SUMMARY VERSION

2018–2023
Make a Splash!

Lessons learned from five years of sanitation and hygiene market strengthening

UNICEF does not endorse any company, brand, product or service.
An estimated 3.5 billion people are still living without safe toilets that protect human and environmental health.¹ That’s almost half the global population. These figures come with a devastating human cost. Each day, about 1,000 children under 5 die from diseases caused directly or indirectly by unsafe water, sanitation and hand hygiene.²

In 2018, UNICEF and LIXIL joined forces to make the Make a Splash! (MaS!) partnership. As UNICEF’s largest shared-value partnership for water, sanitation and hygiene (WASH), it combines the strengths of both organisations to accelerate progress towards Sustainable Development Goal (SDG) 6. More specifically, it aims to promote safe sanitation and good hygiene, increase the supply of hygiene and sanitation products and solutions, and strengthen sanitation markets.

Since it started in 2018 the MaS! partnership has reached 12.7 million people. Beginning in Ethiopia, Kenya and Tanzania, the partnership reached 2.9 million people in just three years. Building on this success, the partnership expanded to improve the lives of children and families in six countries by including India, Indonesia and Nigeria, reaching a further 9.8 million people by the end of 2023. Activities included supporting government-led, community-led total sanitation (CLTS) approaches and ensuring that a steady supply of affordable products was available where people needed them. Schools and health facilities were refurbished with products such as SATO Pans to serve as models for communities. Hygiene programmes were integrated to promote hand washing and supply facilities, such as SATO Taps.


The impact of five years of MaS!

12.7 million people have been reached with sanitation and hygiene services.

CONSUMER FINANCING

$4.9 million disbursed through 37 financing mechanisms supporting 255,887 people through partnerships with governments and financial institutions.

GOVERNMENT FINANCING

$2.2 million of government budget has been leveraged.

POLICY

43 policy instruments have been supported.

DATA

21 government data systems have been strengthened.

CAPACITY

738,517 stakeholders have received training.
After five years of positive and inspiring experience, UNICEF and LIXIL wanted to document the market-based sanitation approaches in each country and draw out the lessons learned on sanitation market development throughout the partnership. The research question guiding this study was: ‘How has MaS! contributed to strengthened sanitation markets?’

To answer the question, country approaches were analysed using a document review and interviews with LIXIL and UNICEF staff. Table 1 summarizes the different approaches taken in each of the MaS! countries.

<table>
<thead>
<tr>
<th>Country</th>
<th>Who is the consumer?</th>
<th>What is the approach?</th>
<th>Which market functions have been addressed?</th>
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<tbody>
<tr>
<td>Ethiopia</td>
<td>Rural households with an unimproved toilet.</td>
<td>Rural supply chain strengthening.</td>
<td>Skills, promotion, finance, policy and advocacy.</td>
</tr>
<tr>
<td>India</td>
<td>Rural households needing to repair or retrofit a single pit toilet to a twin pit toilet.</td>
<td>Supporting government retrofitting campaigns.</td>
<td>Research and development, promotion, finance, skills and policy and advocacy.</td>
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<tr>
<td>Indonesia</td>
<td>Urban or peri-urban households with non-compliant septic tank or in need of emptying services.</td>
<td>Bundling safely managed sanitation services into a digital platform.</td>
<td>Information for businesses on safe septic tanks, promotion, finance, regulation and monitoring.</td>
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<tr>
<td>Kenya</td>
<td>Rural first-time toilet users or upgraders found in eight counties.</td>
<td>Professionalization of community health promoters as toilet promoters and distributors.</td>
<td>Promotion, skills, finance and policy.</td>
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<tr>
<td>Nigeria</td>
<td>Rural households with no toilet or an unimproved toilet.</td>
<td>Supporting toilet business owners to supply sanitation goods and services.</td>
<td>Promotion, skills, finance and policy.</td>
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<tr>
<td>Tanzania</td>
<td>Rural or peri-urban consumers who are first time toilet users or toilet upgraders.</td>
<td>Integrating safely managed sanitation solutions into community-led total sanitation.</td>
<td>Promotion, skills and finance.</td>
</tr>
</tbody>
</table>

Table 1: Summary of MaS! country approaches.

