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IMPLEMENTATION COMPLETION AND RESULTS REPORT

TF017278

ON A

SMALL GRANT

IN THE AMOUNT OF USD 4.85 MILLION

TO THE

MINISTRY OF LOCAL GOVERNMENT AND RURAL DEVELOPMENT

FOR

OBA URBAN SANITATION FACILITY FOR THE GREATER ACCRA METROPOLITAN AREA
(GAMA) (P145139)
{DECEMBER 20, 2018}

CURRENCY EQUIVALENTS

(Exchange Rate Effective November 30, 2018)

Currency Unit = GHS (New Ghanaian Cedis)

GHS 4.96 = US\$1

US\$1.38 = SDR 1

July 1 - June 30

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ABBREVIATIONS AND ACRONYMS

BCC	Behavior Change Communication
CL4D	Collaborative Leadership for Development
DO	Development Objective
EA	Environmental Assessment
EHSD	Environmental Health and Sanitation Directorate
FI	Financial Institution
GAMA	Greater Accra Metropolitan Area
GPOBA	Global Partnership in Output Based Aid
IP	Implementation Performance
IVA	Independent verification Agent
LGPCU	Local Government Project Coordinating Unit
LICs	Low Income Communities
M&E	Monitoring and Evaluation
MLGRD	Ministry of Local Government and Rural Development
MMA s	Metropolitan and Municipal Assemblies
MSWR	Ministry of Sanitation and Water Resources
OBA	Output Based Aid
RRI	Rapid Results Initiative
SPI	Sub-Project Implementers
SWP	Sanitation and Water Project
UESP2	2 nd Urban Environmental Sanitation Project

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DATA SHEET

BASIC INFORMATION

Product Information

Project ID	Project Name
P145139	OBA Urban Sanitation Facility for the Greater Accra Metropolitan Area (GAMA)
Country	Financing Instrument
Ghana	Investment Project Financing
Original EA Category	Revised EA Category
Partial Assessment (B)	Partial Assessment (B)

Organizations

Borrower	Implementing Agency
Ministry of Finance	Ministry of Sanitation and Water Resources, Ministry of Sanitation and Water Resources

Project Development Objective (PDO)

Original PDO

The Project Development Objective (PDO) is to increase access to improved sanitation to people living in low income communities in the Greater Accra Metropolitan Area (GAMA).

The development objective will be achieved by providing Output based Aid (OBA) subsidies to service providers as an incentive to provide access to improved sanitation to low-income households. OBA subsidies will be provided for the construction of sanitation facilities and the provision of desludging services. The subsidies will bridge the gap low-income households face when trying to install in-house sanitation facilities and stop open defecation or the use of public toilets. The project will also leverage financial resources from micro-financing institutions and support the scale up of business models that include soft loans for the provision of sanitation facilities in low income communities (LICs) of the GAMA.

**FINANCING**

	Original Amount (US\$)	Revised Amount (US\$)	Actual Disbursed (US\$)
Donor Financing			
TF-17278	4,850,000	4,850,000	4,850,000
Total	4,850,000	4,850,000	4,850,000
Other Financing			
Local Communities	3,910,000	0	0
Total	3,910,000	0	0
Total Project Cost	8,760,000	4,850,000	4,850,000

KEY DATES

Approval	Effectiveness	Original Closing	Actual Closing
05-May-2014	07-Mar-2015	30-Jun-2018	30-Jun-2018

RESTRUCTURING AND/OR ADDITIONAL FINANCING

Date(s)	Amount Disbursed (US\$M)	Key Revisions
09-Jun-2017	0.72	Change in Implementing Agency Change in Results Framework Reallocation between Disbursement Categories Change in Disbursements Arrangements Change in Institutional Arrangements

KEY RATINGS

Outcome	Bank Performance	M&E Quality
Satisfactory	Moderately Satisfactory	Modest

**RATINGS OF PROJECT PERFORMANCE IN ISRs**

No.	Date ISR Archived	DO Rating	IP Rating	Actual Disbursements (US\$M)
01	14-Dec-2015	Satisfactory	Moderately Satisfactory	0.18
02	16-May-2016	Moderately Satisfactory	Moderately Unsatisfactory	0.72
03	10-May-2017	Moderately Unsatisfactory	Moderately Unsatisfactory	0.72
04	26-Oct-2017	Moderately Unsatisfactory	Moderately Satisfactory	0.72
05	29-Jun-2018	Highly Satisfactory	Satisfactory	4.85

ADM STAFF

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I. PROJECT CONTEXT AND DEVELOPMENT OBJECTIVES

A. CONTEXT AT APPRAISAL

Context

1. The project was prepared within the context of the US\$150 million GAMA Sanitation and Water Project which was designed with the advice from the GOG-Development Partners Water and Sanitation Working Group. The Output Based Aid grant was included to bridge the financial gap between demand and supply in the LICs through the provision of subsidies for building household toilets and for toilet desludging services in eligible low-income communities in the Greater Accra Metropolitan Area (GAMA) of Ghana, and to support the operations and maintenance of sanitation facilities by the Metropolitan and Municipal Assemblies (MMAs). Thus, the OBA fund was to provide small subsidies to poor households to install safe sanitation facilities. The MMAs proposed priority low-income communities (LICs) to benefit from the project based on agreed selection criteria including population density, environmental health conditions, and degree of access to alternative sanitation services. The type and level of sanitation facilities and services was to be identified and agreed with each community through a participatory process. The OBA Grant Agreement for US\$4.85 million was approved on May 5, 2014 and signed between the World Bank and the Government of Ghana on March 17, 2015. The closing date was June 30, 2018. The Grant was funded out of the GPOBA DFID Challenge Trust Fund.

2. The GAMA Sanitation and Water project was prepared at a point when Ghana was experiencing strong and sustained economic growth translating into strong sub-economic improvements. Economic growth had been accompanied by rapid urbanization in the Greater Accra Metropolitan Area. Ghana critically needed to improve its sanitation coverage, sludge and solid waste management. The Government of Ghana had committed itself to improving sanitation and water and had then (2013) pledged to spend US\$200 million per year on sanitation and water and an additional US\$150 million for hygienic treatment of sewage and fecal sludge. The provision of basic services had not kept pace with the rapid growth of GAMA and it was particularly affecting people living in the low-income areas where entire families were crowded in single rooms leased as 'compound houses' that usually lacked basic sanitation and water services or had inadequate water facilities. As a result, most urban poor had to rely on water vendors and the use of public toilets at GHC 0.50/use or practiced open defecation, which significantly affected economy and quality of life. The JMP rating for improved sanitation at the time was 14 percent which was then only higher than that of Sudan, a fragile country. Ghana critically needed to increase and improve wastewater, sludge and solid waste management. The GAMA includes the Capital city of the Republic of Ghana, Accra, and the major industrial city of Ghana, Tema. At the appraisal stage in 2013, the GAMA spread across 11 Metropolitan and Municipal Areas with over 3.6 million people. The current population of GAMA is about 4.2 million and is expected to reach 5 million by 2020, and 14 million by 2050. In addition to permanent urban dwellers, a large floating population comes to the capital to trade or work, imposing further pressure on delivery of basic services. The emphasis on the low-income areas of the project resulted from the fact that even though the whole GAMA's infrastructure development lags way behind the rapid geographical and population growth, the situation is worse with low income areas. The low-income communities consist mainly of slum areas which are characterized by high population density and lack of basic services: entire families live in single rooms in "compound houses" that often lack sanitation facilities and water supply. Poverty is a common feature of many of the slum residents.

3. The OBA Project's focus was on lower-income households in GAMA, defined for purposes of geographic targeting



as areas where “75 percent of the families who live in one single room, lack basic sanitation and water services or have inadequate facility, and 75 percent of the households are without in-house sanitation facilities”¹

4. The disbursement performance of the GPOBA grant stood at 100 percent as of the end of October, 2018. The total expenditure on the GPOBA Grant borrower’s designated account as of December 21, 2018 was US\$4.85million representing the actual amount expended on subsidies, technical services and operational costs of implementing the GPOBA project activities from inception.

Key Sector Issues:

5. Ghana performs poorly with respect to sanitation, with only 15 percent of the population using improved, unshared toilet facilities, while 23 percent do not have access to *any* sanitation facility (UNICEF, 2015). Because of lack of basic sanitation, most urban poor rely on the use of public toilets and or are forced to practice open defecation. Environmental Sanitation services in Ghana fall under Metropolitan, Municipal, and District Assemblies (MMDAs), who have the responsibility for infrastructure development, management of human settlements and the environment. LICs in the cities have largely been unplanned and lack many amenities. Reliance on pan/bucket latrines and other unsanitary systems is widespread in LICs. Users of public toilet facilities are widely dissatisfied with the service as several of them are unclean and inconvenient. Only 10 percent of people in GAMA had sewerage, but they are often clogged, and the wastewater was not treated – sludge from domestic and public septic tanks was mainly collected by vacuum trucks and most of it ended up discharged untreated into the sea. The OBA project was to facilitate the construction of new improved latrines by households which did not have household toilet facilities and had been relying on public latrines or were involved in open defecation.

6. A key factor in the implementation of an OBA project was the independent verification of completed facilities. This ensured the delivery of quality products before OBA funds were disbursed.

Household toilets:

7. MMAs are directly responsible for waste collection, treatment infrastructure and delivery of waste management services; the acquisition and installation of household toilet is the responsibility of the household itself. Households in LICs are mostly located in compound houses, each hosting about 10 to 20 households, and many rely on public toilets rather than household installed toilets. The MMAs support the communities with public toilets which are meant to serve commuters, but they have been turned into community toilet as many residents lack household toilet facilities. The project identified the need to facilitate the provision of household toilets through behavior change communication, identifying improved technology options and subsidies to make facilities affordable to LICs.

