseline assessments on the enabling environment, supply chains of products and services, and other topics, noted below.

Political Economy Analysis (PEA). USAID WKSP completed a baseline applied PEA to uncover challenges, opportunities, barriers, and feasible actions for improving sanitation and MHM. The process included an interactive skill-building workshop, supported by technical experts from RTI. Through this workshop, the project was able to develop and refine the USAID WKSP PEA topic, and selected *“Why are county governments not effectively engaging the private sector in sanitation and hygiene budget discussions?”*

To gather responses, the project held consultative discussions with 30 (26 male, 4 female) stakeholders from county governments, the private sector, and civil society organizations. Key issues included budget development, public participation, engagement of the private sector in sanitation policy and budget discussions, and opportunities to increase private sector engagement in sanitation and MHM policy and budget discussions. The workshop and discussions further identified key actions to address barriers and challenges and act on opportunities.

The PEA process revealed the critical barriers and success factors necessary for consideration and intervention in extending sanitation and MHM service levels across USAID WKSP target counties. The analysis noted that devolution is still nascent, roles and responsibilities at both levels of government continue to shift, and confusion is evident at times, especially in the sanitation and MHM space. The PEA further revealed that policies on sanitation and MHM exist at the national level, anchored on Vision 2030 and CoK 2010, providing guidance to counties to suit their specific contexts. Budgets and capacities, however, remain a challenge across all USAID WKSP counties. public health is not adequately resourced and is unable to influence and advocate for sanitation and MHM interventions. Sanitation and MHM are therefore not prioritized by the community/citizenry in the planning processes, owing to the high cost of living that naturally makes food security and direct

household income a priority. This is further aggravated by the fact that private sector and civil society engagement in planning and budget making processes remain lukewarm, depending on the goodwill of government operatives/convenors of meetings.

Sanitation and MHM also sit astride multiple ministries, including water, health, and education (and sometimes gender and social services for the latter), often with push and pull over roles and responsibilities. This institutional fragmentation, also evident at the county level, creates disconnects, duplicates budgets, and lowers overall funding for sanitation and MHM. The PEA further revealed that regulations and tariff structures in sanitation and MHM businesses are not clear, discouraging private sector players from investing in the sector. Higher costs of doing business with the government in sanitation and MHM are also an impediment, with safely managed sanitation the preserve of a few, owing to higher costs involved. Products and services are not inclusive and remain non-responsive to the unique needs of women and girls, persons living with disabilities (PLWD), and other vulnerable segments of the population.

The PEA also discerned increasing citizen demand for better service delivery (including sanitation and MHM) and accountability from the political class. However, weak civic education mechanisms on policies and regulations continue to mute community voices, claw back gains, and cloud the promise of new constitutional dispensation.

Table 2, below, includes more details about the PEA.

TABLE 2. PEA RESULTS

KEY CHALLENGES	KEY BARRIERS	KEY OPPORTUNITIES AND OUTCOMES	PRELIMINARY RECOMMENDED ACTIONS
<p>Sanitation and MHM are not prioritized in county planning processes managed by the department of finance, and economics and planning.</p> <p>County public health departments are not adequately funded, and hence not able to influence and advocate for sanitation and MHM.</p> <p>Private sector and civil society actors need to be “friends of the system” (those currently holding political office) to be invited and heard during public participation processes.</p> <p>Myths, taboos and stigmas are very strong around menstruation. It is a very difficult topic to discuss openly.</p>	<p>Water services are heavily influenced by politicians who state that water should be free during campaign processes. This messaging may spill over into sanitation and MHM services.</p> <p>Water and sanitation companies, and most stakeholders, prefer to focus on water, as sanitation is difficult to engage since it is “underground” and not visible to citizens/voters.</p> <p>Donors support water, but less so sanitation and MHM. This indirect messaging and prioritization cascades down to the county level.</p>	<p>There is a new Kenyan government, and it is anticipated there will be a significant turnover in Members of Parliament (MPs) and county assemblies due to term limits. Returning elected officials may bring in new cabinets that can be engaged by USAID WKSP. Both situations may open opportunities to influence new government stakeholders to increase support to sanitation and MHM.</p> <p>There is a huge gap in understanding and involvement of key stakeholders and communities during public participation processes.</p> <p>Sanitation and hygiene activities are underbudgeted during county budgeting processes yet are a major contributor to primary health care.</p> <p>There are capacity gaps in matters of sanitation and hygiene, especially among policy makers like ward administrators.</p>	<p>Build the capacity of county staff through sensitization sessions with elected officials about the importance of sanitation and MHM.</p> <p>Hold strategic meetings with stakeholders to plan for sanitation and MHM and share budget and work plans.</p> <p>Enhance county engagement with the private sector by developing a key stakeholder map for each target county, to enable engagement and embed into the project ways to increase inclusive support to sanitation and MHM.</p> <p>Develop inclusive implementation plans to engage and sensitize men and boys, and women and girls, to unpack and break the taboos related to speaking about and addressing MHM challenges.</p> <p>Conduct and support dialogue forums to understand issues and solutions for persons with disabilities and other disadvantaged populations who need special accommodations related to sanitation and MHM.</p> <p>Tap into private sector associations, such as the Kenya Private Sector Alliance, to approach and collaborate with government to more effectively engage the private sector in the budget process on sanitation and MHM.</p>

Baseline assessments and analysis. In Q4, USAID WKSP initiated a comprehensive market system analysis to identify gaps, discern potential customers, and map service and BDS providers to enable the project to better target resources and develop relevant R&D activities. The project also began an assessment of barriers and enablers of MHM practices at the household level across the eight target counties, including consultations with county governments on their successes and constraints in delivering MHM products.

The project applied for ethical and scientific clearance from AMREF’s Institutional Review Board (IRB) and the National Council for Science, Technology, and Innovation (NACOSTI).

These assessments, and progress in Y1, are detailed below in Table 3.

TABLE 3. PROGRESS OF BASELINE ASSESSMENTS	
TOPIC	PROGRESS AS OF Y1
Enabling environment for sanitation and hygiene services delivery: analysis and identification of gaps and opportunities in county level policy, regulations, plans (including County Integrated Development Plans) and organizational assessment of county governments with respect to roles/responsibilities and capacity-building needs in sanitation and MHM	Consultant identified Inception reports developed and Reviewed Application for ethical and scientific clearance conducted
Supply chain assessment for sanitation and hygiene, with a focus on landscape analysis of supply-side products, services, and partners in sanitation and MHM (including various service providers, delivery models, key players)	Consultant identified Inception reports developed and reviewed Application for ethical and scientific clearance conducted
MHM barriers and enablers at the household level, and a quantitative and qualitative assessment of factors essential to ensure adequate menstrual hygiene, sociocultural norms that affect and sustain menstrual-related challenges, products and services preferences of users, menstrual products supply and distributions channels, and willingness to pay for menstrual hygiene products	Consultant identified Inception reports developed and reviewed Application for ethical and scientific clearance conducted
Financial institutions and SACCOs for sanitation and hygiene financing to explore preparatory activities to establish county sanitation planning teams, which will be responsible for sanitation financing plans and scoping financial institutions active in sanitation and hygiene management for opportunities to partner	Consultant identified Inception reports developed and reviewed Application for ethical and scientific clearance conducted
Household Market Sizing and Segmentation Assessment for Sanitation and Hygiene: a quantitative household survey to identify customer segments and size, gender and equity disparities, and financing needs and barriers, and to capture the knowledge, attitudes, and practices of consumers towards sanitation and hygiene and further refine mapping information to augment the USAID SanPlan toolkit	Consultant identified Inception reports developed and reviewed Application for ethical and scientific clearance conducted
Strategic sanitation and hygiene investment assessment and analysis, aimed at developing comprehensive Countywide Strategic Sanitation Investment Plans for counties, which will include a prioritized investment plan indicating measures to be taken in the short, medium, and long term to improve access to safely managed sanitation	Consultant identified Inception reports developed and reviewed Application for ethical and scientific clearance conducted

USAID/WKSP conducted a competitive bidding process to engage specialized consultants to undertake the baseline assessments, and held consultative county consultant introductory meetings in all counties. During these briefings, the project introduced county government heads and leads of aligned departments to the assessment objectives, methodology (including data collection), and key targeted respondents. This activity allowed county stakeholders to seek clarification on the study's duration and their own roles.

SUB-OBJECTIVE 2: IDENTIFY, IMPLEMENT, AND SCALE PILOTS TO STRENGTHEN THE SANITATION MARKET

In Y1, USAID WKSP implemented foundational activities to strengthen the sanitation market by catalyzing product systems and delivery. These activities, as noted in the Y1 Work Plan, covered mapping of market players, collaboration with and capacity building of masons, initial engagement with TVETs, and early discussions around innovation and refined product offerings.

Stakeholder mapping. To facilitate the building of a strong and sustainable market, USAID WKSP conducted a stakeholder mapping exercise to identify existing market players key to the joint implementation of USAID WKSP activities. These include entrepreneurs, enterprises, community-based organizations, financial institutions, and private sector actors. The process was conducted in close collaboration with county public health departments and water sanitation service providers. 845 masons and 246 enterprises were identified as potential participants in the sanitation and MHM marketplace, as shown in Table 4, below. The selection criteria for masons were based on previous engagement with the public health department in the construction of improved sanitation products, and with water and sanitation service providers on urban sanitation service delivery. The sanitation enterprise selection was based on sanitation products sold or sanitation services offered by the enterprise. The mapping process entailed discussions with respective county public health departments to select respective actors; in addition, each county identified one local TVET institution to support building the capacity of small-scale service providers to adapt, improve, and expand current operations and practices. The process facilitated the development of a database by USAID WKSP and respective county governments to ensure effective coordination and implementation.

TABLE 4. STAKEHOLDER MAPPING RESULTS (FROM COUNTY GOVERNMENT DATA)			
COUNTY	NO. OF ARTISANS	NO. OF ENTERPRISES	TVET NAMES
Kisumu	25	12	Rotary Vocational Training Centre
Busia	101	18	AMASE
Kakamega	25	15	Kakamega County Polytechnic
Bungoma	4	7	Kisiwa
Siaya	379	99	Rera Polytechnic
Homabay	121	16	Homabay Polytechnic
Kisii	47	3	Keumbu
Migori	143	76	Kakrao
TOTAL	845	246	

County implementation planning. USAID WKSP conducted sub-county-level implementation planning meetings in the respective counties. This was preceded by the selection of target sub-counties by county health management teams. Selection of areas of implementation for USAID WKSP was based on the potential for market-based interventions and types of settlement. Urban/peri-urban sub-counties were identified as areas of implementation for activities on safely managed sanitation, while rural areas were selected for interventions on access to basic sanitation services. Following selection of these areas of operation, the project held consultative joint planning meetings with county and sub-county implementation teams to plan the achievement of project objectives. Participation across the 8 counties is shown in Table 5, below.

TABLE 5. COUNTY IMPLEMENTATION PLANNING MEETINGS			
COUNTY	MALE	FEMALE	TOTAL
Kisumu	26	14	40
Busia	27	18	45

Kakamega	13	13	26
Bungoma	11	4	15
Siaya	26	17	43
Homabay	18	3	21
Kisii	11	12	23
Migori	19	3	22
TOTAL	151	84	235

Sanitation product promotion. Based on preliminary expert observations on appropriate sanitation technologies and solutions, further informed by sales discovery scoping and stakeholder consultations, USAID WKSP identified, from a rapid technology scan, five sanitation products for promotion within target counties on an interim basis, pending the outcome of ongoing baseline assessments in the first quarter of Y2. The rapid scoping applied several parameters to produce a menu of interim technologies, including demand, replicability, and compatibility with existing sanitation systems. The rapid scoping further interrogated elements related to barriers and opportunities towards improved sanitation, such as cost analysis of each technology, potential cost savings during purchase and in the long run owing to low maintenance, longevity (life cycle costing), engineering feasibility, transportation analysis, and supply chain compared to other sanitation technologies.