Comparing country approaches can offer reflections on how countries have responded to common issues. This can guide programming in other countries facing similar concerns. Five key lessons have been distilled from the MaS! experience so far.
Lesson 1

Sustainable and inclusive market growth requires addressing barriers to household investment, such as a lack of supplier incentives, policy and regulatory issues, and a lack of access to finance.

UNICEF’s 2020 guidance on market-based sanitation provides good reasons why development agencies choose to work on making sanitation markets work better for people. Most sanitation improvements in lower-income countries are the result of people investing their own resources to buy a toilet of their choice from a supplier. Many sanitation markets, however, do not work well for poor consumers. Limited affordable options are available at convenient locations, and it may be hard to find skilled labour to install one. Even if the components for a desirable toilet are available, buying a toilet may not be a priority for a family due to cash flow and seasonal liquidity constraints. And local government housing or sanitation regulations may not incentivize a household to build, use or empty a toilet, even if incentives exist on paper.

One of the key lessons learned across different sectors is that to make markets function effectively, inclusively and sustainably, it is often necessary to take a holistic approach to market development. Early MaS! planning and reporting documents showed an initial emphasis on improving demand for toilets and ensuring products were available locally, without addressing some of the more systemic constraints. This is a critical first step in all market-based sanitation programmes. Over time, however, the partnership evolved to add last-mile distribution models and work on, for example, finance, policies, guidelines and regulations.


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Despite its abundance of water, Zanzibar faces a chronic shortage of safe drinking and farming water due to frequent groundwater contamination by seawater and sewage, exacerbated by poor infrastructure and heavy seasonal rains that can spread lethal diseases like cholera. In response, UNICEF and its partners have mapped over 1,000 water vendors and institutions, including schools and healthcare facilities that store water in bulk, distributed chlorine tablets, and trained nearly 500 vendors and institutions on their proper use.

The Make a Splash! partnership has helped to direct over US$2 million from government budgets to sanitation and hygiene improvements in the last five years.
Lesson 2

Public-private promotion – blending public health and private sales incentives – offers a smart way to create ongoing demand for sanitation.

Developing marketing or demand creation strategies that outlast short term donor-funded projects is a key challenge in strengthening sanitation markets. It is well known that widespread use of toilets and the safe management of waste achieve public health goals. This provides the rationale for governments to invest in building demand for sanitation. Sanitation enterprises also invest in marketing and sales because they have an incentive to break even and grow in the long term. Given there are both public health and private enterprise benefits of a household investing in a toilet or sanitation services, there is an argument to be made for a shared investment into creating awareness and demand.

‘Public-private promotion’, a joint effort that leverages both public health incentives and private enterprise sales goals, is a promising approach seen in all MaS! country contexts, albeit in different ways given the nature of the sanitation challenge in each country.

As Figure 1 shows, the relative effort of public versus private promotional efforts changes over time depending on consumer awareness of the sanitation issue.

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Reducing market fragmentation in both urban and rural contexts is key to strengthening markets.

The supply chains for the construction and management of sanitation systems are fragmented in most of the MaS! contexts, particularly in the four African countries. MaS! countries have tested multiple approaches to connect rural consumers to sanitation supply chains. This is in addition to mapping and creating links between consumer-facing outlets, such as hardware stores and masons. They included working with sanitation businesses and builders in Ethiopia and Nigeria, community health promoters in Kenya, and local government officials in Tanzania. Supporting these efforts, the partnership trained over 738,000 stakeholders across all countries through various approaches, including trainings and mentorship.

In contrast to the last-mile distribution challenges found in many rural African contexts, products are generally more available in Indonesia and India. The challenge in these contexts is not connecting consumers to existing supply chains, but improving relationships and reducing fragmentation among existing value-chain actors. For example, in Indonesia, a digital platform aims to overcome fragmentation by consolidating all actors along the entire sanitation value chain, such as local public health promoters, financial institutions, suppliers of approved septic tanks, pit emptying businesses and local regulatory agencies. In India, the approach to overcome fragmented value-chain actors is better described as convergence with existing public financing and infrastructure, for example persuading publicly funded self-help groups to add sanitation to their lending portfolios or creating links between urban faecal sludge service providers with outlying rural consumers.