Faecal Sludge disposal:

8. At the onset of the project, it was estimated that over 4,000m³ of faecal sludge/ septage was generated and disposed of daily from the various on-site sanitation facilities around GAMA. Despite public sector led provision of several treatment facilities in the past, poor management practices resulted in their gradual deterioration over the years and

¹ Darteh et al., 2017. The project appraisal document (World Bank, 2013, para. 33) suggests the criterion as “75 percent of the households live in one single room and 75 percent of the households do not have access to improved sanitation facilities.” However, “household” appears to be used in different senses by different sources: in some cases, it refers to the family unit, defined as using the same cookpot (Census definition); in others, it seems to refer to the compound house, in which several family units (related or not) may live. In this report, “household toilet” includes one serving multiple households within one compound house. An “improved sanitation facility” is defined as “one that hygienically separates human excreta from human contact,” and does not include pan latrines or shared facilities such as public toilets (UNICEF, 2015).



significantly reduced treatment capacity. Almost all of the existing fecal sludge/septage treatment facilities in GAMA constructed before 2015 were non-functional. In the GAMA, septic sludge was typically collected by vacuum tankers of various sizes which usually charged up to US\$60 per service. However, due to affordability constraints, especially in the LICs, facilities were often emptied manually and sludge dumped indiscriminately, as many of the septage treatment plants had broken down. To address this problem, the OBA project also provided a 50 percent subsidy for household septic sludge collection while the main GAMA SWP project included the rehabilitation of one of the sludge treatment plants in one of its components.

Main GAMA SWP Project:

9. The main GAMA SWP project has four components; (1) Provision of environmental sanitation services and water supply to priority low income areas; (2) Improvement and expansion of the water distribution network; (3) Improvement and expansion of wastewater and septage collection, transportation, treatment and disposal; and, (4) Institutional Strengthening; The GAMA SWP project provides full funding to cover Components 2,3,4 while the OBA funds covered component 1 providing subsidies to the construction of household toilets and desludging services for the most vulnerable LICs. The main objective of Component 1 was to increase access to environmental sanitation services and water supply in low-income areas with strong focus on liquid sanitation (excreta disposal). Domestic and institutional sanitation and water supply facilities are financed under this component which included the promotion and construction of household sanitation facilities in LICs through targeted subsidies. The OBA funding was an important element to extending services to the LICs where affordability was an issue while ensuring results were achieved as intended.

Rationale for Bank Assistance and Financing:

10. The OBA Project was consistent with the World Bank Group's Ghana Country Partnership Strategy (CPS) for FY2013-2016 (Report No. 76369-GH), which *inter alia* focuses on improving health outcomes in a sustainable manner. The CPS made specific reference to the effect that improved sanitation methods and access to safe water and sanitation would reduce the outbreak of diseases such as cholera and diarrhea, as well as other communicable diseases, which would also lead to improvements in child health. The beneficiary communities under the project had high rates of poverty and very low access to basic sanitation facilities and for the past years had recorded high incidence of cholera.



The original PDO for the OBA component and changes

11. The PDO of the OBA grant was to increase access to improved sanitation to people living in LICs in GAMA by partially subsidizing the access to new and sustainable toilet facilities. The PDO indicators are as follows:

The key indicators that measured achievement of project objective were:

- i. People provided with access to “improved sanitation facilities” under the project;
- ii. Direct project beneficiaries of which female (percentage);
- iii. People provided with access to subsidized desludging services under the project.

12. The original project targets were 6,600 improved sanitation facilities constructed, and 6,167 desludging operations supported to benefit 132,000 and 72,000² people respectively.

13. OBA subsidies provided for: (i) 50 percent of the proposed cost of the sanitation facility up to the equivalent of US\$600; and (ii) 50 percent of the cost of the desludging operation up to the equivalent of US\$30 per desludging operation. The subsidy level was set based on the unit cost of technologies proposed.

14. **Restructuring of the Project:** As part of the restructuring, the subsidy amount was increased from 50 percent to 70 percent for the cost of both the toilet and the desludging operations. This meant re-allocation of funds as follows:

- the reallocation of US\$30,000 from external audit budget line to subsidies for sanitation facilities as the external audit was covered under the main GAMA Sanitation and Water project.
- reallocation of US\$200,000 from project management component to subsidies for sanitation facilities and to replenish the operating cost budget line. The OBA project was managed by the same team as the main GAMA project and their salaries were thus shared by the two projects.
- the reallocation of US\$537,000 from desludging subsidies to subsidies for household sanitation facilities. The reduction in the subsidy amount was because of scaling down the desludging component from 6,167 operations to 200 operations.

15. Following the reallocation, the total amount of subsidies for sanitation facilities increased from US\$3.35 million to US\$4.02 million. The new estimates that took into account the availability of new technologies and price changes showed that the project could subsidize 7,600 facilities from the original 6,600. Ultimately 7,865 household sanitation facilities were built.

16. As part of the restructuring, project targets were revised. The revised project targets were 6,600 improved sanitation facilities constructed to benefit 39,600 people, and 200 desludging operations to benefit 1,200 people. The number of beneficiaries of the household toilets was scaled down from 132,000 people, based on the original assumption that each toilet would serve 20 people, to 39,600 people, using 6 people per household. The 20 people were estimated beneficiaries per compound house. A compound house was initially considered a household and targeted for a household toilet. It was later realized that a compound house contained many household with an average of 6 persons per household. Some of the compound houses have about 10 households. Thus, many compound houses



benefited from the provision of more than one household toilet. A revised assumption of about 6 people per household was made resulting in a total of 39,600 for the target 6600 household toilets. The scaling of the desludging operations from the originally planned 6,167 desludging operations to 200 desludging operations was because virtually all the target household toilets constructed under the project did not get full for desludging during the project period because of the digester technology used for the facilities. The digester provides for long use of toilets before desludging. Thus the 200 desludging operations were for school toilets within the project area.

Beneficiaries

17. The project targeted low income communities in the GAMA area. The project came at a time when most of the landlords of the compound houses showed very little interest in household toilets and preferred using available space for rooms for rental and leaving their tenants to depend on public toilets. To achieve the outcomes of the project, behavior change promotion was considered a key factor to generate demand for household toilets. It was however realized that actual construction would slow down because of financial constraints of the target group. The OBA funding was therefore envisioned to provide subsidies to make the household toilets more affordable for the targeted low-income population. The OBA subsidies were provided for: (i) 50 percent of the proposed cost of the sanitation facility up to the equivalent of US\$600; and (ii) 50 percent of the cost of the desludging operation up to the equivalent of US\$30 per desludging operation. The subsidy level was set based on the unit cost of the proposed technologies and the assessed willingness and ability to pay by the tenants. This 50 percent subsidy level was later revised to 70 percent to bridge the affordability gap.

Project Management

18. The project was managed by a Project Coordinating Unit (PCU) which was hosted by the Ministry of Local Government and Rural Development which was responsible for the sanitation sector. The MMAs with their Waste Management Departments were responsible for the provision of overall oversight and monitoring in their respective jurisdiction and reported to the Ministry of Local Government. A new Ministry of Sanitation and Water Resources was established in 2017 which took over the sanitation sector responsibilities at the policy level but the MMAs continued to report to the Ministry of Local Government and Rural development. The PCU moved to the new Ministry of Sanitation and Water resources and continued to work closely with the MMAs.

B. OTHER CHANGES DURING IMPLEMENTATION

19. The restructuring of the OBA project, in May 2017, included some amendments to the Grant Agreement as follows: 1) Change in Implementing Agency (change in institutional arrangement); (2) Change in subsidy amount (3) Change in Results Framework (4) Reallocation between disbursement categories (change in disbursement arrangement); (5) Change in legal agreement.

- **Change in the implementing agency (Change in institutional arrangement)** from the Ministry of Local Government and Rural Development to the Ministry of Water and Sanitation. In January 2017, the Government of Ghana created the Ministry of Sanitation and Water Resources and the responsibility for policy guidance and oversight for management of all water and sanitation activities was reassigned to the new ministry.
- **Change in subsidy amount.** The subsidy amount was revised for both the household sanitation facility and the

² The 72,000 are part of the 132,000 beneficiaries of the new sanitation facilities as the desludging operations were intended for that group.



desludging services from 50 percent to 70 percent. This was in response to a request by the Government of Ghana in April 2017, through a formal restructuring letter, which requested the World Bank to raise the subsidy amount from 50 percent to 70 percent of the cost of the sanitation facility in order to bridge the affordability gap of the households. Since project appraisal in 2014, prices including for sanitation facilities grew disproportionately more than household incomes.

- Change in **Results Framework to include achievable indicators and targets**. The number of beneficiaries to the household toilets was scaled down from 132,000 people, based on the original assumption that each toilet would serve 20 people, to 39,600 people, based on a revised assumption of about 6 people per household. With the increase in funds available for toilet subsidies, the total number of household toilets was projected at 7,600. The number of desludging operations was scaled down from the originally planned 6,167 desludging operations to 200 desludging operations, estimated to benefit 1,200 people.

20. **Reallocation of Grant proceeds among components and disbursement categories (Change in disbursement arrangement)** to reflect changing priorities and expenditure projections during implementation. Following the scaling down of the desludging component from 6,167 operations to 200 operations, the balance of US\$537,000 was reallocated to subsidies for sanitation facilities. An amount of US\$30,000 was reallocated from external audit budget line to subsidies for sanitation facilities. An amount of US\$200,000 was reallocated from project management to subsidies for sanitation facilities and operating costs. The IDA and OBA project were managed by the same team and the salaries were shared by the two projects. The operating costs budget line was replenished with US\$100,000. Following the reallocation, the total amount of subsidies for sanitation facilities increased from US\$3.35 million to US\$4.02 million. The restructuring paper projected an increase in the total number of toilet facilities from 6,600 to 7,600. Ultimately 7,865 household toilets were built.

21. **Change in legal agreement to allow for adjustments in the project implementation arrangements** to provide for interim verification of project outputs made prior to the finalization of the recruitment of an Independent Verification Agent (IVA). The initial terms of the legal agreement provided for payment of subsidies based on the Interim Verification Reports (IVR) produced by the IVA. The amendment allowed for retroactive payment of subsidies under of the project to be made based on the verification report of project outputs prepared by the project M&E team, as a temporary measure to keep the implementation going until the IVA was selected and commenced its assignment.

II. OUTCOME

A. ASSESSMENT OF ACHIEVEMENT OF EACH OBJECTIVE/OUTCOME

22. **People provided with access to “improved sanitation facilities”**, the original project target was 6,600 improved sanitation facilities constructed to benefit 132,000 people. The original assumption at project design focused on the existence of many compound houses accommodating several families in GAMA’s low-income communities, averaging about 20 people per compound house. However, it was later established that the total number of people in the compound houses could not be effectively served by an individual toilet facility and required multiple units in a compound house. The associated total beneficiaries targeted under the project had to be based on the average number of six people per household toilet and therefore was revised from the initial target of 132,000 to 39,600 people. Even though this is considered a significant reduction in the envisaged outcome, it conforms well with the WHO/UNICEF Joint Monitoring Platform (JMP) rating of improved toilets. A single toilet shared by several households in a compound house



is considered as unimproved toilet. This is a factor which faced great challenge at the design stage of the project and continued to face the challenge. The individual households within the compound houses are so close to each other with no space in between them to accommodate a household toilet for each household. A compound house that was visited during the preparation of the ICR had 16 households but available space for only two toilets.