The selected technologies include SATO products (SATO pan, SATO stool, SATO flex and aim slab), precast SATO retrofitting slabs, full latrine solution, full SAFI latrine, and SAFI rings. The interim promotion of these technologies ensured that the project retained its focus on sanitation targets, both basic and safely managed, parallel to the assessments. USAID WKSP will review this menu of technologies by the end of Q1/Y2 to align with baseline assessment findings and project trajectory, in terms of appropriate targeted solutions.

Key features of these products noted from the rapid scoping are described below:

Pre-cast SATO Retrofitting Slabs. The precast slabs cost KES 2,000 - 3,000, depending on the SATO product installed. Slabs are easier to install and compatible with SATO pan, SATO flex and SATO stool installation, and offer more value to masons compared to SATO installation/retrofitting alone. In addition, pre-cast slabs allow for better finishing, due to controlled pre-casting conditions.

Full Toilet Solution. USAID WASHpals assessments conducted in western Kenya indicate the availability of a range of sanitation products, including SATO, thereby enhancing access to basic sanitation. However, the main market for the full toilet solution is customers with existing cement slabs and stable pits, into which SATO pans can be easily installed. This only represents a small portion of the total market. Installing a SATO pan in a dirt or uneven wood floor requires additional skilled labor, which is often unreliable and expensive and requires transporting large volumes of heavy materials, such as cement, to rural areas.

USAID WKSP therefore introduced a full toilet solution that is both affordable and eases the installation process. Most importantly, the full toilet solution addresses issues of flooring/pit covering/slab and floor reinforcement and sealing, since it can be readily installed by unskilled workers, eliminating

FIGURE 4. FULL TOILET SANITATION MODEL



Full toilet solution introduced via the USAID WKSP uses precast slab and allows for customization

the need for additional installation services. The toilet has a provision for pit emptying and pit lining in areas with weak soil structure. The full toilet solution is fitted with a pre-cast split rectangular slab with SATO pan that allows for pit emptying, and is relatively easy to construct, with the ability to customize the superstructure, and adaptable for use in areas with collapsible soils using SAFI rings. SAFI rings were selected based on cost (KES 1,800- 2,200), strength, and durability to prevent collapse. Figure 4 depicts the full toilet solution.

SAFI latrine and rings. SAFI latrines provide permanent construction solutions to customers. They allow for pit emptying, are adaptable for use in areas with collapsible soils, and easily integrate with existing sanitation products on the market. The cost of the SAFI latrine is estimated at KES 40,000-50,000, depending on the superstructure material selected for use. SAFI rings are lighter compared to ordinary culvert, are cheap and easy to construct, and are strongly resistant to collapse.

Training-of-trainers on product manufacturing. USAID WKSP conducted a five-day TOT workshop for masons on the manufacture of sanitation products since masons play a critical role in Kenya's sanitation market and thus its potential for expansion. However, a key sanitation market challenge is proper installation and provision of improved sanitation systems, with adequate levels of quality at the right price point and based on customer needs and wants (especially for women and girls). USAID WKSP therefore supported the training of 32 people (17 masons, 13 public health officers, one community health volunteer, one rotary TVET instructor, and 7 WKSP staff) in Kisumu and Migori counties to produce more affordable and less labor-intensive sanitation products. Rotary TVET supported the TOT training with the production of molds for pre-cast slabs. In addition, the institution provided one staff member to co-facilitate the training sessions, especially on costing and preparation of Bills of Quantities (BOQs).

The TOT involved both classroom and field-based practical sessions. The classroom sessions covered the importance of sanitation, types of basic sanitation facilities, preparation of BOQs, and costing, among other topics. The practical sessions covered installation of SATO products on existing slabs, production of pre-cast split rectangular slabs with SATO molds, pre-cast circular slabs with SATO, pre-cast circular slabs with bamboo reinforcement and lids, and pre-cast inverted slabs with SATO. Slab costs range between KES 2000-3000, depending on the SATO product installed. Figure 5 shows the preparation of pre-cast circular slab reinforcement.

FIGURE 5. PRE-CAST CIRCULAR SLAB REINFORCEMENT

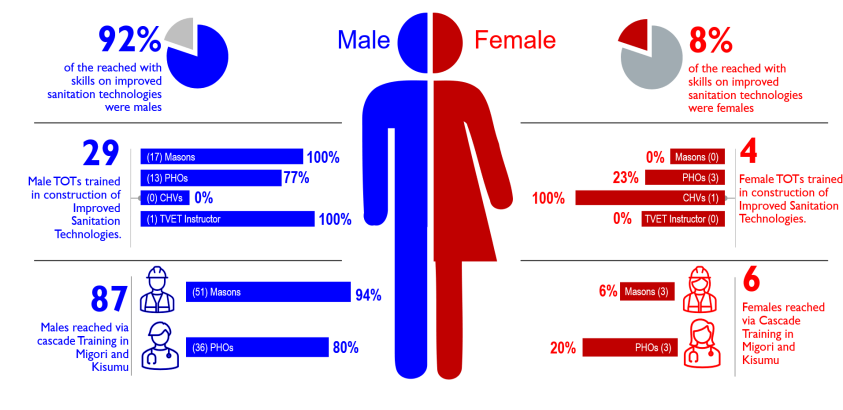


Practical session on preparation of pre-cast circular slab reinforcement and production of pre-cast circular slab with SATO

Masons training. Building on the TOT, USAID WKSP supported the training of an additional 54 masons, 45 PHOs, and six TVET instructors in Kisumu and Migori Counties. The trainings were facilitated by trained TOT masons, alongside trained PHOs and the TVET instructor. The training's objective was to improve masons' capacity to produce and deliver more affordable sanitation products. Topics covered included raw material selection and inventory, basic construction techniques and tools, production line management, mold design, quality control and assurance processes, and fiscal management. USAID WKSP collaborated

with local TVETs to deploy the practical training. The institutions supported the training with the production of molds for pre-cast slabs. In addition, the institution provided one staff member who co-facilitated the training sessions, especially on costing and preparation of BOQs. The practical sessions entailed construction of precast slabs, production of SAFI rings, and retrofitting of SATO products. Trainees were taken through installation of the pre-cast split rectangular slab as they constructed the full toilet solution, further gaining skills on pit lining using SAFI Rings. Figure 6 shows the distribution and characteristics of the TOT events.

FIGURE 6. USAID WKSP DISTRIBUTION AND CHARACTERISTICS OF TOT EVENTS



Public Health Officer (PHO) training. To expand the reach of initial sales and marketing activities and create demand for promoted products at the community and household levels, USAID WKSP trained 31 PHOs (24 male, 7 female) from Kisumu West, Nyando and Kisumu Central, and 43 PHOs (35 male, 8 female) from Suna East, Awendo and Kuria East in Migori, on the approach to market-based sanitation. This gave PHOs an in-depth understanding of the approaches and envisioned roles of departments of health, businesses, and USAID WKSP. The PHOs agreed to support the promotion and marketing of project-affiliated sanitation products and services in their respective sub-counties. The sessions also gave them a better understanding of the differences between CLTS and market-based sanitation approaches. Figure 7 shows artisans in Migori county attending a training session.

FIGURE 7. USAID WKSP ARTISAN TRAINING



Artisans in Migori county attending training to strengthen their sanitation services capabilities

Marketing support. In Q4, USAID WKSP engaged Whitten and Roy Partnership to carry out sales and marketing discovery activity in Kisii, Kisumu, and Busia. Activities included observation of sanitation products and facilities and interviews with selected sanitation actors (artisans, business enterprise owners, CHVs, community health assistants, PHOs, and household heads). Discussion focused on the general sanitation situation, sanitation products available in the market, and challenges and opportunities in scaling up market-based sanitation approaches. The technical specialists also conducted Key Informant Interviews (KIIs) with selected USAID WKSP staff to understand their roles and responsibilities in project implementation, and to capture their views, experiences, and recommendations regarding market-based sanitation models. Some of the findings include:

- The supply of existing improved sanitation system components (like SATO pans and stools) is limited in terms of distributors and retail. There must be a formal and improved sanitation sales effort to increase demand for sanitation and thus supply these components for the market.

- There is great variation among masons/fundis with respect to their training in providing improved sanitation products, their quality of work, and their interest and willingness to increase the production of toilets. At the same time, masons remain a critical part of the sanitation market ecosystem and thus must be intentionally engaged and supported. County governments, through the department of public health, have implemented sanitation demand creation activities, and in counties like Siaya, Migori, Homabay and Kisumu market-based sanitation activities have been rolled out. This has not, however, resulted in increased sales of sanitation products such as SATO. Sales will only increase substantially when motivated actors like masons and fundis are actively involved in the sanitation business.

For urban sanitation, USAID WKSP held discussions with water and sanitation service providers in Busia, Kisumu, Kakamega, Homabay, and Kisii. The discussions provided an understanding of existing services in sanitation and opportunities for building strategies for a sustainable and robust market. Key areas of support and collaboration identified include development of strategic/business plans, marketing strategies and pro-poor policies, and capacity building for staff on customer service. The discussions revealed that, as much as water and sanitation service providers have taken on the mandate for delivering sanitation in urban areas, they are struggling to deliver this mandate as required by the Water Services Regulatory Board (WASREB) and its key performance indicator reporting. Except for Kisumu Water and Sanitation Company Limited (KIWASCO), water and sanitation service providers are only reporting service in FSM without a clear management structure.

USAID WKSP also consulted with county public health departments to understand the policy environment for urban sanitation; most counties reported having no regulatory frameworks. The project developed a draft standard operating procedure (SOP) for FSM in Kisumu that will be shared with other counties for use by pit emptiers and vacuum truck operators. The project also mapped pit emptiers in Kisumu and Kakamega and prepared for capacity building.

In addition, USAID WKSP initiated discussions with some existing service providers with experience testing different urban sanitation technologies, such as the Pupu Pump (pit-emptying technology) and the concept of the WASH Hub. The Honey Dipper, dung beetle anaerobic digesters, and Saniwise toilet technologies currently being tested at the KIWASCO lagoons sites were found to be very cost effective, and could be scaled up in USAID WKSP counties.

SUB-OBJECTIVE 3: IDENTIFY, IMPLEMENT, AND SCALE PILOTS TO STRENGTHEN THE MARKET FOR MHM PRODUCTS

MHM barriers and enablers identification. As part of the Private Sector Engagement Conference in Kisumu in Q4, USAID WKSP engaged various social enterprises and companies providing menstrual products and related services to exhibit their products and attend discussions on the challenges the private sector faces in penetrating the market in western Kenya. During the discussions, participants noted that enterprises were experiencing multiple enabling environment constraints, such as acquiring Kenya Bureau of Standards certification, patenting products, and identifying value additions to products to ensure competitiveness. Based on these preliminary discussions and the ongoing MHM Barriers and Enablers assessment, USAID WKSP will design activities to work closely with enterprises to remove these bottlenecks.

MHM outreach. USAID WKSP organized a webinar in Q4 to take stock of advancements and lessons learned from implementation of the GoK MHM Policy, and to discuss opportunities that can be leveraged by development partners. Intended to rally MHM stakeholders to support MHM Policy implementation, the webinar drew speakers from the Ministry of Health, USAID/KEA, the African Coalition on Menstrual Health, and USAID WKSP. 284 participants from various countries attended.