Figure 2 summarizes the types of approaches taken by the MaS! programmes to overcome different market fragmentation challenges.
Lesson 4

Smart public finance can expand and sustain access to safe sanitation and strengthen markets.

Finance is a major entry point to strengthen sanitation markets. A 2020 report⁶ estimated an annual investment of US$105 billion will be needed to meet SDG 6.2 by 2030. The typical response to the large investment costs is to point out that neither public nor development partner funding will be sufficient to fill the gap and that private sector investment will be needed. The opportunity to leverage private sector investment is

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often one of the reasons why governments and their partners opt to support market-based approaches to development challenges. Yet, in practice, commercial finance at scale has not materialized to date. Recent analysis showed that between 2017 and 2019, only 1.5 per cent of all commercial finance — the equivalent of 2 per cent of the sector funding gap — mobilized globally was directed to water and sanitation. Advocating different uses of existing public finance will thus be important to ensure everyone, everywhere, has a safe toilet system to use.

Using public sources of funding differently or advocating to spend on things that support sanitation markets has been a key success of the MaS! partnerships. As Figure 3 shows, these range from direct investment in toilets for existing public subsidy recipients in Ethiopia (model 1), to public lines of credit for financial institutions to on-lend to consumers in India and Nigeria (model 2), and to supporting the ongoing promotion of sanitation in India and Kenya (model 3).

The MaS! partnership has successfully influenced governments to use public sources of funding to strengthen the sanitation market. Over US$2 million from government budgets have been directed to sanitation and hygiene improvements in the last five years, with governments in Ethiopia, India, Indonesia, Kenya and Nigeria making specific funding commitments. For example, Kitui County in Kenya provided stipends for community health promoters who help communities get involved in sanitation and hygiene. A mayor in Indonesia introduced a sanitation tariff to help fund desludging services for all residents. Ongoing advocacy in Ethiopia includes pushing for tax exemptions on the importation of sanitation products and making sanitation a defined loan item within the mainstream banking sector.

Meanwhile, the partnership facilitated nearly US$5 million in household loans to strengthen sanitation markets. In India, MaS! helped link state governments with banks and microfinance institutions, while in Indonesia, the partnership created credit schemes for households purchasing safe septic tanks. The partnership explored different innovations, including a ‘transactional ledger’ banking app in Kenya to encourage local groups to save and lend each other money for sanitation improvements.

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Lesson 5

A more nuanced understanding of policy enablers or blockers is key to creating a stable and well-functioning market.

In some places markets are not reaching their full potential due to affordability, lack of information or other barriers. This is not because of a lack of demand, but because policies, strategies, guidelines or laws do not support sanitation and hygiene markets. By supporting the development or strengthening of over 40 policy instruments, the MaS! partnership has deepened its understanding of how policies, guidelines, or bylaws support or inhibit sanitation markets processes and outputs. These efforts can be understood as three types of intervention:

- **Support an enabler**: This type of intervention supports the creation or revision of a policy, strategy, law or guideline, enabling an inclusive and efficient sanitation market. Most MaS! experience falls into this category. For example, India supported a state government to develop a finance and retrofitting strategy which was not only useful for planning, but also helped to persuade a different government agency to provide a line of credit to self-help groups for sanitation.

- **Remove a policy blocker**: This type of intervention advocates a change in rules that inhibit sanitation market efficiencies and inclusivity. For example, advocacy in Ethiopia for reduced taxes on imported sanitation goods is expected to contribute to sector growth by removing restrictive policies on import taxes.

- **Sustain a gain**: This type of intervention supports a new policy, strategy, law, etc., that sustains something that has been proven to work. A good example of this type of challenge is the Kitui County health bill in Kenya, which provides public monthly stipends to community health promoters (CHPs) who advocate sanitation. It is built on a positive, practical experience of leveraging the CHP structure and trusted relationships in communities to promote and supply sanitation to rural consumers.