23. The achievement of this PDO indicator depended on several factors including: (i) effective generation of demand; (ii) affordability to enable households to put up the toilet; (iii) availability of subproject Implementers (SPIs) with requisite access to pre-financing to undertake the project; (iv) ability of MMAs to mobilize the households for the demand.

24. For effective generation of demand, the design stage of the project factored in Behaviour Change Communication (BCC) and the provision of an asset-based subsidy of 50 percent to stimulate households to invest in sanitation facilities. The subsidy level was set based on the unit cost of technologies proposed and the assessed willingness and ability to pay by the beneficiaries in LICs. The compound houses belonged to landlords which were assumed to have some financial capacity to contribute towards the sanitation facilities. It was however contended that most of the compound houses were inherited by the descendants of the original builders, and the current landlords did not necessarily have adequate funds or other sources of income to build adequate sanitation facilities for their tenants. In many cases, the cost of the facility was passed onto the tenants themselves. This was an additional factor that justified the provision of subsidies for the targeted LICs.

25. The provision of the household toilets was segregated into subprojects corresponding to the locations of the 11 MMAs. The initial challenge the sub-projects faced was the choice of the technology of the household toilets and its cost. Many landlords, although in agreement on the need for improved sanitation facilities at their compound houses, did not enter into an agreement with the MMAs because of the high cost. With a sanitation facility priced at \$1000 a US\$500 contribution was difficult. It was established that during the implementation of the project prices for sanitation facilities increased disproportionately more than household incomes. This undermined the affordability level among low-income beneficiaries. In view of this situation, in April 2017, the Government of Ghana requested the World Bank to raise the subsidy amount from 50 percent to 70 percent of the cost of the sanitation facility. In addition, to attract more households to purchase the toilets, a lower cost technology was agreed with the MMAs. This raised the enthusiasm of many landlords. Consequently, from abysmal performance of 800 household toilets as of May 2017 when the toilet cost was US\$1000 at a subsidy of 50 percent, the project delivered 7,685 household toilet facilities by June 30, 2018; to benefit over 53,795 people in LICs. In addition to the increase in subsidy, the high performance may be attributed to: (a) capacity building provided by the Bank to the MMAs which strengthened their capacity in the mobilization and management of sub-projects at the community level; (b) engagement of large-scale contractors that were able to construct large numbers of toilet facilities within a short period of time, and (c) enhanced community engagement and sensitization efforts through the BCC program. The Bank's Collaborative Leadership for Development (CL4D) TA built the capacity of the MMAs, SPIs and the beneficiaries in areas such as safeguards, toilet facility management, communication and stakeholder engagement. The PCU also supported citizens' engagement across the MMAs, TV talk shows and other media engagements aimed at creating awareness to community members on the relevant issues related to the GPOBA project.

People provided with access to subsidized desludging services;

26. The project targeted 6,167 desludging operations to benefit 72,000³ people. It was established during

³ The 72,000 are part of the 132,000 beneficiaries of the new sanitation facilities as the desludging operations were intended for that group.



implementation that the demand for desludging operations among eligible communities was much lower than had been envisaged. In the GAMA, vacuum tankers which collected the septic sludge usually charged up to US\$60 per service which was not affordable to many of the LICs. Due to the affordability constraints and because many of the septage treatment plants had broken down, facilities were often emptied manually, and the sludge dumped indiscriminately nearby. During implementation it was realized that the number of eligible facilities that required desludging during the project lifetime has been overestimated at appraisal. Moreover, several sanitation solutions covered by the project included a component of on-site treatment, thereby reducing the need for desludging. Consequently, the Government requested that the number of desludging operations be scaled down, and to reallocate the balance toward toilet subsidies. Later assessment estimated the demand at about 200 compared to the earlier target of 6,167 operations within the implementation timeframe. The total number of targeted beneficiaries for desludging operations based on the scaled down number of operations was correspondingly scaled down from 72,000 to 1,200 people to reflect the revised assumptions. As in the case with the number of toilets, insufficient due diligence was carried out at the appraisal stage. The use of Behavior Change Communication (BCC) for the fulfilment of this outcome is considered essential to turn the people from the existing attitude of emptying their sludge indiscriminately and to generate demand for the desludging service. The provision of 50 percent subsidy to household septic sludge collection helped in generating the demand. The project ultimately provided desludging services to 237 entities comprising of 207 schools and 30 households benefitting a total population of 127,147 people across the 11 MMAs. The demand for desludging services without OBA subsidies will be monitored during the remaining two years of implementation of the GAMA Project.

For Outcome: Direct Project beneficiaries of which female (percentage)

27. The target beneficiaries of the project were households located within the targeted LICs where 75 percent of houses lack a toilet and live in a single room. It was estimated from the census figures that about 51 percent of the population within the target communities were women.

B. OVERALL OUTCOME RATING

28. The project outcome rating ranged from *moderately unsatisfactory* based on the original targets and before restructuring when the disbursement was at 15 percent of the total grant to *satisfactory* when the remaining 85 percent of the grant was disbursed. Thus, the overall weighted evaluation is $15\% * MU (3) + 85\% * S (5) = 4.7$, which equates to *Satisfactory*.

C. OTHER OUTCOMES AND IMPACTS

29. The project benefitted from an initial capacity building program involving the application of CL4D which used Rapid Results Initiative (RRI) principles and tools to support the implementation of the project. The capacity building support provided to project staff of MLGRD, MMA Chief Executives, Coordinating Directors and Project Coordinators, and the LGPCU helped to identify priority challenge areas where tangible results could be achieved based on an RRI approach. The CL4D. In addition to the strengthening of the implementation supervision capacity of the PMU of the sector ministry, the CL4D established capacity within the MMAs.

30. Even though the new Sanitation and Water Ministry took over the implementation role of the project, the implementation of the sub-projects remained with the MMAs which continued to report to the MLGRD. The new institutional arrangement in the sector puts a risk to the sustainability of the construction of the household toilets as there is no direct Ministerial supervision over the MMAs which have the bye-laws to ensure the continued use of the



toilets.

31. **Responsiveness:** The project was responsive to people with disabilities. It made provision of tailor-made household toilet facilities for the different categories of beneficiaries especially the visually impaired and other disabled persons.
32. **Enhanced dignity and health:** The access to household toilets has enhanced the dignity of the beneficiaries. The project contributed to the reduction of open defecation and disposal of human excreta in gutters and open drainage systems
33. **Mitigated Risks:** The access to household toilets has mitigated the attacks risk particularly on females who had to use the public toilets at night.
34. **Triggered demand for household toilets from other assemblies and regions:** The provision of household toilets under the project has triggered request for household toilets outside the targeted area.

III. KEY FACTORS THAT AFFECTED IMPLEMENTATION AND OUTCOME

35. The following six were identified as key factors and events that affected the operations:

1. Project preparation, design, and quality at entry
2. Choice of technologies
3. Implementation arrangements
4. Bank assessment of skills: the TA provided to build the capacity of the project
5. Restructuring of the project to take into consideration realities on the ground which contributed to a major turnaround in the project
6. Monitoring and evaluation.

Project preparation, design, and quality at entry

36. *Project Preparation.* The assessment of the preparation of the OBA component was made in the context of the larger GAMA SWP. The OBA component helped to secure funds to assist low income households in the selected communities for the GAMA project. The component was prepared in response to Government's determination to bridge the large gap in coverage with sanitation services in the low-income areas, created as a result of rapid urbanization.

37. The decision for the OBA project to be implemented by the same PCU under the MLGRD which was managing the GAMA SWP and coordinate the 11 MMAs is considered appropriate given the linkage between the OBA project and the larger GAMA SWP, and the fact that it was not going to be possible to establish a project management team in all 11 implementing MMAs. The PCU had also acquired experience in managing World Bank funded UESP2 and several other urban sanitation projects.

38. *Assessment of the Project Design:* The design ensured collaboration between the PCU, the EHSD and the 11 MMAs in the execution of the project which is considered optimal.



39. The project adopted community engagement through BCC and the provision of subsidy in the participating LICs to stimulate demand for household toilets and hygiene behavior. The BCC is considered appropriate because of the location of the project where inhabitants had for a long time used public toilets and needed further awareness to appreciate household toilets. The provision of the asset-based subsidy is also considered appropriate to stimulate households to construct toilets in LICs where affordability is a great challenge. It is commendable that the project considered BCC in its design, a model which normally works effectively in rural areas because of the homogenous nature of the inhabitants. Cities are cosmopolitan in nature and normally characterized by heterogenous population making it difficult to reach out to the populace through BCC. The design, however, considered the similar characteristics of the targeted LICs to that of rural communities with high proportion of people of dominant tribal group involved in small scale commercial activities giving the areas a high level of homogeneity. Assessment of the responses to the BCC in the early stages of the project indicated great interest in the project which was translated into actual demand for construction of toilets when the subsidy was applied.

40. The increase in demand when the subsidy was raised from 50 percent to 70 percent indicates insufficient due diligence at the design stage in the selection of adequate cost technology toilets relative to the affordability levels in the community. The design stage selected the use of septic tanks with a cost of US\$1500 and biofil with a cost of US\$1200. At 50 percent subsidy, these correspond to a cost of US\$750 and US\$600 respectively to the households, which is considered very high for a household in a low-community. It should be noted that the choice of technologies was more limited in 2013 than four years later when the project was restructured and more adequately priced sanitation facilities entered the market. The choice of technology was also constrained by the available space. The LICs were characterized by high population density with households cramped together leaving very little space for construction of household toilets.

41. The original assumption at project design assumed that the compound houses which accommodated several families averaged about 20 people per compound house. However, it was later established that the total number of people in the compound houses could not be effectively served by an individual toilet facility and required more than one facility per house. Consequently, with the total number of toilets the same, the associated total beneficiaries targeted under the project had to be revised based on the average number of 6 people per household toilet and, therefore, decreased from the initial target of 132,000 to 39,600 people. It is not clear how compound houses were considered as households which led to the overestimation of the people to benefit and had to be scaled down during the project

42. The project worked to build the capacity of several financial institutions to develop lending products for sanitation for SPIs and households, however, the interest remained low. This affected the capacity of the SPIs to borrow to pre-finance the project and made it difficult for some of the households to source financing for their contribution towards the construction of toilets and for the desludging services. For those cases when lending was provided, landlords (and not tenants) were the recipients of micro-financed loans due to their capacity to repay such loans. However, the main beneficiaries were the tenants who, with the new facilities within the compound household, did not have to resort to public toilets.