This webinar also heralded the official inauguration of Kenya’s MHM Community of Practice, which will hold sessions on MHM every quarter. The next session is set for November 2022.

MHM Steering Committees. The GoK National MHM Policy recommends the establishment of a multisectoral body to coordinate MHM in various counties (or MHM Task Force). Since the term “task force” implies a short-term function, and since MHM is congruent across various sectors (in addition to sanitation), USAID WKSP committed to refocus its support for counties to set up longer-lasting MHM Steering Committees. In Q3-4, USAID WKSP developed a generic TOR to guide three counties in forming their respective County MHM Steering Committees. The TOR development process involved bilateral discussions with counties on whom to include, roles and responsibilities, and day-to-day running of the Committees. The policy recommends that MHM Steering Committees be co-chaired by the department of public health/environmental health and the department of gender. However, this is at the discretion of counties, which can choose what works for them. The leadership of the Committees varies from county to county. Table 6, below, summarizes progress in Committee establishment as of Y1.

TABLE 6. MHM STERRING COMMITTEE CREATION PROGRESS	
COUNTY	PROGRESS UPDATE
Homabay	The meeting to validate the ToR and form the Steering Committee was attended by 41 people (28 male, 13 female). The county government chose to have 15 members (7 males and 8 females) on the Committee, chaired by CEC Health and the CEC Gender. The Committee will be supported by the Homabay County WASH Hub, which will act as the secretariat. The members were approved, and their letters signed by the Chief Officer for Health.
Migori	The meeting to validate the ToR and form the MHM Steering Committee was attended by 25 people. The county government appointed 25 members (14 males and 11 females) to the Committee, which will be co-chaired by the Department of Health and Department of Education. The members have been formally approved with letters of appointment, and Migori County has begun discussions on domestication of the MHM Policy.
Busia	26 people (12 male, 14 female) attended the meeting to form the Steering Committee. After selection, the Committee was formed with 25 members. The ToR and the list of offices to form the Committee was sent to CEC for approval and appointment. The Committee will be chaired by the Department of Health and Department of Youth and Gender.
Bungoma	29 people (15 male, 14 female) attended the meeting to form the Committee, with 18 members (11 female, 7 male), led by the Department of Reproductive Health and Department of Public Health. The proposed list of members was sent to CEC Health for appointment.
Siaya	27 people (15 male, 12 female) took part in the meeting to form the Committee. The county government resolved to have a total in 26 members, with their names approved by the Chief Officer for Health and now awaiting formal appointment. The Committee will be chaired by the County Commissioner.
Kakamega	The county government decided instead to form an MHM Technical Working Group with 32 members. This decision was based on the view that nothing has been done on MHM by the county, and structures up to the ward level are needed to strengthen uptake of MHM. The county government has begun discussions on domestication of the National MHM Policy.
Kisii	The county completed review of the ToR and selected Committee members, 27 people from the Departments of Education, county assembly health committee, the county attorney, and key partners. The Committee will be co-chaired by the Department of Health and Department of Gender.

The County MHM Steering Committees will choose representatives of the MHM Community of Practice to serve as a knowledge management and sharing platform for project counties, and other partners affiliated with the Ministry of Health.

MHM DAY Celebration. USAID WKSP supported 2022 National MHM Day in Embu County by preparing material aired on Ramogi radio stations, reaching 37,229 people across Siaya, Kisumu, Homabay, Migori, and Nairobi counties.

SUB-OBJECTIVE 4: STRENGTHEN THE ENABLING ENVIRONMENT

In Y1, USAID WKSP implemented activities that emphasized coordination and collaboration to help strengthen the overall enabling environment.

Private sector engagement (PSE) forum. To move beyond catalyzing market activity and create long-lasting, transformational change, USAID WKSP, in collaboration with KNCCI and LREB, organized a private sector engagement forum in Kisumu at the end of Q4. This provided an opportunity for stakeholders to collectively advocate for prioritization of sanitation and MHM and strengthened policy and regulatory frameworks to effect lasting change in the sanitation and MHM space. The objectives of the forum were to (1) support improved coordination of stakeholders to strengthen the policy and regulatory environment for sanitation and MHM; (2) foster effective partnerships to develop innovative solutions to sanitation and MHM challenges; and (3) strengthen the capacity of county governments to effect lasting change in sanitation and MHM.

Attended by 211 people, the workshop drew delegates from county governments, LREB leadership, the private sector (represented by KNCCI, KEPSA, and other non-state actors), CBOs and CSOs active in sanitation, and MHM. Figure 8 shows the USAID WKSP PSE Forum Event. The outputs of the engagement forum included:

- i. An action plan of county governments, LREB, the private sector, and development partners to foster sector coordination through the setup and/or strengthening of a county-based structure to support market-based sanitation, including government budget allocation, creation of an enabling environment for the private sector to do business, and support for small and medium-sized enterprises (SMSEs) to upscale sanitation and MHM innovations (see Table 7 below).
- ii. A communique committing state and non-state parties to assume collective responsibility through advocacy, partnerships, co-creation, and co-engagement to drive the sanitation and hygiene agenda. His Excellency the Governor of Busia County [REDACTED] was nominated to be lead sanitation and MHM champion in the lake region.

FIGURE 8. USAID WKSP PSE FORUM EVENT



Rongo University presenting its MHM product innovation to County Governors, LREB, USAID and USAID WKSP leadership at the Private Sector Engagement Forum event.

TABLE 7. SUMMARY OF RATIFIED ACTION PLAN FROM THE PSE FORUM

STAKEHOLDER	ACTION
LREB	<ol style="list-style-type: none"> 1. Establish a monitoring framework for sanitation and MHM (systems strengthening) 2. Make formal appointment and submit declaration for lead champion in sanitation and MH 3. Develop a roadmap for collaborative engagements and support peer-to-peer learning across counties 4. Develop a finance and investment strategy in sanitation and menstrual hygiene for Western Kenya
County Governments	<ol style="list-style-type: none"> 1. Initiate and sustain strategic collaboration with the private sector through forums on sanitation and MHM 2. Domesticate policies and regulatory frameworks for enabling environment 3. Create county budget code(s) for sanitation and MHM
Private Sector	<ol style="list-style-type: none"> 1. Support infrastructural development for sanitation and hygiene 2. Support innovative models to promote market-based service delivery 3. Promote and expand existing SMEs in sanitation and MHM space 4. Address inefficiencies in the local economy to reduce latent demand for sanitation and MHM products and services
Development Partners	<ol style="list-style-type: none"> 1. Provide programs and projects with technical assistance to advance sanitation and MHM 2. Support innovation in sanitation and MHM 3. Support budgetary allocation through blended financing

Coordination mechanism strengthening. In Q4, USAID WKSP began work with various WASH platforms in selected counties to improve their coordination and outreach functions. In Kisumu, USAID WKSP supported a WASH network forum to bring on board all WASH sector stakeholders to participate in CIDP III. The stakeholders reviewed CIDP II and shared their views on identified gaps and proposed programs to be included in CIDP III. USAID WKSP shared the project vision and created a working document with proposed timelines to achieve sector goals. Gaps identified in CIDP II included low priority for sanitation and MHM, with low budgets, no clear objectives on sanitation and MHM, and missing targets for improved sanitation and MHM. The county government departments were represented by the Director of Health and Sanitation, Chief Officer, Water Environment and Climate Change, Director of Technical Vocational Education Training, Director of Economic Planning, and Director of Water. The water service provider was also represented, alongside other key WASH partners in the county. Forty-five stakeholders (30 male, 15 female) attended the meeting.

In Bungoma county, USAID WKSP participated in the Bungoma County WASH forum held by the county government. Seven organizations were represented in the forum, together with relevant county departments. USAID WKSP presented its objectives and activities, and as a result, during the meeting, the Director of National Environment Management Authority (NEMA) encouraged partners and entrepreneurs to explore biodegradable solutions in MHM products. It was noted that the county has only two incinerators: one at the County Referrals Hospital and one at Sosio Girls Secondary School in Kamukuywa. This first outreach by the project identified potential collaboration with the forum to further share lessons stemming from USAID WKSP activities.

USAID WKSP also held consultative meetings with Kakamega and Migori county governments on the domestication of MHM policies and Environmental Health Hygiene policies, and the development

of Migori Environmental Health Hygiene regulations. These meetings provided the basis for future project support in developing policy instruments for improved sanitation and MHM.

CROSS-CUTTING ACTIVITIES

COLLABORATION AND COORDINATION

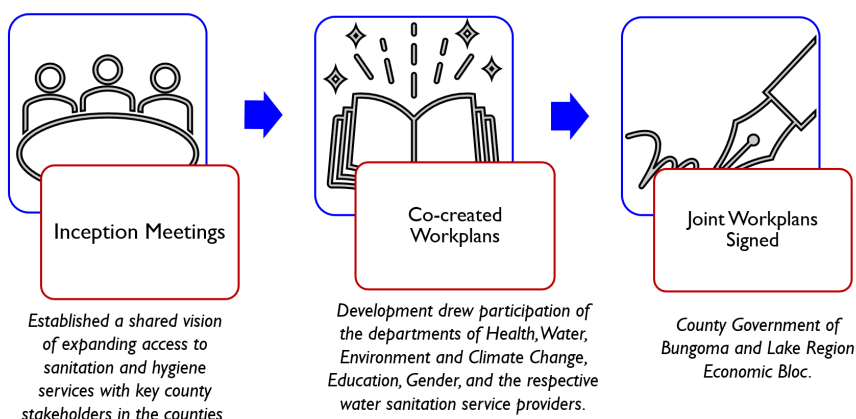
In Q3-4, USAID WKSP held county inception meetings and co-creation workshops in its eight target counties. The objective of the inception meetings was to establish a shared vision of expanding access to sanitation and MHM services with key county stakeholders, such as various county government departments, development partners, entrepreneurs, CSOs, water service providers, and private sector players. Stakeholders shared county-specific sanitation and MHM gaps and jointly explored effective and efficient ways of integrating and implementing market-based solutions in the counties, by scaling up sustainable interventions to enhance access to affordable products.

“We pledge our commitment to USAID and the WKSP project. You have involved the right directorate for this activity. We are the fundis, you only need to show us what you want and we will support in fabricating it. We look forward to this collaboration.” [REDACTED], Director TVET Kisumu County

Following the inception meetings, the project held co-creation workshops with the respective county governments to develop joint workplans to be carried out by the various county government departments of health, water, gender, education, and youth, and water and sanitation service providers. These workshops (1) provided an opportunity for USAID WKSP to identify areas of complementarity

with respective county government department development plans, and (2) strengthened USAID WKSP relationships with county governments, by identifying and promoting strategies that enhance sustainable market-based sanitation and MHM interventions. The joint workplans were incorporated into MoUs or other preferred forms of agreement between USAID WKSP and each of the counties. In YI, USAID WKSP facilitated the signing of co-created workplans in Migori, Bungoma, and the LREB secretariat. With these co-created work plans, USAID WKSP followed the USAID Local Systems Framework to ensure that initiatives are locally owned, led, and co-managed. Figure 9 shows the process involved.

FIGURE 9. INCEPTION AND CO-CREATION PROCESS



COLLABORATING, LEARNING AND ADAPTING (CLA)

USAID WKSP developed a CLA concept to assess theories, test assumptions, review results, and adapt market-based approaches to sanitation and MHM that can either be scaled or replicated in western Kenya. To institutionalize the culture for learning, the project considered partnering with a local university. The project submitted the CLA concept for review by USAID/KEA and will refine it

after completing baseline assessments to identify project-specific learning areas and gaps and develop a learning agenda.