Momina washes her hands with soap. UNICEF provides clean water in her school and to the community.
Below is a summary of the five key lessons learned over the partnership so far. One of the most important lessons has been the need to work beyond the supply and demand of sanitation and hygiene products and services. The MaS! experiences build on the growing body of evidence that programmes must address factors such as finance for consumers and businesses or the establishment of standards and regulations for product and service quality. Much has been learned about how to promote sanitation skilfully using public and private resources. Various strategies to overcome market fragmentation show that new solutions to old problems are possible, such as connecting consumers to supply chains or consolidating value-chain actors. Many sanitation market approaches focus on increasing commercial finance in the sector. MaS! has shown that public sources of finance can also be directed to improve how sanitation markets work, and such efforts are often more catalytic. MaS! has shown that quick progress can be made when identifying and addressing specific rules that block, enable or sustain changes.

Figure 4: Summary of lessons learned in the MaS! partnership

The MaS! partnership has shown how two organizations with different mandates can apply their complementary strengths to enable people to build, upgrade or safely empty a toilet in contexts as diverse as rural Kenya and urban Indonesia. Much work remains, however, to ensure everyone, everywhere, uses a safe sanitation system by 2030. MaS! will continue to push the boundaries of market strengthening and facilitate the exchange of experiences and learning in the coming years. The box below provides some suggestions to other country programmes or initiatives working to strengthen sanitation markets and accelerate progress towards SDG target 6.2.
Box 1

Strengthening sanitation markets: Incorporating lessons from MaS! into new or existing sanitation market strengthening initiatives.

UNICEF provides comprehensive guidance on how to implement market-based sanitation programmes. UNICEF’s recently released Game Plan to Reach Safely Managed Sanitation provides information on how to support governments to reach SDG 6.2 by 2030. The MaS! experience and lessons learned offer practical steps to support better functioning sanitation markets.

Beyond supply and demand: Identify and address ‘what else’ beyond promoting and distributing toilets would catalyse a more efficient and inclusive sanitation market, such as interventions to strengthen finance, policies and skills.

Promotion: Identify public agencies and businesses that share common goals. Public agencies engage in promoting sanitation, such as community health promoters, public utilities and district health offices. Businesses, such as manufacturers, retailers, builders or financial institutions, have an incentive to promote sanitation to sell their wares. Brokering relationships between public agencies and private companies has been one tactic MaS! has successfully employed to facilitate this ‘public-private promotion’.

Market fragmentation: Sanitation supply chains are fragmented in nearly all contexts. Where last-mile distribution is the challenge, look for non-traditional actors who may have an incentive and ability to promote and supply toilets alongside their other work. In contexts where fragmentation among value-chain actors is the greatest problem, experiment with strategies that incentivize collaboration, such as between manufacturers and installers, financiers and retailers, or regulatory agencies and emptiers.

Public finance: Commercial finance has been slow to crowd into the sanitation market, especially for poor rural consumers. A key lesson from MaS! has been the positive experience of well-targeted public finance to enhance private sector activity.

Rules that enable, block or sustain: Focus efforts on addressing rules that inhibit efficient sanitation market performance, such as creating or updating policies, guidelines or bylaws.

Ethiopia

2022–2023 Results

Sanitation

836,100 people gained access to sanitation through SATO and other products (472,680 through a new subsidy and 363,420 through market-based sanitation).

Policies

9 national and local government policy instruments were supported by UNICEF.

Finance

6 financing mechanisms or products were made available to consumers through this partnership.

SATO sales

72,684 SATO Pans were sold.

Hygiene

150,000 people gained access to basic hand hygiene.

“It’s been three months since I started using the SATO pan. It doesn’t smell, there are no flies, and I am no longer afraid to send my children to use the toilet,” says Misra Mohammed Abdi. Misra is happy with the change she sees in the community. With the help of health workers, the community in the Kassa Oromia and Awdal kebeles (sub-districts) of the Oromia region has successfully become open defecation-free (ODF).
Sanitation
1,570,948 people gained access to at least basic sanitation indirectly through strategic interventions with Bihar and Odisha governments, including 1,291,662 who gained access to safely managed sanitation.