43. *Quality at entry:* The GAMA SWP identified the need for the utilization of the OBA to provide subsidies for the delivery of sanitation services in the very early stages of the project. This was clearly depicted by the objective of the project to increase access to improved sanitation for people living in LICs in the GAMA by partially subsidizing access to new and improved toilet facilities. The high achievement of the target was consistent with the objectives of the OBA project and the larger GAMA SWP and vindicates the initiative by the World Bank to



introduce subsidies in the implementation of the project, even though it may be difficult to scale it up to the rest of the country with this level of subsidy.

44. Initiatives at the beginning of the project may be assessed as follows:

- *Targeting.* The decision to select potential beneficiaries on first-come-first-served basis in the LICs presented some level of competition among the beneficiaries which stimulated demand for the OBA services.
- *Communication.* The launching of the OBA Project through various media outlets, adverts, radio and street floats in addition to the BCC within the targeted beneficiary communities was a good entry point of the project to the beneficiaries as results indicate that the earlier awareness created generated high interest in the project even before construction of the toilets started.
- *Approach.* The formation of an OBA implementation team comprising the PCU, representatives of the MLGRD (the sector Ministry at the time), and the Capacity Building Coordinator, which launched the RRI at the start of the project, and involved the MMAs as it focused on results in terms of key project implementation activities such as beneficiary identification and registration, selection of sub-project implementers, selection of the Independent Verification Agent, modalities for the provision of household toilets, and identification of households that do not have access to toilets, presented a very convenient platform to involve all key stakeholders particularly the MMAs for the implementation of the project.

45. One of the key activities that marked the start of the project was the scoping for the Bank's Leadership, Learning and Innovation Team's Collaborative Leadership for Development (CL4D) program with key stakeholders, particularly the MMAs to determine how the program could support implementation and enhance sustainability of the sanitation services. The CL4D program by all standards enhanced the collaboration and capacity strengthening of the parties. Collaboration was a critical element considering the numerous stakeholders involved, including the EHSD, the PCU, the 11 MMAs, the SPIs, and the Bank Task Team. It is obvious this program contributed immensely to the achievement of the targets for the project.

46. *Choice of technology.* The choice of technology for the household toilets went through a series of variations from the design stage through implementation in a bid to find a more affordable technology that met the affordability level of LICs. The project team should be commended for taking pragmatic measures to address challenges as they encountered them during implementation. The high population density of the selected communities made it difficult to retrofit existing housing with septic tanks because of limited physical space. Water Closets were not suitable for lack of running water and high cost (US\$1500 -US\$2000 per unit). Thus, the initial challenge that the project faced was the cost of toilets that were approved by the MMAs. To attract more households lower cost technologies were later identified, as well as the subsidy was raised to 70 percent. The demand for sanitation facilities picked up and the number of completed constructions went from about 159 in 2016 when the toilet cost was US\$1000 and the level of subsidy of 50 percent, to 3,000 in 2017 when the cost for some technologies was reduced to US\$500 and subsidy raised to 70 percent.

47. *Implementation Arrangements:* The Institutional Strengthening which was included to provide technical assistance to municipal, metropolitan, and national institutions greatly assisted to achieve the project objectives and made an impact on the implementation of the project. The appointment of a Capacity Building Coordinator (CBC), who led a team that provided technical support to the EHSD-MLGRD and MMAs further enhanced the implementation of the project. The OBA Project mobilized seasoned service providers who would be able to take



on performance risk and pre-finance investments until subsidies were disbursed based on output verification. The focus on outputs as opposed to inputs under the OBA was expected to lead to innovations by the service providers which should translate into efficiency gains in the provision of the services. The criteria for SPIs selection was adequate, which included: (i) provision of evidence of pre-financing, (ii) have adequate capacity and demonstrate a willingness to provide the required sanitation facilities and desludging services as the case may be, (iii) provision of evidence of agreement from households of a pertinent low- income GAMA community to participate in the project, and (iv) have demonstrated experience in implementation of similar subprojects or activities. The criteria for the provision of pre-financing which was key for the implementation of the OBA project was however undermined during implementation by the increase in subsidy which meant the SPIs had to raise more funds for pre-financing.

48. It is commendable that the project explored various options of finding a solution to the household and SPI financing constraints to address the underlying problem of effective demand for the sanitation facilities. The project explored a partial credit guarantee for the participating financing institutions to help them in three ways: (i) reduce the amount of collateral required from borrowers; (ii) enhance the willingness of financial institutions to undertake the risk of house improvement loans, with which they have little experience; and (iii) moderate the interest rates that they charge (by lowering the risk premium). The project also considered a revolving fund to channel low-cost funds through FIs for on-lending to beneficiaries.

49. The SPIs had limited capacity, particularly, relating to the large pre-financing required for the construction of the household toilets because of the 50% subsidy which could only be accessed after completion and verification of construction of the facilities. The capacity issue became more serious when the subsidy was increased to 70%. The project decided to involve large scale contractors who had the requisite capacity and who delivered thousands of toilets within the remaining period. The involvement of the large-scale contractors immensely contributed to overachieving the project targets by the closing date of the project.

50. The project encountered some start-up delays that caused the project to lose almost 1 year. However, the PCU with support of the Bank team managed to implement all the planned activities and were able to achieve the agreed targets by the end of June 2018.

51. *Monitoring and Evaluation:* The M&E is rated modest. Even though the indicators at the design stage were appropriate and well reflected in the PDO, the targets were not realistic at appraisal. These were subsequently revised during restructuring. However, the project provided for tracking the implementation and delivery of project outcomes based on the project results framework. An automated data collection and reporting was developed to capture details of the household toilets constructed. Spot checks were conducted to verify and validate project output. The project provided for payment of subsidies to sub-project implementers based on the Interim Verification Reports (IVR) produced by an Independent Verification Agent (IVA). As a result of the delay in the appointment of the IVA, the project made an amendment to the legal agreement, during the restructuring, to allow for interim verification of project outputs prior to the finalization of the recruitment of an Independent Verification Agent (IVA). The amendment allowed for retroactive payment of subsidies under of the project to be made based on the verification report of project outputs prepared by the project M&E team, as a temporary measure to keep the implementation going until the IVA was selected and commenced its assignment.



IV. BANK PERFORMANCE, COMPLIANCE ISSUES, AND RISK TO DEVELOPMENT OUTCOME

A. BANK PERFORMANCE:

52. Bank performance relating to quality at entry is rated *Moderately Satisfactory*. This is in consideration of the extent to which the Bank collaborated with the client in the identification, design and preparation of the project, which was in response to a critical need of the Government of Ghana. The project identification of beneficiaries as the low-income communities in the city at a time when virtually all the low-income communities had been deprived of basic sanitation is considered timely and apt to address the priorities of the Government of Ghana in the provision of basic sanitation. The inclusion of the subsidy arrangements was considered relevant and in consonance with the tenets of OBA. The capacity building and mobilization of SPIs were all considered good factors to achieve its planned development objectives and was consistent with its fiduciary and safeguards roles. Project identification was strategically sound, based on relevant challenges and Government and Bank priorities for the sector. The task team provided by the Bank, comprising of technical, fiduciary and safeguards specialists to facilitate the preparation, the design of the project and resources for project preparation is considered adequate. The project design took into consideration the location of the project as low-income communities and thus proposed the OBA project to provide subsidy to ensure the vulnerable were able to access the facilities.

Mid-Term Review

53. Bank performance at the mid-term review in September 2016 is considered satisfactory as those recommendations contributed to the turn-around of the ratings for project implementation progress.

54. One of the key areas that the Bank team in collaboration with the client explored as an efficient way to deliver sanitation solutions in targeted communities was the contracting of large scale companies. This proved to be an optimum recommendation as the large-scale companies covered many households with toilets within a short time.

55. The prompt actions taken by the Bank in collaboration with the PCU to accelerate the project implementation when the project encountered start-up delays that caused the project to lose almost 1 year and other implementation delays and managed to achieve the agreed targets within the project period ending June 2018, is commendable. The start-up delay was because of delay by the Government of Ghana in reaching the effectiveness date for the project. The implementation delay was due to a combination of factors including, the relatively high cost of the onsite toilet options suitable for low income urban communities (average cost of a complete toilet facility was GHC 3,500) which led to protracted negotiations between the MMAs and the households, the absence of clear financing arrangements for low income households to finance toilet construction, and initial assessment of limited capacity of SPIs to deliver or pre-finance construction at scale.

B. COMPLIANCE ASPECTS:

56. Safeguards monitoring and supervision for the project is considered adequate. The World Bank Environmental and Social Safeguards Specialists conducted comprehensive training for project staff from the PCU and the MMAs at the beginning of the project that enabled them take responsibility for managing safeguards aspects and ensured that that the planning and design activities took due consideration of relevant Bank Safeguards policies. Safeguards supervision was also consistent throughout the project and due guidance was



provided to client in addressing emerging issues.

57. Supervision of fiduciary aspects was adequate. Procurement and financial management reviews were carried out regularly in the implementation of the project and guidance was provided to remedy any emerging issues. The project thus did not encounter any major fiduciary challenge.

C. ASSESSMENT OF RISK TO DEVELOPMENT OUTCOME

58. The risk that development outcomes from the project will not be maintained may be considered as *Substantial*. (a) It is obvious the high level of subsidy provided to generate the demand cannot be maintained across the remaining urban low-income communities. (b) The high enthusiasm and capacity generated among the key stakeholders viz. the MMAs through the application of the CL4D principles provided by the Bank team is likely to reduce when project support comes to close. (c) The desludging process may not be sustained in the low-income communities when the project ends and the subsidies are removed. (d) Sanitation supervision is just one aspect of the responsibilities of the MMAs which is responsible for other revenue generating tasks. With no incentive of revenue from household toilets it is more likely that the attention of the MMAs will be shifted to other revenue generating responsibilities after the project.