Through activity implementation in YI, USAID WKSP learned the following lessons:

- **Counties are unique and have preferred methods of partnership.** With eight county-specific co-creation exercises concluded, individual counties expressed their preferences on instruments to ratify collaborations and partnership with USAID WKSP, including MoUs, Letters of Intent (Lols), and Cooperation Cover Notes (CCNs), among others. The project sought to formalize these collaborations based on county-specific preferences.
- **Co-creation with county governments is critical for designing government-led, government-owned, and government-managed interventions.** Co-creation exercises revealed high levels of commitment by county governments, and show the need for governments to actively support and participate in the implementation of USAID WKSP to enhance sustainability. Co-creation also enabled USAID WKSP to identify priorities that would enable direct support and to establish working relations and support for future activities. Figure 10 shows USAID/KEA representative [REDACTED]
- **Prioritization of sanitation is lacking.** Counties have limited budgets for sanitation activities. USAID WKSP intends to work with county stakeholders to advocate for increased resource allocation to support the project's activities.
- **MHM is a key component for target counties.** The integration of MHM into sanitation interventions elicited great interest from target counties, pointing to the need for increased access to MHM products and services, as well the issue of waste disposal for used menstrual products.
- **MHM implementation approaches are limited.** In counties, MHM is synonymous with the distribution of sanitary pads. This narrative can only be changed by a rigorous SBCC campaign and training. There is also the mistaken belief that MHM programming is only for girls in schools; most discussions during inception and co-creation workshops centered on school girls, leaving out other segments of the population.
- **Private sector engagement is untapped.** Private sector participation in the inception and co-creation workshops was limited, with only the LIXIL Company participating.
- **WASH forum coordination needs strengthening.** WASH forums are strong at the county level, but deliberations barely trickle down to sub-counties. There is a need for strengthened coordination mechanisms to the sub-counties where USAID WKSP is currently carrying out activities.
- **Engagement with the CIDP development process is critical.** The ongoing CIDP development process presents an ideal platform for collaborative planning, budgeting, and

FIGURE 10. USAID WKSP CO-CREATION WORKSHOP



USAID/KEA representative [REDACTED] provides opening remarks at the Migori county inception and co-creation workshop.

implementation of sanitation and hygiene activities. USAID WKSP continues to remain part of this activity.

Collaboration aspects within CLA are noted in the Activity Progress (Sub-Objectives 1 and 4) and Cross-Cutting sections, while the adaptation aspect is noted in the Management section, under Adaptive Management.

LINKAGES WITH OTHER USAID PROGRAMS

USAID WKSP supported the project inception workshop in Bungoma county with USAID Boresha Jamii. This was an opportunity for the two projects to align their interventions, with the aim of generating maximum impact in the county. In addition, in Kisumu County, USAID WKSP invited the USAID Western Kenya Water Project to the WASH Forum. The two projects shared their plans for the county on WASH activities and raised key issues that should be included in CIDP III.

LINKAGES WITH GOK AGENCIES

USAID WKSP worked in close collaboration with county governments in planning and organizing all county inception and co-creation meetings. Each county department of health took the lead in mobilizing participants for the two workshops, and actively participated in the generation of joint workplans. The level of commitment to the process was demonstrated in Bungoma through the signing of joint workplans. This process was led by the Chief of Health, who committed to supporting project interventions in the county.

Departments of education, through directors of TVET in respective counties, helped the project identify TVET institutions for the training of masons. The institutions further committed to begin production of molds to enhance construction products, ultimately promoting access to sanitation products and services in the respective counties.

Through the MHM webinar, USAID WKSP supported the national Ministry of Health to jumpstart the rollout of the MHM Policy that had slowed due to COVID-19. The project sought to work with county government partners to adopt and adapt this national policy initiative to the local county context.

ENVIRONMENTAL MITIGATION AND COMPLIANCE

USAID WKSP started developing an Environmental Mitigation and Monitoring Plan (EMMP), following technical concurrence with USAID/KEA on the need for this document. Data collection was performed in five counties, Kisumu, Bungoma, Busia, Migori and Kisii, and entailed visits to education, health, water, gender, youth, and social services departments, as well as NEMA. The EMMP development process is expected to extend into Y2 Q1. As an interim measure, USAID WKSP will continue to ensure environmental mitigation and monitoring, in fulfillment of the requirements of 22 CFR 216 and International Finance Corporation's Environmental and Social Performance Standards of 2006, in addition to local regulations and laws pertaining to environmental sustainability. This interim measure will continue to cushion the project against any potential environmental risks.

CLIMATE CHANGE IMPACT MITIGATION

According to USAID regulations, all projects and activities are required to be environmentally compliant. This is in accordance with the Climate Risk Profile (USAID CRP 2018) and Kenyan regulations embedded in EMCA Act 1999. A final EMMP report has been submitted by the

consultant and reviewed by the COP. Findings of this report will be shared with relevant county departments in Q1 of Y2. All USAID WKSP partners, affiliates, and grantees will be expected to abide by the recommendations of the EMMP during the project implementation period.

GENDER, YOUTH, EQUITY, AND SOCIAL INCLUSION (GYESI)

As an ongoing process, USAID WKSP has embedded GYESI as a deliberate cross-cutting theme in every project activity. The project has deployed a "twin-track" approach to GYESI. In the first track, USAID WKSP has mainstreamed and integrated GYESI throughout the project and its partners' work. The second track includes targeted actions to assist people most at risk of being excluded or left behind, to increase their opportunities to engage in and benefit from the sector and their capacity and confidence to do so. In Y1, USAID WKSP was deliberate and intentional in the involvement of women, youth, and other populations that have been predominantly left behind in sanitation and MHM. Some of the steps taken include:

- Ensuring that in all meetings, there was representation of women and youth, or the departments that oversee their activities.
- Deliberately disaggregating data based on sex and counting persons with disabilities.
- Factoring representation and inclusion of women, youth, and special groups in MHM steering committees.
- Exploring toilet solutions for persons with disabilities, the elderly, and young children.
- For grants development, requiring candidate grantees to prove the involvement of women, youth, and persons with disabilities, and prioritizing organizations led by women, youth, or persons with disabilities.

MANAGEMENT

The following sections describe progress and accomplishments in USAID WKSP operations that supported technical activities.

ADAPTIVE MANAGEMENT

County and LREB Co-Creations

USAID WKSP undertook eight co-creation sessions with partner counties and one session of the Lake Region Economic Bloc to ensure that project design and implementation reflects county-specific priorities and the regional sanitation and MHM transformation agenda.

To facilitate adaptive management, the nine costed co-created work plans were integrated into the USAID WKSP work package for FY22 overlapping into FY23, to allow for resource allocation and prioritization. The co-creation process effectively deepens county and LREB ownership of USAID WKSP interventions while leveraging public financing to support joint sanitation and MHM activities. This approach not only ensures sustainability of gains made from the outset, but also places sanitation and MHM at the center of county planning through the inclusion of projected county spending in different planning structures and tools, including the CIDP, Annual Development Plans and Annual Budgets.

Pause and reflect session. USAID WKSP held a pause-and-reflect session toward the end of Y1 as part of its Y2 work plan development, with the following key questions: *What did we intend to do? What worked well, and why? What didn't work well, and why? What did we learn from this? What should we change?* Key outcomes included, but were not limited to: (1) encourage and support counties to domesticate national policies to the county level and support implementation, including MHM Policy and Environmental Health and Sanitation Policy; (2) develop a strong private sector engagement strategy, including making county policies friendlier to the private sector, and supporting identification of potential investors and partners (this may include signing of MOUs with Public Private Partnerships (PPPs) in sanitation and hygiene); (3) support private sector associations, such as the Kenya Private Sector Alliance, to effectively engage the private sector in the budget process on sanitation and MHM.

Areas that worked well included partnerships and collaboration with county governments, given that sanitation and hygiene have been neglected areas and counties are eager to buy into the idea of market-based sanitation and hygiene. Another area that worked well was the project's joint work plans with counties, resulting in activities that are prioritized and locally owned by the different target counties. USAID WKSP learned that it should let counties lead planning of their activities and provide technical assistance to achieve results.

QUALITY

In Y1, USAID WKSP completed 11 deliverables, as listed in Annex 2, consistently before or at the required deadlines. The project also maintained the required branding and marking for each deliverable per the approved Branding Implementation and Marking Plan. In all submissions, the project followed-up with USAID/KEA on review and approval status, and adjusted deliverables accordingly per feedback. To ensure quality implementation, USAID WKSP also held regular check-in meetings with USAID/KEA to anticipate in advance any downstream changes and/or new emphasis in project activities, for better adaptive management practices. These regular communication protocols served as critical quality checks on project implementation and management.

COST CONTROL

USAID WKSP submitted accurate and timely financial reports showing burn rates, accruals, and projected costs. The project worked closely with its subcontractors and consultants to monitor and manage monthly expenditures and ensured the timely processing of invoices and vouchers.

OPERATIONS

During most of this reporting period, USAID WKSP focused its efforts on start-up activities, including hiring and onboarding staff, equipping staff and the office with required tools and infrastructure, and preparing the Kisumu office for opening. By mid-Q2, the project had selected an office space and signed the lease agreement. Office make-ready repairs and procurement and delivery and programming of IT equipment, security, and furniture were completed by Q3. The project bank account was set up by the end of Q3, allowing USAID WKSP to make its first transfer of funds from the home office in early Q4. The project also finalized development of key project manuals, namely the security manual, field operations manual, and grants manual. USAID WKSP also supported the setup of county embedded offices and deployment of relevant equipment and staff. This included commissioning 28 laptops, office chairs, desks, visitors' chairs, conference table, and cabinet units deployed to the Kisumu office. Procurement was finalized to provide IT support to project staff and oversee network setup.

USAID WKSP successfully negotiated office spaces for its county teams to be embedded in county governments. Bungoma, Busia, Kakamega and Migori county governments have available spaces, for which the project has begun procurement of office furniture and IT equipment. The project is still negotiating with Kisii and Siaya county governments for office space.

STAFFING

During this reporting period, USAID WKSP completed recruitment and onboarding of 27 staff. Fourteen staff reported for duty in Q4, including the key personnel position of R&D Lead. Multiple onboarding and training workshops on critical operational and compliance requirements were held, including on human resources, IT policies, security, asset/property management, tax exemption (with Kenya Revenue Authority), communication, and file management. Table 8 shows onboarded staff in YI, locations, and start dates.