Policies
12 state government policy instruments were supported by UNICEF.

Hygiene
1,429,590 people gained access to basic hand hygiene.

Micro-loans
US$2,940,000 was lent to 118,153 customers.

Government funding leveraged
US$816,460 from state governments for capacity building and incentives for local groups.

Children at the Dr. Isac Santara Balniketan centre in Sambalpur, Odisha, India, are washing their hands in the presence of a LIXIL representative.
Sanitary workers from UPT PALD (Unit Pelaksana Teknis Pengelolaan Air Limbah Domestik) and IPLT (Instalasi Pengolah Lumpur Tinja) Lumajang, pose in front of a fecal sludge truck.
Kenya

2022–2023 Results

Sanitation

534,719 people gained access to at least basic sanitation in seven counties through this partnership, including 461,986 who gained access to safely managed sanitation.

Policies

8 national and local government policy instruments were supported by UNICEF.

SATO sales

111,610 SATO products have been bought and installed since 2018 through this partnership.

Schools

At least 9,500 schoolchildren in 56 schools in six counties have access to safe toilets in a learning environment provided by The School Toilet Enhancement Programme.

Budget

US$919,141 national or local government budget was allocated to sanitation and hygiene improvement actions, with support from this partnership.

Finance

7 financing mechanisms or products were made accessible by this partnership, granting access to 4,287 people, and a total of US$307,215 in loans were disbursed.

Hygiene

207,682 or more people gained access to basic hand hygiene.

Kenya 2022–2023 Results

Hygiene

207,682 or more people gained access to basic hand hygiene.

Schools

At least 9,500 schoolchildren in 56 schools in six counties have access to safe toilets in a learning environment provided by The School Toilet Enhancement Programme.

Budget

US$919,141 national or local government budget was allocated to sanitation and hygiene improvement actions, with support from this partnership.

Finance

7 financing mechanisms or products were made accessible by this partnership, granting access to 4,287 people, and a total of US$307,215 in loans were disbursed.

Jane Munguti, a teacher and health club matron, talks to students about safe sanitation in Kyuso Primary, Kitui County, Kenya.
Nigeria

2022–2023 Results

Sanitation

617,821 people gained access to at least basic sanitation, including 381,513 who gained access to safely managed sanitation.

Policies

2 national and local government policy instruments were supported by UNICEF.

SATO sales

6,301 SATO products have been bought and installed since 2018 through this partnership.

Hygiene

462,475 people gained access to basic hand hygiene.

Budget

US$85,310 national or local government budget was allocated to sanitation and hygiene improvement actions, with support from this partnership.

Finance

5 financing mechanisms or products were made accessible by this partnership, 12,989 users were able to access them, and a total of US$945,769 in loans were disbursed.

Volunteer Hygiene Promoters teaching community members good hygiene and sanitation in Nigeria.
Tanzania

2022–2023 Results

Sanitation
1,935,508 people gained access to at least basic sanitation through this partnership, including 343,355 who gained access to safely managed sanitation.

Policies
1 national and local government policy instruments were supported by UNICEF.

SATO sales
69,686 SATO products have been bought and installed through this partnership.

Hygiene
1,636,682 people gained access to basic hand hygiene.

Budget
US$340,590 national or local government budget was allocated to sanitation and hygiene improvement actions, with support from this partnership.

Finance
2 financing mechanisms or products were made accessible by this partnership, 212 users were able to access them, and a total of US$4,906 in loans were facilitated.

Salum Issa Salum and Shaib Mbawala Salum, experts in SATO Pan installations, proudly exhibit a prime example of the SATO pan, before an installation at a community member’s home. Their demonstration symbolizes the concerted effort to improve community health and well-being through accessible sanitation solutions. Make a Splash! partnership in collaboration with the Zanzibar government, emphasizes a collective commitment to elevate hygiene and sanitation practices.