59. **Technical risks** to development outcome are considered substantial. The high cost of toilet building materials may not be affordable to other low-income households and may even undermine the maintenance of the constructed toilets. The project attempted to mitigate this risk by considering cheaper options of toilet models. The cost is however still high if there are no subsidies. The desludging process may also not be maintained after the project because of the high cost. If no cheaper technical solutions are found for desludging the toilets, it is likely some of the residents may return to the old practice of emptying the waste in drainage systems. Environmental Health and Sanitation Directorate (EHSD) should consider opening a fund to continue subsidizing the desludging process in the low-income communities.

60. **Financial risks** to development outcome is considered substantial. The success of the project was basically because of the large subsidy provided for the project. Since the main GAMA SWP is still ongoing it is expected that provision will be made for post project financial sustainability of the supervising institutions- the EHSD and the MMAs - to continue to monitor the development outcomes after the project implementation period. One of the key areas that will help with financial sustainability will be to generate good revenue from high income residents for the liquid waste desludging sites which is being rehabilitated under the GAMA project, and which could be used to subsidize the desludging process in the LICs.

61. **Economic and Social** risks to development outcome are considered modest. The dignity associated with having a household toilet as against the use of public toilets or open defecation may motivate more households to demand household toilets. Risks may relate to possible raising of rental fees of households which have been provided with toilets beyond the affordability of their clients. The MMAs should be able to provide protection to these clients through the enforcement of their by-laws.

V. LESSONS LEARNED AND RECOMMENDATIONS

The lessons learned from the implementation of the project will include the following:

62. The need for extensive due diligence at the design stage of the project to avoid erratic changes to the



design factors, changes to the targets, and possible cost overrun. While the project made adequate provision for BCC to reach out the target communities it underestimated the level of affordability of access to sanitation services to the poor and under-estimated the material cost of the toilet building materials. The project also did not adequately assess what constituted a household in a typical low-income community in Accra where compound houses are predominant instead of individual household that was used for the design and which led to over-estimation of the number of beneficiaries.

63. The project made good progress because of the flexibility and pragmatic decisions taken when it encountered affordability issues. Projects should always leave a window for revision as the project may not be able to cover all issues at the design stage.

64. The use of technical assistance activities to build capacity of the implementing MMAs at the initial stages of the project with help of World Bank Specialists and local coaches led to increased competitions and enthusiasm among the MMAs.

65. For household sanitation projects in cities with local communities which are homogenous in character the use of respective MMAs, (with support from professional communication strategist) to lead BCC, and the identification and mobilization of beneficiary's contributions, engagement of SPIs, monitoring and supervision of toilet construction and desludging services enhances demand as the communities easily identify themselves with the MMAs.

66. The provision of financial support in the application of Community Led Total Sanitation (CLTS) for the construction of household toilets can greatly increase demand. The introduction of 70 percent support led to a significant increase in demand as the total number of household toilets constructed from 800 in May 2017 increased to 7,685 by the end of the project in June 30, 2018. This however need to be analyzed in terms of the sustainability as such large subsidies cannot be sustained for the numerous household toilets that is required.

67. Adequate provision should made to help SPIs who have to pre-finance the construction of the toilets (equivalent to the subsidy amount) from the meagre household contributions and their own finances when subsidies are included in projects. In the OBA project the risk of higher pre-financing requirements to the SPIs was to be mitigated through the introduction of several measures to facilitate their access to financing, including the creation of a Sanitation Fund under the larger GAMA Sanitation and Water Project, that would make funds available to financing institutions for higher liquidity and longer term financing, subsidize interest rates on loans, and provide portfolio guarantees to allow for sharing of the risks on toilet loan portfolios with financing institutions. These however did not work and virtually all the SPIs had to fall on their own arrangements to secure funds for pre-financing the project.

68. Projects should be flexible with the choice of technology to ensure a good balance between quality and affordability to the recipients of the project. In the OBA project the choice of technology for the household toilets went through series of variations from the design stage through to implementation in a bid to find a more affordable technology for the low- income communities.



ANNEX 1. RESULTS FRAMEWORK AND KEY OUTPUTS

A. RESULTS INDICATORS

A.1 PDO Indicators

Objective/Outcome: People provided with subsidized desludging services under the project

Indicator Name	Unit of Measure	Baseline	Original Target	Formally Revised Target	Actual Achieved at Completion
Direct project beneficiaries	Number	0.00	132000.00	39600.00	53795.00
		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018
Female beneficiaries	Percentage	0.00	51.00		51.00
		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018

Comments (achievements against targets): The project achieved 136% of target. The higher targets was achieved based on increase in the subsidy levels, and introduction of cheaper toilet technologies that made the toilet facilities more affordable to the beneficiaries.

Indicator Name	Unit of Measure	Baseline	Original Target	Formally Revised Target	Actual Achieved at Completion
People provided with access to subsidized desludging services under the project.	Amount(USD)	0.00	72000.00	1200.00	127147.00
		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018



Comments (achievements against targets): The revised target of households to be desludged was 200. With an estimated 6 people per household the number of beneficiaries were estimated as 1200. Actual desludging was however for 30 households and 207 schools which increased the beneficiaries to 127, 147 which far exceeds to revised target

Objective/Outcome: People provided with access to improved sanitation facilities under the project

Indicator Name	Unit of Measure	Baseline	Original Target	Formally Revised Target	Actual Achieved at Completion
Direct project beneficiaries	Number	0.00	132000.00	39600.00	53795.00
		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018
Female beneficiaries	Percentage	0.00	51.00		51.00
		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018

Comments (achievements against targets): The project achieved 136% of target. The higher targets was achieved based on increase in the subsidy levels, and introduction of cheaper toilet technologies that made the toilet facilities more affordable to the beneficiaries.

Indicator Name	Unit of Measure	Baseline	Original Target	Formally Revised Target	Actual Achieved at Completion
People provided with access to improved sanitation services	Number	0.00	132000.00	39600.00	53795.00
		05-May-2014	30-Jun-2018	30-Jun-2018	30-Jun-2018
People provided with access to improved sanitation services - Female (RMS requirement)	Number	0.00	67575.00	20196.00	27349.00
		05-May-2014	30-Jun-2018	30-Jun-2018	30-Jun-2018



People provided with access to improved sanitation services - urban	Number	0.00	132000.00	39600.00	53795.00
		05-May-2014	30-Jun-2018	30-Jun-2018	30-Jun-2018

Comments (achievements against targets): The project achieved 136% of target. The higher target was achieved based on increase in the subsidy levels, and introduction of cheaper toilet technologies that made the toilet facilities more affordable to the beneficiaries.

Indicator Name	Unit of Measure	Baseline	Original Target	Formally Revised Target	Actual Achieved at Completion
People provided with access to improved sanitation services	Number	0.00	132000.00	39600.00	53795.00
		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018
People provided with access to improved sanitation facilities? - urban	Number	0.00	132000.00	39600.00	53795.00
		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018

Comments (achievements against targets): The project achieved 136% of the revised target. The higher targets was achieved based on increase in the subsidy levels, and introduction of cheaper toilet technologies that made the toilet facilities more affordable to the beneficiaries.

A.2 Intermediate Results Indicators

Component: Improved sanitation facilities constructed under the project

Indicator Name	Unit of Measure	Baseline	Original Target	Formally Revised Target	Actual Achieved at Completion
Improved sanitation facilities	Amount(USD)	0.00	6600.00		7685.00



constructed under the project.		07-Mar-2015	30-Jun-2018	30-Jun-2018	30-Jun-2018
Comments (achievements against targets):					
Component: Number of desludging operations supported under the project					
Indicator Name	Unit of Measure	Baseline	Original Target	Formally Revised Target	Actual Achieved at Completion
Number of desludging operations supported under the project.	Amount(USD)	0.00 07-Mar-2015	6167.00 30-Jun-2018	200.00 30-Jun-2018	237.00 30-Jun-2018
Comments (achievements against targets):					



B. ORGANIZATION OF THE ASSESSMENT OF THE PDO

Objective/Outcome 1	
Outcome Indicators	<ol style="list-style-type: none"> 1. People provided with access to improved sanitation facilities under the project 2. Direct Project beneficiaries of which female
Intermediate Results Indicators	<ol style="list-style-type: none"> 1. Improved sanitation facilities constructed under the project
Key Outputs by Component (linked to the achievement of the Objective/Outcome 1)	<ol style="list-style-type: none"> 1. 6,600 Improved sanitation facilities constructed
Objective/Outcome 2	
Outcome Indicators	<ol style="list-style-type: none"> 1. People provided with subsidized desludging services under the project 2. Direct Project beneficiaries of which female
Intermediate Results Indicators	<ol style="list-style-type: none"> 1. Number of desludging operations supported under the project
Key Outputs by Component (linked to the achievement of the Objective/Outcome 2)	<ol style="list-style-type: none"> 1. At least 72,000 people ((51% of whom are women) provided with access to subsidized desludging services. 2. 200 desludging operations supported



ANNEX 2. PROJECT COST BY COMPONENT

Components	Amount at Approval (US\$M)	Actual at Project Closing (US\$M)	Percentage of Approval (US\$M)
Total	4.85	4.85	100.00
Subsidy for Sanitation facilities	3.355	4.022	113
Subsidy for desludging services	0.555	0.18	32.4
Project Staff	0.400	0.20	50
Operating Cost	0.04	0.14	350
External Audit	0.03	0	0
Technical Assistance	0.10	0.10	100
Independent Verification	0.37	0.37	100



ANNEX 3. RECIPIENT COMMENTS

This Implementation Completion and Results Report (ICR) provides a complete and systematic assessment of the performance and impact of the Output Based Aide (OBA) Urban Sanitation Facility for the Greater Accra Metropolitan Area project. It details progress towards achievement of the Project Development Objective (PDO), performance of the key indicators and delineation of key challenges and lessons learned as well as recommendations that can enhance the delivery and impact of the project.

The aim of the OBA project was to increase access to improved sanitation for people living in low-income communities in the Greater Accra Metropolitan Area (GAMA) by partially subsidizing access to new and sustainable toilet facilities. The project components were as follows:

PART A: OBA Subsidies for Sanitation Subprojects

This component entailed provision of OBA subsidies to Subproject Implementers (SPIs) for providing sanitation facilities and desludging services in the GAMA.

PART B: Implementation Support for Project Management and Subproject Implementers:

The second component focused on strengthening the capacity of the Project Coordinating Unit (PCU) in project management, provision of technical assistance to Subproject Implementers for design and implementation of Subprojects and carrying out of independent verification of outputs through an Independent Verification Agent.