TABLE 8. STAFFING LIST FOR YI			
NAME	TITLE	LOCATION	START DATE
[REDACTED]	Chief of Party (COP)	Kisumu	February 23, 2022
[REDACTED] (PSI)	Deputy COP/Market-Based Sanitation Lead	Kisumu	March 21, 2022
[REDACTED] (AMREF)	Menstrual Hygiene Management Lead	Kisumu	April 4, 2022
[REDACTED]	Finance and Administration Director	Kisumu	April 25, 2022
[REDACTED]	Finance Manager	Kisumu	May 4, 2022
[REDACTED]	Communications Director	Kisumu	May 9, 2022
[REDACTED]	Accountant	Kisumu	May 16, 2022
[REDACTED]	SAF/Grants Manager	Kisumu	June 6, 2022
[REDACTED]	County Market Advisor (AMREF)	Busia/Siaya	June 6, 2022
[REDACTED]	County Market Advisor (AMREF)	Bungoma	June 6, 2022
[REDACTED]	Senior MEL Specialist	Kisumu	June 13, 2022
[REDACTED]	BDS Manager – Kisumu Cluster (PSI)	Kisumu	June 13, 2022
[REDACTED]	County Market Advisor (AMREF)	Kisii	June 20, 2022

[REDACTED]	Office Assistant	Kisumu	July 1, 2022
[REDACTED]	MHM Officer (AMREF)	Siaya	July 5, 2022
[REDACTED]	Civil Engineer (PSI)	Kisumu	July 6, 2022
[REDACTED]	County Market Advisor (AMREF)	Kakamega	July 7, 2022
[REDACTED]	Urban Sanitation & BDS Manager (PSI)	Kisumu	July 12, 2022
[REDACTED]	Policy/Training Coordinator	Kisumu	July 15, 2022
[REDACTED]	County Market Advisor (AMREF)	Migori	July 18, 2022
[REDACTED]	Driver	Kisumu	July 25, 2022
[REDACTED]	Driver	Kisumu	August 1, 2022
[REDACTED]	Sales and Marketing Officer (PSI)	Kisumu	August 15, 2022
[REDACTED]	Supply Chain Manager (PSI)	Kisumu	August 22, 2022
[REDACTED]	Data Analyst	Kisumu	September 1, 2022
[REDACTED]	R&D Lead	Kisumu	September 26, 22
[REDACTED]	Governance and Partnerships Lead	Kisumu	September 26, 2022

MONITORING AND EVALUATION

This section highlights the tools and systems that support the project for activity progress data collection, documentation, and reporting for analysis and decision making. The section also reports on linkages with USAID/KEA processes and the national data management system soon to come online, information on project activity progress, and analysis.

MONITORING AND EVALUATION TOOLS AND SYSTEMS

As part of technical and operational start-up, USAID WKSP designed and reviewed its sanitation and MHM data-collection and monitoring tools to track indicators for reporting. To ensure inclusive feedback, the project shared the tools with the county governments of Bungoma, Kakamega, Kisumu and Migori, and held stakeholder meetings to review, gather feedback, and build the ownership and support of project partners. USAID WKSP also developed a simple database using Microsoft Excel to capture key variables for training data. The database was used to track participants who participated in training events across the counties and to identify trained artisans and PHOs.

During the reporting period, USAID WKSP reviewed its MEL plan, revised selected indicators, and provided detailed definitions of the indicators from PIRS, as requested by USAID/KEA. The review focused on emerging issues and areas of interest to capture up-to-date developments in the sanitation and MHM context. USAID WKSP anticipates further adjusting targets and indicators in consultation with USAID/KEA, once results from baseline assessments are ready.

In YI, USAID WKSP MEL staff attended a virtual meeting supported by USAID/KEA. Specific areas covered included updates on the new Mission Director and a DQA presentation on previously conducted DQAs targeting all programs/departments of USAID/KEA. USAID/KEA also introduced information solutions systems for reporting by implementing partners and projects.

CAPACITY BUILDING

USAID WKSP participated in National Sanitation and Hygiene Real-Time Monitoring and Information System (RUSH-RTMIS) training, aimed at accelerating achievement of Sustainable Development Goal (SDG) targets. Facilitated by the Ministry of Health (MOH), RTMIS integrates a complete M&E framework with over 20 indicators, including most of the indicators USAID WKSP will be tracking and reporting. Using this system, data will be collected from households, health facilities, and schools on sanitation, hygiene, and nutrition. The training included a practical exercise for households and health facilities, to test the system for any needed improvements. The MoH is piloting RTMIS in the counties of Turkana, Kitui and Homa Bay. As soon as the system is ready for use, USAID WKSP plans to coordinate and link with its own reporting.

PROGRESS REPORTING AND ANALYSIS

In YI, USAID WKSP key activities concentrated on starting up project operations, connecting with stakeholders to establish working relationships, and initiating co-creation planning and baseline assessments that will inform activity design. Project targets for YI were largely dependent on ongoing baseline assessments, and therefore mostly remained as “to be determined” or TBD. USAID WKSP informed USAID/KEA that the project MEL plan will need revision once baseline assessments and co-created work plans are completed.

USAID WKSP did contribute to selected targets in YI. These include:

Goal level. 289 people in 55 households, across six counties, gained access to basic sanitation as a result of hands-on training and practical actions by trained artisans building new latrines. A follow-up was conducted jointly with PHOs to ensure quality control. The breakdown was 73 people in Kisumu, 72 people in Bungoma, 30 people each in Homa Bay and Kisii, and 84 people in Migori.

Sub-objective 1 - Increased access to and uptake of market-based improved sanitation and fecal sludge management (FSM) products and services. In Y1, USAID WKSP was in the process of completing baseline assessments that would better define indicators and targets under this sub-objective. The project completed a high-level sanitation enterprise scan in all counties and facilitated introduction of products into the market. The mapping exercise captured 16 enterprises in the eight counties and helped identify their capacity needs. The project worked with enterprises and manufacturers to bring two products into the market, precast retrofitted slabs and full toilet solutions, following ideations around different product designs and options during the first phase of TOT training. One enterprise also began distributing SATO products after receiving technical support from the project on sanitation business opportunities.

Sub-objective 2 - Increased access to and uptake of market-based improved MHM products and services at the household level. While USAID WKSP set targets in Y1 in this MEL component, activity progress and achievements will be achieved in subsequent years following completion of baseline evaluations (including the MHM Barriers and Enablers assessment), implementation of IEC campaigns, MHM disposal research and actions, and further market development (e.g., via GUCs and SAF). Baseline status therefore remained TBD for this component due to ongoing baseline assessment activities.

Sub-objective 4 - Strengthen the enabling environment. USAID WKSP activities in coordination, collaboration, and advocacy in Y1 contributed to progress in strengthening the enabling environment for improved sanitation and MHM. For example, the project started to engage with and advocate for eight county governments and selected water service providers in inception meetings and co-creation workshops on advancing market-based sanitation and MHM solutions, through consultations to define roles, local policies, and market readiness. In Y1, USAID WKSP collaborated with KNCCI and LREB to catalyze private sector participation in sanitation and MHM market development across target counties. USAID WKSP also initiated policy reform advocacy, catering to an improved market-based environment in Kakamega and Kisumu counties, during WASH forum coordination activities. The project helped develop two curricula for training artisans/masons and PHOs on improving their technical capabilities and awareness. USAID WKSP implemented these curricula with trainings that engaged 64 artisans and 39 PHOs in two counties.

Summarized details of overall performance are in Table 9, which mirrors Table 1.

TABLE 9. SUMMARY OF YI USAID WKSP PERFORMANCE PROGRESS

#	PERFORMANCE INDICATOR	BASELINE	YI TARGET	YI ACHIEVEMENTS	% ACHIEVED YI TARGETS	COMMENTS
GOAL INDICATORS						
G1	Number of people gaining access to safely managed sanitation services as a result of U.S. Government (USG) assistance (HL 8.2-3)	TBD	0	0	N/A	Baseline value of this indicator will be established following the completion of baseline assessment. This indicator is not due ready for reporting in YI as no target was set considering start-up preliminary activities/interventions.
G2	Number of people gaining access to basic sanitation services as a result of U.S. Government (USG) assistance (HL 8.2-2)	TBD	0	289	N/A	Baseline value of this indicator will be established following the completion of baseline assessment. While the project did not have a target for this indicator in YI, it reached 289 people (123 M and 166 F) with access to basic sanitation as a result of the construction of 55 latrines in six counties (Migori, Kisumu, Kakamega, Bungoma, Homa Bay, Kisii) following the training of artisan/masons.
OBJECTIVE 1: INCREASED ACCESS TO AND UPTAKE OF MARKET-BASED IMPROVED SANITATION AND FECAL SLUDGE MANAGEMENT (FSM) PRODUCTS AND SERVICES						
I.1	Number of new sanitation products offered by WKSP-affiliated enterprises (custom)	TBD	4	2	25%	Baseline value of this indicator will be established following the completion of baseline assessment. However, following training of masons, two products were introduced into the market through USAID WKSP (pre-cast SATO retrofitted slabs and the full toilet solution).
I.2	Number of outlets stocking sanitation products	TBD	32	1	3%	In YI, the project conducted sanitation enterprise mapping and sensitization on sanitation products. The project will continue to work with enterprise identified to stock the sanitation products. As a result of the training of masons, one outlet in Kisumu West is stocking SATO products.
I.3	Percentage change in sales of firms/enterprises receiving USG-funded assistance	TBD	0	NA	NA	This indicator is not due ready for reporting in YI as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.

1.4	Number of sanitation products sold (custom)	TBD	50,000	NA	NA	This indicator is not due ready for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.
1.5	Number of sanitation services facilitated (custom)	TBD	50,000	NA	NA	This indicator is not due ready for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.
1.6	Percentage of supported enterprises that continue to deliver basic sanitation products and services after 12 months (custom)	TBD	16%	NA	NA	This indicator is not due ready for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. The project completed mapping of sanitation and MHM enterprises but will need to complete capacity assessment to understand the profiles of each enterprise which will provide baseline data against which progress will be measured against.
1.7	Percent change in supported sanitation/MHM enterprise profits (custom)	TBD	10%	NA	NA	This indicator is not due ready for reporting in Y1 as no target was set considering start-up preliminary activities/interventions. This indicator will be reported in Y2 as data on barriers and enablers on sanitation and MHM will be used to determine the value of baseline.
OBJECTIVE 2: INCREASED ACCESS TO AND UPTAKE OF MARKET-BASED IMPROVED MENSTRUAL HYGIENE MANAGEMENT (MHM) PRODUCTS AND SERVICES AT THE HOUSEHOLD LEVEL						
2.1	Number of women/girls with improved MHM practices as a result of WKSP activities (custom)	TBD	53,000	NA	NA	While baseline value of this indicator will be established following the completion of baseline assessment, the project target was arrived at using one percent of the population of the WRA in the eight counties. USAID WKSP will conduct key SBCC activities after baseline data collection through the MHM enablers and barriers report to inform on improved MHM practices.
2.2	Number of people reached with information, education and communication campaigns designed to increase public awareness of MHM (custom)	TBD	201,917	37,229	N/A	While baseline value of this indicator will be established following the completion of baseline assessment, the project reached people after the rolling out of MHM events and webinar.

2.3	Percentage of women/girls reporting improved menstrual waste disposal options (custom)	TBD	0	N/A	N/A	This indicator is not due for reporting in YI as no target was set considering start-up and preliminary activities/interventions.
2.4	Number of new MHM products offered by USAID WKSP-affiliated enterprises (custom)	TBD	5	0	N/A	The baseline value of this indicator will be established following the completion of baseline assessment including the MHM enablers and barriers report.
SUB-OBJECTIVE 4: STRENGTHEN THE ENABLING ENVIRONMENT (SUPPORTS BOTH OBJECTIVE 1 AND 2)						
3.1	Number of water and sanitation sector institutions strengthened to manage water resources or improve water supply and sanitation services as a result of USG assistance (HL 8.3-3)*	40	16	16	100%	During the county implementation planning meetings, the county and sub-county public health departments and water service providers were sensitized on market-based sanitation and on the roles for each actor to support effective implementation of sanitation and MHM activities.
3.2	Value of new funding mobilized to the water and sanitation sectors as a result of USG assistance (HL 8.4-1)	TBD	NA	NA	N/A	This indicator is not due for reporting in YI as no target was set considering start-up and preliminary activities/interventions such as engaging the county governments and private sector players for support and inclusion of funding in the CIDPs, ADPs and AWP.
3.3	Number of pro-business county-level policies and regulations proposed, adopted, implemented (custom)	TBD	8	2	25%	While this indicator is not due for reporting in YI as no target was set considering start-up and preliminary activities/interventions, the project has proposed to support the domestication of the Environmental Health and Sanitation Policy and MHM policies in Kakamega, Migori, Homabay and Migori counties and two pro-business policies in Kakamega and Kisumu counties during WASH forum activities.
3.4	Number of USG engagements jointly undertaken with the private sector to achieve a U.S. foreign assistance objective (PSE-1)	0	8	8	100%	USAID WKSP is anticipated to initiate private sector engagement through its activities and is assuming baseline level at zero at YI. The project will however complete its baseline assessment to set anticipated life of project targets. In YI, the project coordinated and worked with private sector players through eight co-creation activities and the private sector engagement event in Q4 with LREB, KNNCI, and others.
4.1	Number of training courses/curricula developed for sanitation and hygiene market employment or entrepreneurship (custom)	0	4	2	50%	USAID WKSP is anticipated to conduct multiple training and is assuming baseline level at zero at YI. The project will however complete its baseline assessment to set anticipated life of project targets. In YI, the project developed training curricula on basic masonry for artisans/masons and on market-based sanitation for PHOs.