The expected results of the project were as follows:

- At least 39,000 people (51% of whom are women) living in selected low-income communities within GAMA to gain access to improved sanitation and water supply services
- At least 72,000 people provided with access to subsidized desludging services.
- 6,600 Improved sanitation facilities constructed
- 200 desludging operations supported

Outcome of the ICR

Project Context and Design: The PDO, components and expected outcomes of the OBA were found to be relevant and adequately aligned to the national development goals and priorities such as the 2010-2013 Ghana Shared Growth Development Agenda (GSGDA), as well as continental and global development priorities such as the African Union Agenda for Growth and the UN Sustainable Development Goals (SDGs).

The PDO, aimed at increasing access to improved sanitation for people living in low-income communities in the GAMA was embedded in the National Water Policy (NWP) and the Environmental Sanitation Policy (ESP). The project was anchored on the second pillar of the 2011 World Bank Africa Strategy (vulnerability and resilience) and contributed to the foundation of the strategy (governance and public-sector capacity).

By providing subsidies to poor households in the GAMA that cannot afford access to basic sanitation, the OBA has enabled the poorest of the poor to have access to toilet facilities at their convenience.

Further, the project leveraged and built on experiences gained from the implementation of the original Ghana Urban Environmental Sanitation Project, the Second Urban Environmental Sanitation Project (UESP2) and the Urban Water Project. It also benefitted from lessons from countries like Brazil.

Efficiency: The disbursement performance of the GPOBA grant stood at 96% as at September 2018. The total expenditure on the GPOBA Grant borrower's designated account as at September 30, 2018 was US\$4.75m representing the actual



amount expended on subsidies, technical services and operational costs of implementing the GPOBA project activities from inception. Pipeline Subsidies being processed for payment is estimated at US\$0.1m

An independent financial Audit Conducted by PricewaterhouseCoopers in 29th June 2018 concluded that the project expenditure was:

- Incurred in conformity with the Financing Agreement, approved programs workplan and budget: and:
- Supported by approved payment vouchers and other supporting documents.

In terms of timeliness of implementation, the review identified that despite the start-up delays that caused the project to lose almost 1 year (12 months), the PCU managed to implement all the planned activities and were able to achieve the agreed targets as at the end of June 2018.

The project institutional arrangements were found to be efficient and responsive. The setup of the PCU and the close collaboration with the MMAs and the SPIs was found to be instrumental to the delivery of the planned activities and achievement of expected results.

Efficacy: The OBA significantly achieved its objective of increasing access to improved sanitation facilities in low-income households in GAMA as at the end of June 2018. The OBA Project directly supported the construction of 7,685 household toilet facilities in GAMA benefiting over 53,795 people in the low-income communities. The high performance can largely be attributed to: (a) the leadership role played by the MMAs in the mobilization and management of sub-projects at the community level; (b) engagement of large-scale contractors that were able to construct large numbers of the toilet facilities within a short period of time;(c) enhanced community engagement and sensitization efforts; and (c) increase of the subsidy from 50% to 70%. The project also provided desludging services to 237 entities comprising of 207 schools and 30 households benefitting a total population of 127,147 people across 11 MMAs.

Further, the project built the capacity of the MMAs, SPIs and the beneficiaries in the areas such as safeguards, toilet facility management, communication and stakeholder engagement. The MMAs were also provided with logistics. The PCU also supported citizens' engagement across the MMAs, TV talk shows and other media engagements aimed at creating awareness and sensitizing community members on the relevant issues related to the GPOBA project.

Emerging Outcome from the GPOBA Project

Some of the emerging outcomes or impact of the project are as follows:

- **Increased access to household toilets:** Over 7,685 households from of low-income communities have been provided with fit-for-purpose and user-friendly household toilets.
- **Innovative and cost-effective facilities:** The uniqueness of the design and the cost of use and maintenance of the toilet facilities is a novelty and has taken away one of the huge burdens on the beneficiaries.
- **Responsiveness of the beneficiaries:** The design and provision of tailor-made and fit-for-purpose household toilet facilities for the different categories of beneficiaries especially the visually impaired and other physically challenged persons has been very helpful.
- **Enhanced self-esteem and comfort:** According to the beneficiaries, the increased access to household toilets has enhanced their self-worth, dignity and taken away the risk of using public or private toilets under very challenging conditions such as when it is raining or during the night.
- **Improved health and environmental sanitation:** The stakeholders interviewed claimed that the project has contributed to the reduction of open defecation and disposal of human excreta in gutters and open drainage systems.
- **Increased demand for household toilets from other assemblies and regions:** The PMU has received request for participation in the project from beneficiaries outside the targeted area.
- **A source and opportunity for job Creation:** The biogas concept employed by the project has gained popularity in the targeted communities and beyond which has resulted in increased demand in the Greater Accra region.



Key factors during preparation

- GAMA was urbanizing rapidly. About 3.6 million people reside in the GAMA (plus a large population commutes to work in GAMA daily); residents alone may exceed 12 M by 2050.
- Provision of basic services had not kept up with rapid urban growth and it particularly affects the poor: Most poor people rely on public toilets at GHC 0.50/use or practice open defecation.
- Only 10% of people in GAMA had sewerage, but they often clogged, and the wastewater was not treated – Sludge from domestic and public septic tanks were mainly collected by vacuum trucks and most of it ended up discharged untreated into the sea.
- GoG was committed to improving sanitation and water services and pledged US\$200M support per year in 2013.

Key factors during Implementation

- The institutional arrangements and flexible implementation strategies employed by the PCU facilitated the realization of the objectives and targets of the OBA despite the very slow start of the project. The governance organs including the setup of the PCU ensured a robust and efficient implementation of the OBA. The PCU supported and provided tailor-made capacity building support to the MMAs and SPIs.
- The use of MMAs (Public Health Workers) as the lead for the community sensitization and awareness creation led to an increase in the enrolment of community members for the household toilets.
- The introduction of the OBA subsidy (50% which was later increased to 70%) led to a significant increase in demand for and the total number of household toilets constructed from 50 in the first year to 7,685 by the end of the OBA project June 2018.
- The PCU increased communication and community engagement activities during the project. A Behavior Change and Communication Strategist was hired to lead the communication process including marketing of the toilet facilities. This led to increased interest and demand for household toilets.
- The participation of the large SPIs in the construction of household toilets led to a reduction in backlog and acceleration of the number of household toilets constructed in the communities.
- The MMAs were directly in-charge of the identification and mobilization of beneficiary's contributions, engagement of SPIs, monitoring and supervision of toilet construction and dislodging services. It was observed that the beneficiaries found it convenient to pay their contributions to the assemblies than the SPIs because they could always identify officers who took their contributions and track them.

Quality of Monitoring and Evaluation (M&E)

M&E design

The OBA was a targeted intervention under the broader GH-GAMA funded by IDA.

- The project had a clearly define objective, results statements and targets. A results framework with clearly defined indicators and annual targets was developed based on the PDO and the intermediate results delineated in the Grant Agreement.
- M&E was integrated into the design and institutional arrangements of the project.

M&E Implementation

The M&E team played a lead role in the planning, implementation, monitoring and reporting on the delivery and achievements of the project:

- The tracking of implementation and delivery of project outcomes was based on the project results framework.



- An automated data collection and reporting systems called KOBO Platform was developed to capture details of the household toilets constructed. However, the PCU will have to ensure that the data captured in the system is up-to-date.
- Spot checks were conducted to verify and validate project output.
- The M&E Team monitored and evaluated the progress of the Project and prepared Project Reports in accordance with the provisions of Section 2.06 of the Standard Conditions and based on the indicators developed together with the World Bank.

M&E Utilization

M&E information (reports and feedback) fed into and informed management decisions:

- Project performance reports were developed and shared with stakeholders especially the World Bank.
- Project targets and implementation strategy were adjusted based on feedback from community engagement activities, performance reviews and Implementation
- Outcomes, key issues and recommendations from the performance reports informed the performance reviews and fed into discussions during World Bank missions.
- Feedback from the performance reviews informed and influenced the adjustments and changes that were made during the project.

Environmental, Social and Fiduciary Compliance

Environmental

The project was classified as “Category A Project” due to the nature and extent of the civil works and project activities. It therefore triggered World Bank Environmental Assessment OP4.01. Since the exact location for the facilities were not known prior to implementation, GOG prepared an Environmental and Social Management Framework (ESMF). This was followed by the preparation of Environmental and Social Management Plan (ESMP) by PCU after the exact interventions and impacts were identified aimed at ensuring that the implementation of the project mitigate environmental concerns and does not pollute water, air or land as well as prevent child Labor, sexual exploitation, abuse (SEA), and loss of vegetation among others.

Social Compliance

The project design and implementation were inclusive taking into consideration the specific needs of men, women, the youth and the physically challenged. The project established a three-tier grievance redress system that sought to ensure that conflicts and grievances were responded to and resolved amicably, on time and without cost to the beneficiaries. The project also took into consideration the unique needs of men, women and children during the community sensitization, education and the construction of the household toilet facilities.

Fiduciary Compliance

The project fully complied fully with the Financial Covenants (submitting acceptable interim quarterly financial reports and audit reports in form and content that is acceptable to the Bank) as per the Financing Agreement. A detailed FM review in February 2017 indicated that there adequate FM systems at the PCU to support implementation. An independent Financial Audit Conducted by PricewaterhouseCoopers in 29 June 2018 concluded that the project expenditure was:

- in conformity with the Financing Agreement, approved programs workplan and budget: and:
- Supported y approved payment vouchers and other supporting documents.

Procurement

All goods, non-consulting-services and consultants' services required for the Project and financed out of the proceeds of the Grant was procured in accordance with the requirements set forth in the World Bank Procurement Guidelines



for IBRD Loans and IDA Credits and Grants for World Bank Borrowers" dated January 2011 (revised July 2014). A yearly procurement plan was developed and shared with the Bank detailing the different procurement activities all of which received the banks' review and no-objection.

Bank and Borrower Performance

Quality at entry

- The Bank consulted with the Grantee and donors on how best to support GH-GAMA sanitation and water project.
- The instrument for the Bank's support was responsive and fit-for-purpose.
- The objectives, scope, components and design were realistic and flexible:

Quality of Supervision

- The Bank supported the implementation of the project and provided technical assistance to the PCU that ensured that the project despite the slow start managed to achieve the expected results at the end of June 2018.
- The Bank undertook project implementation support missions as planned and reviewed and provided comments and feedback on project performance reports and other reviews that contributed to the achievement of the expected results.