4.2	Number of women and youth engaged in sanitation and hygiene businesses (custom)	TBD	NA	NA	NA	This indicator is not due for reporting in Y1 as no target was set considering start-up and preliminary activities/interventions. Baseline value of this indicator will be established following the completion of baseline assessment that includes capacity evaluation of enterprises on several topics including women and youth involvement.
4.3	Number of women-led enterprises supported within the WASH sector (custom)*	TBD	NA	NA	NA	Baseline value of this indicator will be established following the completion of baseline assessment that includes a capacity assessment to understand the profiles of the enterprises and inform interventions on Business Development Services including women involvement.
4.4	Percentage of villages receiving direct promotional activities (custom)	TBD	30%	NA	NA	In Y1, USAID WKSP focused on foundational activities that included capacity building of masons, CHVs, PHOs, on improved sanitation activities and conducted sales and marketing discovery activities to inform subsequent promotional activities. The project will use baseline data to establish the values for baseline target and collect data at the village level once SBCC activities are rolled out.
4.5	Percent of customers satisfied with services/products (custom)	TBD	60%	NA	NA	This indicator requires that the project offers the services and products from partners before a survey is done to establish the perceived customer's satisfaction. The project will conduct a customer satisfaction survey in Y2.

PROGRESS TOWARD FY22 DELIVERABLES

The following table presents progress toward deliverables based on the Year 1 Work Plan. Table 10 summarizes FY22 deliverables and their status.

TABLE 10. PROGRESS ON FY22 PLANNED ACTIVITIES AND DELIVERABLES			
SUB-COMPONENT	PLANNED ACTIVITIES	KEY DELIVERABLES	STATUS
SOI: Analyze the S&H market system, target markets, and business enabling environment			
Task 1.1: Stakeholders Consultation and Community Engagement	Conduct outreach to multiple stakeholders to inform of USAID WKSP	Inception meeting Report	Completed
	Organize consultations to prepare for co-creation with county governments	Planning Reports	Completed
	Hold co-creation workshops to align USAID WKSP objectives and county priorities	Joint Workplan	Completed
	Identify the key issues and opportunities to focus the baseline PEA: What are the 1-2 most pressing concerns within the core issues or opportunities? How and why are these issues affecting (or potentially affecting) activities?	PEA Report	Completed
	Undertake desk study/background research on the issues and opportunities	PEA Report	Completed
	Hold a PEA workshop with key staff and partners to: identify structural or foundational factors; map stakeholders and interests, influencers and relationships; develop PEA questions; develop implementation plan and logistics; incorporate questions into other assessment tools, if appropriate	PEA Report	Completed
	Gather Key Stakeholder Feedback and Insights through discussions/interviews	PEA Report	Completed
	Synthesize results of PEA discussions	PEA Report	Completed
	Do action planning including design or adaptation on activities	PEA Report	Completed
	Debrief PEA results with USAID/KEA	PEA Report	Completed
	Identify the key issues and opportunities to focus the baseline PEA: What are the 1-2 most pressing concerns within the core issues or opportunities? How and why are these issues affecting (or potentially affecting) activities?	PEA Report	Completed
Undertake desk study/background research on the issues and opportunities	PEA Report	Completed	

TABLE 10. PROGRESS ON FY22 PLANNED ACTIVITIES AND DELIVERABLES			
SUB-COMPONENT	PLANNED ACTIVITIES	KEY DELIVERABLES	STATUS
	Hold a PEA workshop with key staff and partners to: identify structural or foundational factors; map stakeholders and interests, influencers and relationships; develop PEA questions; develop implementation plan and logistics; incorporate questions into other assessment tools, if appropriate	PEA Report	Completed
	Gather Key Stakeholder Feedback and Insights through discussions/interviews	PEA Report	Completed
Task I.3: Conduct Assessment of Sanitation and Hygiene Supply	Develop the supply side assessment protocols describing design, objectives and study questions	Study Protocol developed	Completed
	Develop (and test) data collection tools	Data Collection Tools Developed	Completed
	Conduct data collection/interviews	Data Collection Report	Not completed awaiting Ethical Clearance
	Review and analyze assessment findings	Assessment Report	To be completed in Y2
	Synthesize findings as knowledge product	Knowledge Product	To be completed in Y2
	Validate and disseminate knowledge product (workshops, media networks, policy brief, etc.)	Validation Report	To be completed in Y2
Task I.4: Household Survey for Market Sizing and Segmentation	Develop a Terms of Reference (ToR) and procure local partner	ToR Developed	Completed
	Develop survey/study protocol	Survey/Study protocol	Completed
	Obtain approval from Ethics and Research Committee	Research Permit	In progress
	Develop, translate and program data collection (survey) tools	Survey tool	Completed
	Initiate, train and test data collection tool	Data collection too	Not completed
	Implement survey and collect/translate data	Data collected	Not completed awaiting ethical clearance
	Analyze data and prepare findings report	Data findings	To be completed in Y2
	Synthesize findings as knowledge product	Analyzed data	To be completed in Y2
	Update USAID SanPlan (sanitation mapping) with findings	Sanitation mapping findings	To be completed in Y2
	Validate and disseminate knowledge product (workshops, media networks, policy brief, etc.)	Knowledge products	To be completed in Y2
Task I.6 Enabling Environment Review	Develop ToR and procure technical specialists to conduct county-level assessment	ToR developed	Completed
	Initiate and implement assessment and data collection	Data collection findings	To be completed in Y2
SO2: Identify, Implement and Scale Pilots to Strengthen the Sanitation Market System			

TABLE 10. PROGRESS ON FY22 PLANNED ACTIVITIES AND DELIVERABLES			
SUB-COMPONENT	PLANNED ACTIVITIES	KEY DELIVERABLES	STATUS
Task 2.1: Catalyze Product Systems, Delivery Models and Marketing Approaches	Jointly select sanitation technologies/product systems to be promoted	Product identified	Completed
	Select potential masons/fundis for capacity building and technical support in construction of improved sanitation technologies	Masons/fundis identified	Completed
	Work with TVETs and county government to train artisans/masons on construction of improved sanitation technologies	TVETs identified for training	Completed
Sub-Task 2.1.1: Strengthen Sanitation Product System Offerings of Small Enterprises and Fundis	Develop a detailed database of existing artisans/fundis and sanitation products in the target counties and areas of operation	Stakeholder inventory for fundis	Completed
	Conduct periodic joint follow-ups to provide technical assistance to artisans/fundis in construction/installation of improved sanitation technologies across the counties and to improve on existing products and ensure quality	Joint follow up reports	In progress
	Conduct refresher trainings where gaps have been identified in construction of improved sanitation technologies	Refresher training report	Mason trainings ongoing. Refresher trainings to be done in Y2 following follow-up reports on gaps identified
Sub-Task 2.1.4: Advance Sales and Marketing and Activate Demand	Establish learning agenda for first phase activities	Learning report	Capacity assessment for sanitation enterprises to start in Y2
	Identification and selection of initial BDS partners	Stakeholder of BDS partners	In progress
	Conduct capacity assessment of initial sanitation service providers	Capacity assessment report	In progress
	Select and establish monitoring system for sales data	Monitoring System	In progress
	Identification and selection of businesses for initial sales trial	Selected business for trial sales	To be identified after BDS training in year 2
	Train BDS partners and cascade for selected businesses	Training report	To be completed in Y2
	Carry out trial new product sales with enterprises in select counties	New product	To be completed in Y2
	Provide business training and supportive supervision to service providers	Training manual on sales	To be completed in Y2
	Document lessons learned from sales trial	Lessons learnt report	To be conducted in Y2
Sub-Task 2.1.5: Increase Access to Finance to	Convene a financial inclusion clinic with financial institutions to induct them on project aims/objectives and the access to finance gaps	Report on induction on project objectives	To be conducted in Y2
	Design mentorship and coaching tools on financial literacy	Mentorship tool	Rescheduled to Y2 after completion of financial scoping assessments

TABLE 10. PROGRESS ON FY22 PLANNED ACTIVITIES AND DELIVERABLES			
SUB-COMPONENT	PLANNED ACTIVITIES	KEY DELIVERABLES	STATUS
Scale Delivery Models	Conduct mentorship and coaching for the on-boarded sanitation businesses on financial literacy	Mentorship report	To be conducted in Y2 after completion of the financial scoping assessment
	Develop a manual to guide Business to Business, and Client Linkages with financial institutions	Business manual	To be completed in Y2 after completion of the financial scoping assessment
	Support in creating client linkages i.e., entrepreneurs, groups, and individuals with financial institutions		To be completed in Y2 after completion of the financial scoping assessment
	Support innovative financial inclusion strategies for businesses and entrepreneurs	Strategy developed	To be completed in Y2 after completion of the financial scoping assessment
	Assess and carry out initial product iteration to offer improved products and identify business partners readiness	Business Partners identified	To be completed in Y2 following completion of the financial scoping assessment
Sub-Task 2.2.1: Develop Innovate Product Offerings and Models	Co-develop draft training manuals and technical design for updated products	Training manual	In progress
	Train initial business partners (including artisans) in new product technical designs	New product identified	In progress
SO3: MHM Market System Assessment and Development			
Task 3.1: MHM Barriers and Enablers Report	Develop study protocols and hold inception training	Study protocol	Completed
	Obtain approval by Ethics and Research Committee	Research permit	Completed
	Develop data collection tools	Data tools	In progress
	Conduct data collection		Completed
	Review and analyze study findings	Study findings	Not completed awaiting ethical clearance
	Summarize study findings as knowledge product	Study findings	Not completed awaiting ethical clearance
	Validate, disseminate knowledge product (workshops)	Knowledge products	Not completed awaiting ethical clearance
	Facilitate development of a ToR for establishing and operating the SCs through consultative workshops at the national and county levels	ToR developed	Not completed awaiting ethical clearance
Task 3.2: Establish MHM Steering Committees (SCs)	Support the formation and strengthening of MHM SCs to implement ToR in each county	Steering Committees formed	Completed
	Provide technical support to MHM SCs on roles, key deliverables		In progress
	Review of existing literature on recent and/or past MHM BCC strategies in target counties and nationally	BCC strategy	In progress
Task 3.3: Develop and Launch MHM	Hold discussions via workshops with MHM partners to discuss and validate findings and seek opportunities to work with local groups (e.g., women and youth)		In progress