Borrowers Performance

- The Project Steering Committee provided oversight of the implementation of the overall project. It was chaired by MLGRD (currently MSWR) and have representation of each of the MMAs' Mayors, the Regional Coordinating Council of the Greater Accra Region 17, the MWRWH, MoF, and CONIWAS with the PCU acting as secretariat.
- The PCU served as link between the World Bank, other development partners and the MMAs as well as the SPIs and beneficiaries The PCU was very proactive in planning, coordinating and managing the implementation of the project. Although the project started at a low pace, the PCU manage to accelerate delivery by adjusting and adapting the implementation strategy to achieve the expected targets.
- The MMAs played a lead role in community mobilization, payment of beneficiary contributions and overseeing the construction of the household toilet facilities and desludging of school szeptics. The MMAs were very instrumental in the community sensitization and construction of the toilet facilities. Their role increased the confidence and trust of the community members and the resultant increase in demand for the facilities.
- The small-scale SPIs were mainly indigenous and community-based. They understood the sociocultural context of the beneficiaries, but they did not have adequate capacity in terms of finance large numbers of toilet facilities at a time. The slow pace of the Small scale SPIs slackened the pace of construction of household toiled which led to backblocks with the negative effect of increase agitation and I loss of interest in the project.
- The large scale SPIs came on board later in the process. They have the capacity to finance many toilets at a time and helped to reduce the back lock. However, they may not be a sustainable partner at the communities after the end of the project. The can be leveraged as a "Trainer of Trainers" providing technical backstopping for the small-scale SPIs after the end of the project.

Risks to Development Outcomes

The review did not identify any significant risk that negatively impacted on the development outcomes of the OBA project. However, inappropriate use of the new toilet technology and poor maintenance could pose a challenge in the immediate future.



Challenges

- Inadequate capacity and institutional arrangements for monitoring and reporting at the MMA level. There is inadequate capacity including tools and mechanisms for collecting and reporting on impacts including results stories from the field.
- Delays in completion of toilets. There were complaints about the long time it took to get one's toilet constructed after payment of the 30% contribution by the beneficiary. It was also revealed by the MMAs and the beneficiaries that it takes too long for the SPIs to complete the toilet facilities ones they start.
- The micro-credit model envisaged at the appraisal stage of the project did not work as planned since the Microfinance and Credit institutions were not willing to advance credit for household toilet construction.

4.2 Lessons Learned

- The subsidy was catalytic making the household toilets accessible to low income communities in the GAMA.
- The lead role-played by the MMAs and the innovative strategy implemented by the PCU in identifying and mobilizing prospective beneficiaries for the SPIs was instrumental in the accelerated delivery and achievement of the expected targets.
- The increase of the subsidy from 50% to 70% attracted large SPIs to join the project. The large SPIs were reluctant to join the project at the beginning due to the perceived high risk of losing one's investment.
- The bio-digester introduced by the project is gaining popularity in the country. However, there has been a proliferation of firms and individuals outside the GAMA Project providing different and untested variants of the bio-digester system without addressing issues such as effluent management, sizing, user education, seeding amongst other issue.
- Notwithstanding the 70 percent subsidy provided, some of the poorest of the poor were still not able to pay the expected 30 percent and as a result could not benefit from the project.

4.3 Recommendation

- Strengthen monitoring, evaluation and reporting of project performance and impacts including documentation of success and impact stories at the PCU and MMAs. The proposed beneficiary assessment if properly done will respond to this issue.
- Mobilize and build the capacity of private firms/individuals who are currently providing services in household biogas toilet facilities in GAMA to ensure quality of standards and compliance with environmental and social safeguards.
- There is need to strengthen the grievance redress systems including exploring the possibility of establishing a linkage between the three-tier grievance redress system established by the Safeguards Unit
- In the same vein, the PCU should work with the MMAs to enhance the capacity of the Public Relations and Complains Committee to play a lead role and ensure sustainability of the grievance redress system.
- Leverage and build on existing communication strategies to ensure effective marketing of the project services, promote effective community engagement as well as enhance knowledge sharing and capturing of feedback from stakeholders
- Assemblies to act as "One-stop -Shop" for the provision of household toilet facilities in the localities.



ANNEX 4. SUPPORTING DOCUMENTS (IF ANY)



OBA Urban Sanitation Facility for the Greater Accra Metropolitan Area (GAMA) (P145139)

AFRICA | Ghana | Water Global Practice | Requesting Unit: AFCW1 | Responsible Unit: GWA08
Recipient Executed Activities | Investment Project Financing | FY 2014 | Team Leader(s): Sanyu Sarah Senkatuka Lutalo, Inga Afanasieva

Seq No: 5 | ARCHIVED on 29-Jun-2018 | ISR33222 | Created by: Sanyu Sarah Senkatuka Lutalo on 18-Jun-2018 | Modified by: Sanyu Sarah Senkatuka Lutalo on 26-Jun-2018

1. STATUS & KEY DECISIONS

1.1 OBJECTIVE & RATINGS

Project Development Objectives

Project Development Objective (from Project Appraisal Document)

The Project Development Objective (PDO) is to increase access to improved sanitation to people living in low income communities in the Greater Accra Metropolitan Area (GAMA).

The development objective will be achieved by providing Output based Aid (OBA) subsidies to service providers as an incentive to provide access to improved sanitation to low-income households. OBA subsidies will be provided for the construction of sanitation facilities and the provision of desludging services. The subsidies will bridge the gap low-income households face when trying to install in-house sanitation facilities and stop open defecation or the use of public toilets. The project will also leverage financial resources from micro-financing institutions and support the scale up of business models that include soft loans for the provision of sanitation facilities in low income communities (LICs) of the GAMA.

Disbursement Summary

Source of Funds	Net Commitment	Total Disbursed	Remaining Balance	Disbursed
Grants	4.85 M	4.85 M	--	100%

Disbursement Ratio	0.0%
Disbursement Delay Flag	NONE
Effectiveness Delay Flag	NONE
Bank Approval Date	05-May-2014
Project Closing Date	30-Jun-2018
Overall Risk	Low

Key Project Ratings

Name	Previous Rating	Current Rating
Progress towards achievement of PDO	Moderately Unsatisfactory	Highly Satisfactory
Overall Implementation Progress (IP)	Moderately Satisfactory	Satisfactory

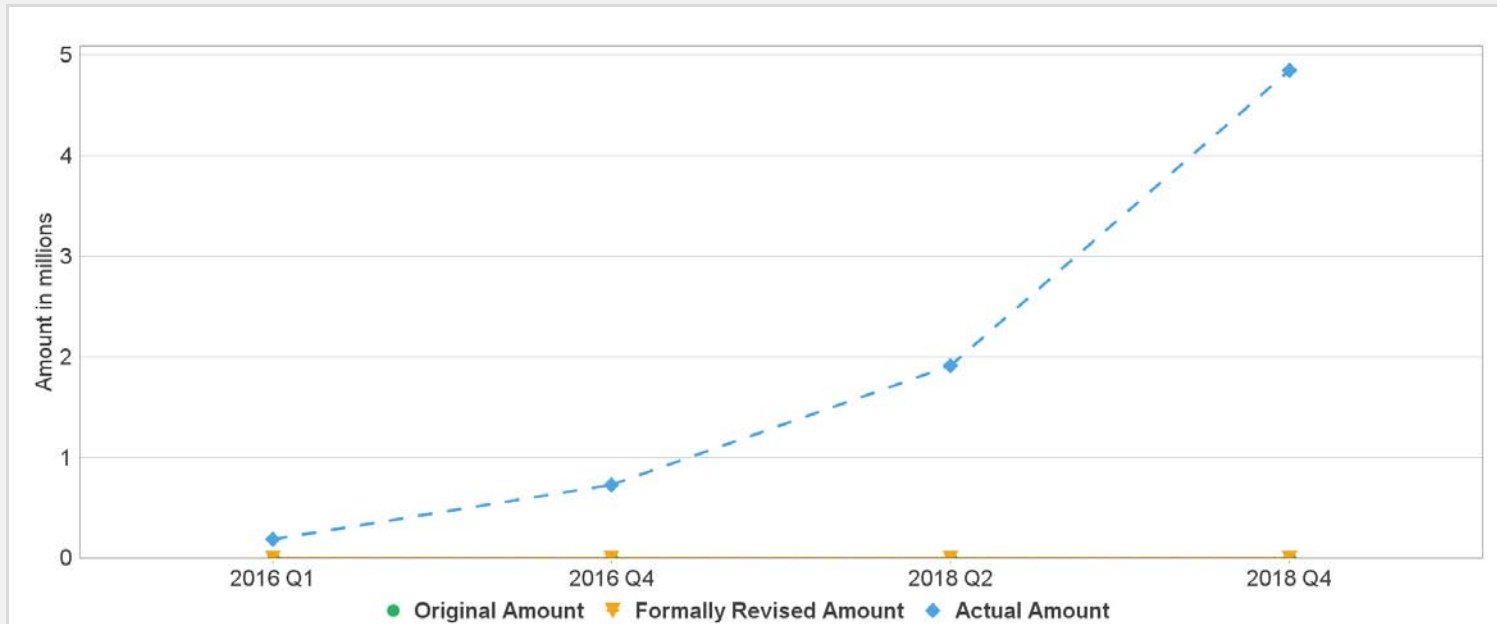
Comments

The project has been able to make very significant progress in its last ten months of implementation, with the number of toilets constructed increasing to 7, 685 by June 21, and the number of facilities desludged to 267. It has therefore provided access to household sanitation services to 47, 190 people and extended access through desludging of existing facilities to 116,650 people (including school children), exceeding its PDO



targets. The rating for progress towards achievement of the PDO is therefore rated Highly Satisfactory while that for Implementation Progress is rated Satisfactory given outstanding activities pertaining mainly to delays in completing verification of outputs.

Cumulative Disbursements



Disbursement Lag		
Original Disb. Lag:	Formally Revised Disb. Lag:	Disb. Estimate Last Formally Revised on:
Not Applicable	Not Applicable	--

Disbursements (by loan)

Project	Loan/Credit/TF	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	% Disbursed
P145139	TF-17278	Effective	USD	4.85	4.85	0.00	4.85	0.00	100%

Key Dates (by loan)

1. Procurement

Loan/Credit/TF	Status	Approval Date	Signing Date	Effectiveness Date	Orig. Closing Date	Rev. Closing Date
P145139 TF-17278	Effective	05-May-2014	07-Mar-2015	07-Mar-2015	30-Jun-2018	30-Jun-2018

1.2 KEY ISSUES & PROJECT STATUS



Key Issues and Actions for Management Attention

Issues

This ISR presents an update of the project based on the findings of a project supervision mission conducted with that for the IDA financed GAMA Sanitation and Water Project in May 2018. It is the final ISR for this project since it closes on June 30, 2018. Key Issues for management attention are presented below. Details are provided in the attached combined aide memoire.

(i) Implementation Progress: There has been steady implementation progress over the last eight months, since the previous supervision mission in September 2017. The number of toilets constructed has increased from 1566 to over 7,685, and desludged facilities from 20 to 267 to date. It has therefore provided access to household sanitation services to 47, 190 people and extended access through desludging of existing facilities to 116,650 people (including school children), significantly exceeding its PDO targets. The significant improvement in results is attributed to various interventions introduced by the project team in the last year of implementation, to address underlying factors that had affected the rate of construction of toilets. These include the engagement of larger scale contractors better able to pre-finance construction and deliver at scale, combined with a set of other measures to, inter alia, improve marketing, mobilization, education and sensitization efforts among targeted communities, engage more SPIs; and improve enforcement of by-laws.

(ii) Disbursements: Disbursements have improved significantly from about 15% in September 2017 to 65% to date. Although the disbursement rate appears relatively low at this point in implementation, the grant is expected to fully disburse by the end of the four month grace period, after outstanding verification of toilets completed by June 30, 2018 is completed.

(iii) Delays in verification: The Independent verification process has remained relatively slow despite measures introduced to improve the efficiency of the process, for instance through reduction in the mandated sampling size. The verification process needs to be expedited. While the OBA grant will pay for all toilets completed by June 30, 2018, verification processes carried out after that date will not be eligible for financing under the grant. An Addendum to the IVA contract will be made to complete outstanding verification work, to be paid out of the IDA funds under the GAMA Sanitation and Water Project.

(iv) The Recipient has been advised of the need to prepare the Implementation Completion Report (ICR). A consultant is to be identified by the end of June, to conduct the evaluation and prepare the ICR.

Action	Due Date	Status
Identify consultant to prepare ICR	30-Jun-2018	In Progress
Complete verification of toilets constructed before June 30, 2018	31-Aug-2018	In Progress

Implementation Status and Key Decisions (Public Disclosure)

The GPOBA Sanitation Project became effective on March 7, 2015 when the grant agreement was signed by the World Bank and the Government of Ghana. There was a delay in commencement of project implementation due to the delay in effectiveness of the broader GAMA Sanitation and Water Project which the current project complements. The grant is due to close on June 30, 2018.

Overall implementation of household sanitation construction activities under the OBA project experienced a slow start. However, implementation progress significantly picked up during the final year of implementation and the project is expected to fully achieve its development objectives. The project as at June 21, had supported construction of 7,685 toilets and desludging of 267 toilets including 231 schools. Consequently, the rating for implementation progress has been upgraded to Satisfactory and that for achievement of the project development objective (PDO) to Highly Satisfactory in view of achievement of results vis-à-vis the project targets. The key lessons from the project will continue to inform design and implementation of household sanitation interventions in urban low income areas in Ghana.

2. Missions

ISR Sequence No.	Mission Type	Actual Date
05 (Current) 29-Jun-2018	Implementation Support	04-May-2018
03 (Previous) 10-May-2017	Implementation Support	07-Apr-2017



3. Compliance

Safeguards

Current Environmental Assessment Category: B - Partial Assessment

Environment Assessment Date: --

Legal Covenants

Loan/Credit/TF	Description	Status
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4. Risks

Overall Risk Rating

Risk Category	Rating at Approval	Previous Rating	Current Rating
Overall	--	● Substantial	● Low

Comments

The risk rating has been reduced from Substantial to Low given the significant progress that has been achieved with the project, and the likelihood of meeting and possibly exceeding the PDO targets.

5. Results

Project Development Objective Indicators

► Direct project beneficiaries (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	11,192.00	47,190.00	39,600.00
Date	07-Mar-2015	06-Oct-2017	21-Jun-2018	30-Jun-2018

▲ Female beneficiaries (Percentage, Custom Supplement)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	51.00	51.00	51.00

► People provided with access to improved sanitation services (Number, Corporate)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	--	--	39,600.00
Date	05-May-2014	--	--	30-Jun-2018

**▲People provided with access to improved sanitation services - Female (RMS requirement) (Number, Corporate Supplement)**

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	--	--	20,196.00

▲People provided with access to improved sanitation services - urban (Number, Corporate Supplement)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	--	--	39,600.00

▶People provided with access to improved sanitation services (Number, Corporate)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	10,962.00	47,190.00	39,600.00
Date	07-Mar-2015	06-Oct-2017	21-Jun-2018	30-Jun-2018

▲People provided with access to ?improved sanitation facilities? - urban (Number, Custom Breakdown)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	10,962.00	47,190.00	39,600.00
Date	07-Mar-2015	06-Oct-2017	21-Jun-2018	30-Jun-2018

▶People provided with access to subsidized desludging services under the project. (Amount(USD), Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	230.00	116,650.00	2,000.00
Date	07-Mar-2015	06-Oct-2017	21-Jun-2018	30-Jun-2018

Overall Comments

Intermediate Results Indicators



► Improved sanitation facilities constructed under the project. (Amount(USD), Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	1,566.00	1,566.00	6,600.00
Date	07-Mar-2015	29-Sep-2017	29-Sep-2017	30-Jun-2018

► Number of desludging operations supported under the project. (Amount(USD), Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	35.00	35.00	200.00
Date	07-Mar-2015	31-May-2017	31-May-2017	30-Jun-2018

Overall Comments

6. Clearance History

Person	Comments & Actions
<p>Maria Angelica Sotomayor Practice Manager, GWA08 WASHINGTON, DC (IBRD)</p>	<p><i>Archived on 29-Jun-2018 at 16:49:00</i></p>
<p>Maria Angelica Sotomayor (PMGR) Practice Manager, GWA08 WASHINGTON, DC (IBRD)</p>	<p>We approve this ISR with thanks to the team for an outstanding job in speeding-up implementation after a slow start and ensuring that results are achieved. We expect that the resources will be fully disbursed during the grace period given that the outputs have been verified. We agree with the recommendations by CMU on final documentation of the results and sharing the experience widely with other countries in the CMU and the region. <i>Approved on 29-Jun-2018 at 16:44:50</i></p>
<p>Laura Kullenberg (CD) Country Program Coordinator, AFCGH WASHINGTON, DC (IBRD)</p>	<p>The project has achieved excellent results and exceeded its target after a very challenging, slow start. The team rates the PDO Highly satisfactory given the fact that all PDO targets have been achieved and exceeded. Although the disbursement is at 65%, it is expected to fully disburse by end of the 4 months grace period according to the team. This needs to be fully confirmed. The status of implementation upon which this expectation is based should have been included in the key issues section. We expect that the necessary follow up will be done to ensure there are no ineligible expenditure as indicated by the team. The CMU will urge the team to document the journey to success to be shared with other colleagues and partners in the other water and sanitation projects in Ghana and Liberia, Sierra Leone. <i>Advised on 29-Jun-2018 at 13:33:25</i></p>



Sanyu Lutalo

Senior Water Supply and
Sanitation Specialist, GWA03
WASHINGTON, DC (IBRD)

Please find attached the ISR for the OBA Sanitation Project. This is the final ISR as the grant closes on June 30, 2018.

Regards,
Sanyu.

Recommended on 26-Jun-2018 at 13:36:38



PROJECT INFORMATION

7. Key Dates

Key Project Dates

Bank Approval Date:05-May-2014

Effectiveness Date:07-Mar-2015

Original Closing Date:30-Jun-2018

Revised Closing Date:30-Jun-2018

Related Project(s)

Project	Relationship	Status	Product Line	Team Leader	Country
--	--	--	--	--	--

8. Team Composition

Bank Staff

Name	Role	Specialization	Unit	Phone No.	Location
Sanyu Sarah Senkatuka Lutalo	Team Leader	Team Leader	GWA03	5220+38623 /	WASHINGTON, DC
Inga Afanasieva	Team Leader	OBA Program Co-TTL	GSUOA	473-5260	WASHINGTON, DC
Charles John Aryee Ashong	Procurement Specialist	Procurement	GGOPA	5241+4127 /	ACCRA, GHANA
Robert Wallace DeGraft-Hanson	Financial Management Specialist	Financial Maangement	GGOAS	5241+4141 /	ACCRA, GHANA
Ayishetu Terewina	Team Member	Program Support	AFCW1	5241+4125 /	ACCRA, GHANA
Emmanuel Nkrumah	Team Member	WSS Specialist	GWA08	5241+4146 /	ACCRA, GHANA
Lydia Sam	Team Member	Procurement	AFCW1	5241+4121 /	ACCRA, GHANA
Michael Gboyega Ilesanmi	Social Specialist	Social Safeguards	GSU20	5359+352 / 2	ABUJA, NIGERIA
Nyaneba E. Nkrumah	Environmental Specialist	Environmental safeguards	GEN04	5220+81686 /	WASHINGTON, DC
Rebecca Jean Gilsdorf	Team Member	WSS Specialist	GWA05	5220+34735	WASHINGTON, DC

Extended Team

Name	Title	Organization	Office	Location
Harold Esseku	Consultant	--	0208117978	Accra,Ghana

9. Organizations

Name	Role	Contact	Title	Office Phone	Email
Ministry of Sanitation and Water Resources	Borrower/Recipient	George Asiedu	Project Coordinator	+233-208-117-978	--
Ministry of Sanitation and Water Resources	Implementing Agency	Cecilia Dapaah	Minister of Sanitation and Water Resources	233202012271	celiadaps@hotmail.com

10. Financial Management

Overdue Reports

Overdue Issues

	< 4 months	> 4 months	> 9 months
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	< 30 days	31 - 60 days	> 61 days
--	-----------	--------------	-----------



Financial Statement - Audit	--	--	--
	< 30 days	31 - 60 days	> 61 days
Interim Financial Reports	--	--	--

Audit Issues	--	--	--
IFR Issues	--	--	--
General Supervision Issues	--	--	--