TABLE 10. PROGRESS ON FY22 PLANNED ACTIVITIES AND DELIVERABLES			
SUB-COMPONENT	PLANNED ACTIVITIES	KEY DELIVERABLES	STATUS
Campaigns	Review of MHM Enabler and Barriers study results to identify county specific challenges and MH misconceptions	Study findings	In progress
	Draft, validate and finalize report on gaps, challenges and opportunities that can be leveraged on effective MHM BCC campaign for adoption at county level		Not completed awaiting ethical clearance
	Conduct desk review on menstrual waste management options and capacity gaps	Desk review findings	In progress
Task 3.6: Improving Waste Collection and Management Methods	Review MHM Enablers and Barriers study to determine how users in the target counties dispose of their menstrual waste	Study findings	In progress
	Identify and develop database of MHM waste management and disposal players including opportunities for leveraging, innovating, scaling	Database for MHM inventory	Not completed awaiting ethical clearance
	Identify and develop database of MHM waste management and disposal players including opportunities for leveraging, innovating, scaling	Database for MHM inventory	In progress
SO4: Strengthen Enabling Environment			
Task 4.2: Engage Reform and Champions	Conduct initial engagement meetings with reform champions to seek collaboration	Reports on engagement	Ongoing. Selection began during the inception and co-creation workshops
	Conduct reviews with each county government and development partners to understand the effectiveness of the current M&E framework for sanitation	Reviewed M&E framework for Sanitation	To be completed in Y2
Task 4.3: Improve Monitoring of Sanitation Services	Hold workshops with the county and national government agencies to inform review findings and determine gaps and opportunities for collaboration and improvements	Workshop reports	In progress
	Review the scopes of different WASH Fora to establish their roles in S&H	ToR for WASH fora	In progress
Task 4.4: Strengthen Coordination Mechanism	Validate and disseminate WASH Fora status report on S&H for adoption by respective counties	Status report	In progress
	Design targeted capacity strengthening plans for each forum OR Establish WASH forum and provide capacity strengthening support where none exists	WASH forum established	In progress
	Convene a WASH for acknowledge exchange workshop for peer-to-peer learning	Learning report	In progress
	Develop concept note for the consultative workshops with clear target participants, objectives and expected outputs/outcomes	Workshop report	To be conducted in Y2 to share learnings based on initial activities undertaken
Task 4.5: Improve	Undertake stakeholder mapping to establish participants for the consultative workshops	Stakeholder mapping inventory	Ongoing

TABLE 10. PROGRESS ON FY22 PLANNED ACTIVITIES AND DELIVERABLES			
SUB-COMPONENT	PLANNED ACTIVITIES	KEY DELIVERABLES	STATUS
Regulation of Sanitation Services	Undertake one consultative workshop	Consultative workshop report	Ongoing
	Facilitate development a ToR to establish a county level sanitation planning team to prepare sanitation financing plans	ToR	To be conducted in year 2 following conclusion of the mapping exercise
Task 4.6: Facilitate Access to Public Financing	Support the establishment of a county level sanitation planning team to prepare sanitation financing plans	Sanitation planning team	Completed
	Hold initial workshop to discuss the ToR for the team and develop a plan of action for the next set of activities	Meeting report	Awaiting completion of the strategic sanitation and hygiene investment analysis
	Conduct desk review of existing financial institutions and the nature of sanitation financial products they offer in all counties	Desk review findings	Awaiting completion of the strategic sanitation and hygiene investment analysis
Task 4.7: Facilitate Access to Private Financing	Formulate a tool for financial institutions scoping for all counties	Scoping tool	In progress
	Test and validate the tool based on data collected for accuracy and effectiveness		Completed
	Collect and analyze the scoping data to establish the number of financial institutions, the nature of products they offer to the sanitation sector, challenges and opportunities for partnership.	Study findings	Awaiting completion of the strategic sanitation and hygiene investment assessment
	Summarize scoping findings as a knowledge product	Study findings	Awaiting completion of the strategic sanitation and hygiene investment assessment
	Conduct a validation workshop to disseminate finding results	Study findings	Awaiting completion of the strategic sanitation and hygiene investment assessment

RISKS AND MITIGATION ACTIONS

USAID WKSP continued to use adaptive management to navigate potential project roadblocks and minimize associated risks. In Y1, the project identified the risks and potential mitigation plans listed in Table 11.

TABLE 11. IDENTIFIED RISKS AND MITIGATION PLAN	
CHALLENGE	MITIGATION ACTIONS
Even though the August 2022 general elections were largely peaceful, uncertainties before and after the elections, such as anticipated leadership changes, meant delays that affected project implementation.	USAID WKSP provided tools and support to all project staff to work remotely during the electioneering period to help minimize the impact of elections on project calendar despite a temporary pause on field activities.
Due to the collaborative nature of the project, some activities may be co-financed by county governments. Budgets take time to be formulated, so there may be some delays in implementation.	USAID WKSP is continuously engaging with and sensitizing county governments about their roles and the need for sufficient and timely resource allocation.
MHM is considered synonymous with pad distribution.	USAID WKSP has been changing the MHM narrative by introducing a three-pronged holistic approach, as stipulated in the national MHM Policy, which the project is adopting and using to upscale its activities.
Policy and regulatory gaps exist in sanitation and hygiene management.	USAID WKSP strategized support to counties to close policy gaps.
IRB clearance took more time than anticipated, which affected baseline assessment completion.	USAID WKSP regularly communicated with the IRB to fast-track approvals while undertaking preparatory activities in anticipation, including site mapping, county introductions, enumerator trainings and testing of assessment tools.

GRANTS UNDER CONTRACTS (GUC)

USAID WKSP completed its GUC manual in Q2 as part of start-up deliverables and received approval in Q3. Since then, USAID WKSP started laying the groundwork for issuing the first grants. The project's technical team met to discuss key focus areas and provided input on grant expressions of interest (EOIs) currently being finalized. The EOIs were shared in mid-Q4 through an advertisement in local dailies, as well as in all eight USAID WKSP counties. The project held a bidders' conference in mid-Q4, attended by 81 participants from local organizations and county governments. The conference's objective was to respond to questions and provide necessary clarification on the EOI.

As a result, USAID WKSP received 84 concept papers by the end of Q4, which were then immediately evaluated by the project technical evaluation committee. The project shortlisted 13 organizations, per the defined evaluation criteria specified in the EOI. In early Q1 Y2, USAID WKSP will conduct the first round of the proposal development workshop and anticipates full proposals and grant issuance by mid-Q1. USAID WKSP is intentionally ensuring that all GUCs contribute to defined project indicators and targets.

STRATEGIC ACTIVITY FUND (SAF)

In Y1, USAID WKSP issued an EOI for the SAF in the following key areas: expansion of delivery models, business incubation/mentorship and facilitation of vulnerable frontline sanitation workers, demand activation, innovative and impact-oriented business solutions in sanitation and MHM, and

transformational activities of MHM products and services. In Y2, USAID WKSP will proceed with the request for applications, conduct reviews and clinics with partners, and deploy the SAF.

ANNEX I: MEDIA ENGAGEMENT

1 – Daily Nation Newspaper – Tuesday May 24th, 2022. Titled: USAID to spend Sh. 2.8B to enhance proper sanitation in eight counties (See Annex A). The paper has daily estimated^[1] reach of approximately 4,379,400 readers.

2 – Star Newspaper – Featured a full page of the WKSP article on both print and e-version of the paper. (See Annex B). The e-version can be found on: <https://www.the-star.co.ke/counties/nyanza/2022-05-27-reusable-cheap-biodegradable-sanitary-pads-in-kisumu/>

3 – Ramogi TV – Feature MH issues at prime news time (7pm) and held a talk show at (9pm). See Annex C for images and comments from viewers. The TV station has an estimated reach of 37,229 viewers per day, covering the Luo speaking counties of Nyanza (Siaya, Kisumu, Homa Bay and Migori) and Nairobi.

4 – Video buzzes – WKSP produced and disseminated five short videos (30 seconds each) via various social media channels through a network of persons know on social media. First reach estimate is about 1 million. This will continue to cascade to other social media users over the years.

[1] <https://www.geopoll.com/blog/data-on-newspaper-magazine-readership-in-kenya/>

ANNEX 2: LIST OF DELIVERABLES

Table 12 below lists the USAID WKSP contractual deliverables submitted in Y1.

TABLE 12: LIST OF DELIVERABLES		
NUMBER	DELIVERABLE	DATE SUBMITTED
1.	Draft Y1 Work Plan	April 18, 2022
2.	Draft AMELP	April 18, 2022
3.	Draft Q2 Report	April 28, 2022
4.	Draft GUC Manual	May 16, 2022
5.	Y1 Work Plan Addendum	June 1, 2022
6.	Draft EMMP	July 17, 2022
7.	Draft Q3 Report	July 28, 2022
8.	Revised AMELP	August 12, 2022
9.	Communications Strategy	August 15, 2022
10.	Revised EMMP	August 29, 2022
11.	Draft Y2 Work Plan	August 31, 2022

ANNEX 3: FINANCIAL SUMMARY

The total expenditure for all costs incurred under the USAID WKSP contract for FY22 (February 2022 - September 2022) is \$1,299,743. The tables below provide a detailed breakdown of the expenses incurred in FY22 and the duration of the contract.

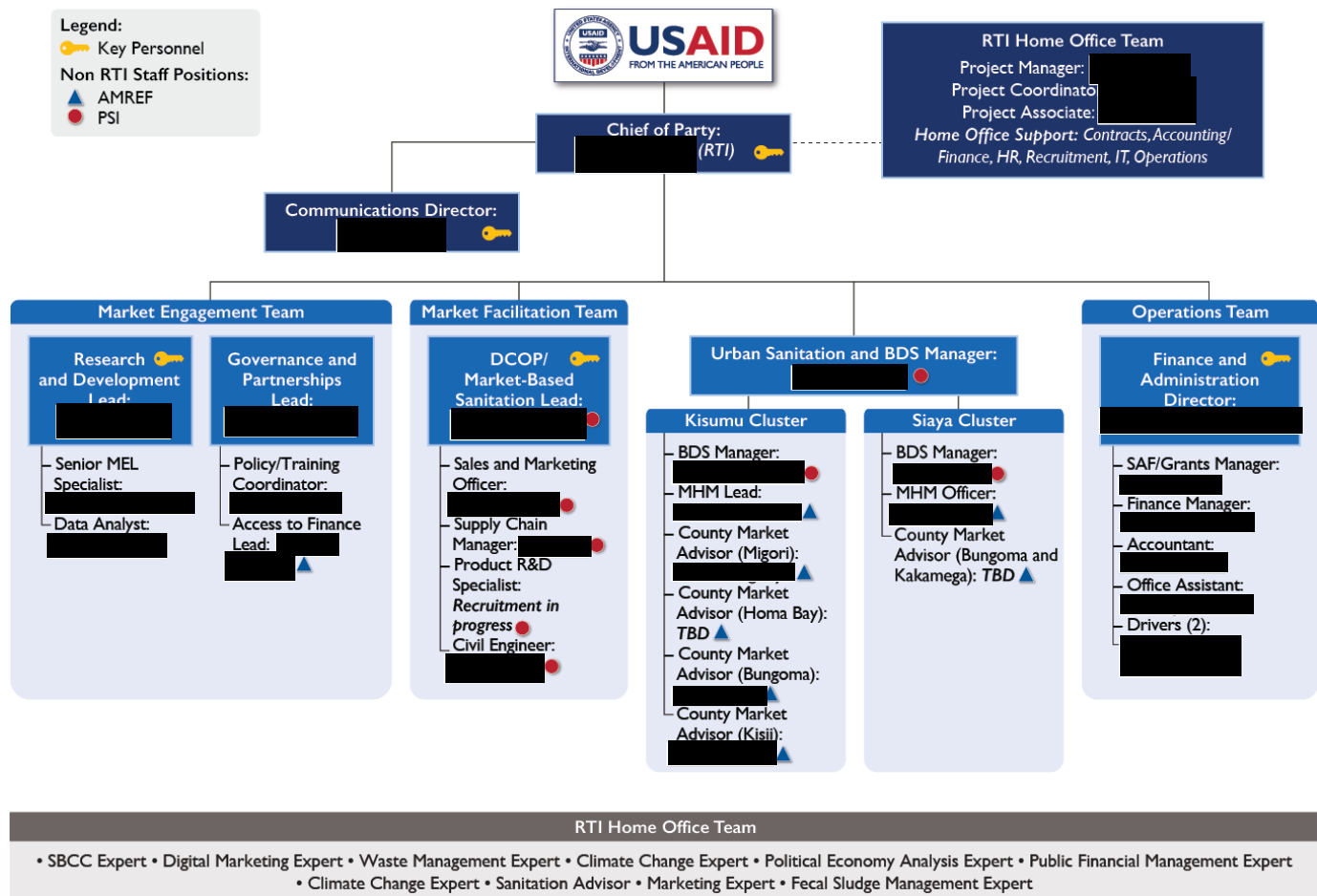
Table 1. USAID Western Kenya Sanitation Project Expenditures in FY2022:

Budget Summary by Item	Total Budget Amount	Obligated Amount	FY22 Expenditures (Feb-Sep 2022)
DIRECT COSTS	\$ [REDACTED]	\$ [REDACTED]	\$ [REDACTED]
INDIRECT COSTS	\$ [REDACTED]	\$ [REDACTED]	\$ [REDACTED]
TOTAL ESTIMATED COST	\$ [REDACTED]	\$ [REDACTED]	\$ [REDACTED]
FIXED FEE	\$ [REDACTED]	\$ [REDACTED]	\$ [REDACTED]
TOTAL ESTIMATED COST PLUS FIXED FEE	\$ [REDACTED]	\$ [REDACTED]	\$ [REDACTED]

Table 2. USAID Western Kenya Sanitation Project Funding Status:

	Contract to Date
Total Obligated Funding:	\$ [REDACTED]
Total Funds Expended:	\$ [REDACTED]
Remaining Funding:	\$ [REDACTED]

ANNEX 4: ORGANIZATIONAL CHART



ANNEX 5: PLANNED ACTIVITIES IN THE NEXT QUARTER (Y2Q1)

SO1: Analyze the S&H Market System, Target Markets, and Business Enabling Environment	
Stakeholders Consultation and Community Engagement	<ul style="list-style-type: none"> Conduct county sensitization meetings with the new/incoming relevant line departmental heads on the joint work plans developed Conduct joint review of the developed work plans and do joint signing at the county level with county leadership teams
Conduct PEAs	<ul style="list-style-type: none"> Hold quarterly interactive workshops Conduct quarterly pilot on the PEA question, specifically the tools and adjust using feedback Collect data using adjusted tools, facilitate desk reviews, KIs, among others Analyze PEA findings to synthesize the detailed notes from each discussion and identify the key themes, supporting findings (or evidence) and recommended actions Disseminate PEA findings to and develop work plan to respond to actionable issues
Conduct Assessment of Sanitation and Hygiene Supply	<ul style="list-style-type: none"> Conduct data collection/interview Review and analyze assessment findings
Household Survey for Market Sizing and Segmentation	<ul style="list-style-type: none"> Initiate, train and test data collection tool Implement survey and collect/translate data Analyze data and prepare findings report
Sanitation Mapping	<ul style="list-style-type: none"> Jointly develop data collection tools in consultation with technical team
Enabling Environment Review	<ul style="list-style-type: none"> Collect and analyze assessment data and findings Validate and disseminate knowledge products (workshops, media networks, policy brief, etc.)
SO2: Identify, Implement and Scale Pilots to Strengthen the Sanitation Market System	
Catalyze Product Systems, Delivery Models and Marketing Approaches	<ul style="list-style-type: none"> Hold quarterly sanitation technology/product systems scoping meetings with key County Technical teams (public works, Public Health, WSSPs, TVETs, artisan rep) Co-develop a county specific catalogue of sanitation products Co-develop draft training manuals and technical design for all sanitation products and services along sanitation value chain
Strengthen Sanitation Product System Offerings of Small Enterprises and <i>Fundis</i>	<ul style="list-style-type: none"> Conduct periodic (monthly) joint follow-ups to provide technical assistance to artisans/<i>fundis</i> in construction/installation of improved sanitation technologies across the counties and to improve on existing products and ensure quality Conduct refresher training where gaps have been identified in construction of improved sanitation technologies Conduct county specific MBS Trainings for sanitation actors (County, Subcounty PHOs, CHVs) Conduct quarterly stakeholders review meetings with key sanitation actors to review progress, challenges, and opportunities. Conduct engagement sessions with the respective county Departments of Education on inclusion of sanitation technology units in the masonry and plumbing.
Facilitate Expanded Delivery Models of <i>Fundis</i> Operations	<ul style="list-style-type: none"> Conduct market activations to create demand for improved sanitation products and services in the respective counties championed by CHVs Organize sanitation hackathons/contests for innovative sanitation products and services responsive to challenges, preferences and contexts

	<ul style="list-style-type: none"> Utilize SAF to support manufacturers and designers to modularize innovative sanitation products which are expandable, financially viable and sustainable Regular engagement sessions with private sector actors to improve efficiency of sanitation supply chain
Establish Partnerships for Improved Sanitation Services Delivery	<ul style="list-style-type: none"> Support operationalization of FSM service provision through county governments and WASREB engagement through provision of regulations in selected counties Coordinate with County Governments, Partners and water and sanitation utilities to review and evaluate sustainable FSM treatment and re-use options
Advance Sales and Marketing and Activate Demand	<ul style="list-style-type: none"> Design and implement capacity assessment of selected sanitation service providers Capacity building targeting market actors like local women's and youth groups and CHVs on problem-led sales and marketing Provide SAF to qualified BDS groups to advance sanitation sales and marketing
Increase Access to Finance to Scale Delivery Models	<ul style="list-style-type: none"> Convene a financial inclusion clinic with financial institutions to induct them to the project aims/objectives and reduce access to finance gaps Design mentorship and coaching tools on financial literacy Conduct mentorship and coaching for the on-boarded sanitation businesses on financial literacy Develop a manual to guide Business to Business, and Client Linkages with financial institutions Support in creating client linkages i.e., entrepreneurs, groups and individuals with financial institutions
SO3: MHM Market System Assessment and Development	
MHM Barriers and Enablers Report	<ul style="list-style-type: none"> Collect data, analyze and collate in report Conduct county specific validation and dissemination meetings on the report Develop action plan to address gaps and amplify enablers
Establish MHM Steering Committee	<ul style="list-style-type: none"> Conduct county specific sensitization meetings for the MHM SCs on MHM Provide technical support to MHM SCs through one-on-one coaching to ensure that they meet their key deliverable of creating and enabling environment for MHM private sector players Conduct quarterly review meetings with the MHM SCs to gauge progress and offer support
Develop and Launch MHM Campaigns	<ul style="list-style-type: none"> Develop WKSP MHM SBCC strategy MHM ToT Training Sensitize County First Ladies on MHM Roll out of the SBCC in targeted counties in collaboration with the private sector through mass media campaigns and community engagements to sensitize the public on MHM Form MHM Committees at the community level to facilitate community sensitization Conduct quarterly meetings at community units on MHM for feedback sessions on products and other market opportunities for MHM products and service Roll out county specific campaigns through HH visits and community forums Establish linkages with youth leaders and sports associations in specific counties for sensitization on MHM Participate in community dialogue days and create awareness on MHM Sensitize beach management units on MHM Commemorate global celebrations to sensitize communities on MHM Sensitize school health club on MHM and help cascade information to pupils, teachers

Catalyzing Product System Delivery Models and Marketing Approaches To Improve Accessibility Of MHM Products	<ul style="list-style-type: none"> • Create linkages between the CHVs, producers and manufacturers to test and employ innovative for low-cost delivery models of MHM products • Conduct market activations to create demand for new MHM products in collaboration with the private sector • Conduct quarterly stakeholders review meetings with key MHM actors to review progress, challenges, and opportunities. • Engage and link MHM enterprises with external government agencies to improve their products
Improve Sales and Marketing Delivery Models	<ul style="list-style-type: none"> • Map out suppliers and distributors of MHM products and develop a database • Conduct regular engagement sessions with private sector actors to improve efficiency of MHM products supply chain • Capacity building of selected enterprises/ groups on financial management (bookkeeping, value proposition, sales & marketing, record keeping) • Conduct door to door MHM product promotion by the CHVs in community units to enhance product demand • Conduct monthly review meetings with the CHVs and share progress, challenges, and successes
Improving MHM Waste Collection and Management Methods	<ul style="list-style-type: none"> • Review MHM Barriers and Enablers report to identify how users dispose menstrual waste • Identify and take stock of MHM waste management and disposal actors (database) • Develop compendium of the options available including their specifications • Host exhibitions for menstrual waste management • Utilize SAF to support manufacturers and designers to scale innovative waste management
SO4: Strengthen the Enabling Environment	
Strengthen Coordination Mechanism	<ul style="list-style-type: none"> • Finalize with the signing of co-created Workplan with the county • Review the scopes of different WASH Fora to establish their roles in S&H and provide support where necessary • Validate and disseminate WASH Fora status report on S&H for adoption by respective counties • Design targeted capacity strengthening plans for each forum OR Establish WASH forum and provide capacity strengthening support where none exists • Capacity Build LREB secretariat on Sanitation and MHM
Improve Regulation of Sanitation Services	<ul style="list-style-type: none"> • Support domestication of Kakamega Environmental Sanitation and Hygiene Policy and Domestication of the MHM policy • Support development of Homabay CIDP3 • Support development of Migori County ESH Bill / regulation • Dissemination of financial institutions scoping studies • Mainstream sanitation and MHM activities into CIDP for budget allocation • Conduct reviews with each county government and development partners to understand the effectiveness of the current M&E framework for sanitation • Hold workshops with the county and national government agencies to inform review findings and determine gaps and opportunities for collaboration and improvements • Organize B2B for SMEs and MFIs. • Sensitize the County Assembly Committees on Sanitation and MHM.
Improved Private and Public Financing	<ul style="list-style-type: none"> • Test and validate the tool based on data collected for accuracy and effectiveness • Sign MOUs laying groundwork for partnerships with financial institutions • Conduct a validation workshop to disseminate finding results • Summarize scoping study findings as knowledge products for wider dissemination

CROSS-CUTTING	
Advancing Collaboration, Learning and Adaptation (CLA)	<ul style="list-style-type: none"> • Apply assessment findings to identify project specific learning areas and gaps • Engage an institution of higher learning to establish a culture of learning and adaptation within the project • Develop learning agenda and set learning agenda questions and broad thematic areas for thought leadership • Implement actions to facilitate adaptive learning • Conduct quarterly pause and reflect sessions
Monitoring, Evaluation and Learning	<ul style="list-style-type: none"> • Jointly develop data collection tools in consultation with technical team • Printing of data collection tools as we await uploading on online portal • Develop an online system to capture project reports and data • Design protocols for all data storage, who can access, and how to access • Locked filing cabinet and restricted access for paper documentation • Conduct Data quality Audit on the data reported on Sanitation and MHM
Climate Change and Environment	<ul style="list-style-type: none"> • Dissemination of the EMMP report and its findings to counties • Stakeholder engagement to present the sanitation preparedness plan in the counties. • Environmental assessments of the potential environmental issues (natural calamities) on sanitation and hygiene systems and facilities • Conduct routine environmental monitoring in the project intervention areas

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