All systems go
Africa

Addressing human resources needs and gaps in the sanitation and hygiene sector

- A ROADMAP CONSULTATION

- All systems go Africa
- 19-21 October 2022

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Addressing human resources needs and gaps in the sanitation and hygiene sector

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Session Plan

Brief introduction of WASHPaLS #2 and the sanitation and hygiene capacity needs assessment

Presentation and discussion of preliminary findings

Presentation of proposed recommendations and priority actions

Group work to refine and prioritize proposed actions

Close and next steps

INTRODUCTION TO THE ASSESSMENT

USAID Water, Sanitation, and Hygiene Partnerships and Learning for Sustainability #2 (WASHPaLS #2)

- WASHPaLS #2 is a 5-year (2021-2026) project with the goal of improving WASH programs by ensuring quality, equity, sustainability, and scale of sanitation products, services and adoption of sound hygienic practices, particularly in rural areas.
- Area-wide Sanitation is the overarching theme for WASHPaLS #2 Research and Learning

IDinsight

Focus Area 1
Area-wide sanitation

FSG REIMAGINING SOCIAL CHANGE

Focus Area 2
Market-based sanitation

Tt TETRA TECH

fhi360
THE SCIENCE OF IMPROVING LIVES

Focus Area 3
Social behavior change

IrisGroup
Strategic Approaches to Social Inclusion

Cross-cutting
Gender Equality and Social Inclusion

Sanitation and Hygiene Workforce Capacity Needs Assessment and Roadmap

Purpose: To understand the Human Resources (HR) capacity needs required to deliver universal access to sanitation and hygiene, the existing gaps, and the dynamics at play in trying to address them

Scope: Sub-Saharan Africa, South and Southeast Asia, focused on delivery of area-wide sanitation with emphasis on rural on-site sanitation

Planned output: A roadmap of agreed priority actions and pathways for the sector at multiple levels
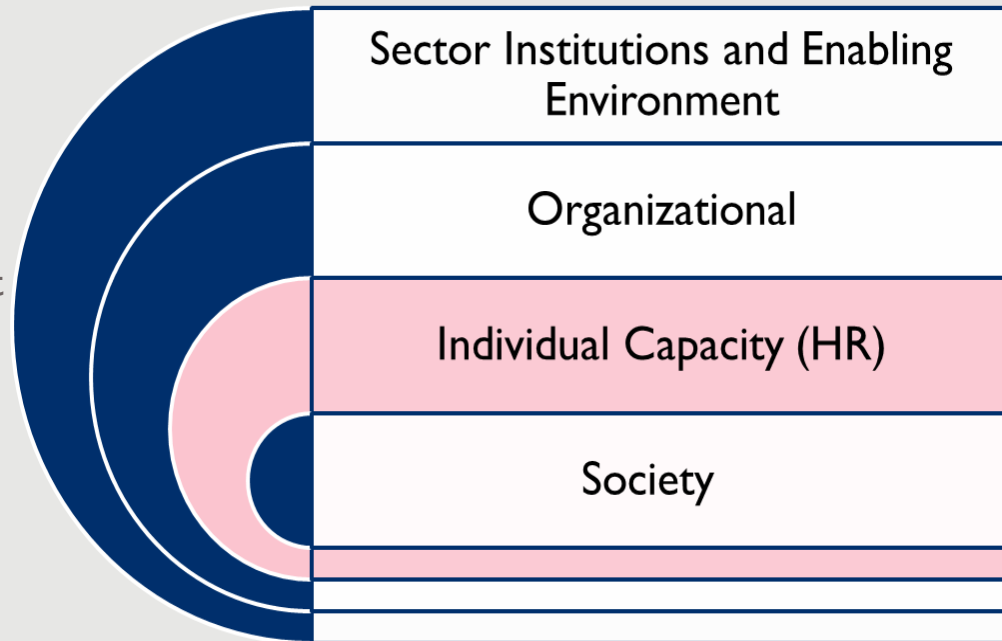
Key Questions

1. What are the capacity gaps impeding sanitation and hygiene sector achievement of universal access to sustainable services?

2. What are the different modalities for sanitation and hygiene sector capacity development and to what extent have they contributed to achieving and sustaining needed human capital?

3. What are the barriers and incentives to access, recruit, promote and retain existing workforce capacity?

4. What are the recommended priority actions to address the sanitation and hygiene capacity gaps?

Assessment Framework

FUNCTIONS

- Policy, strategy & coordination
- Regulation
- Monitoring
- Oversight and Support
- Community mobilization & engagement
- Construction
- Emptying & Transport
- Operation & Maintenance (incl. treatment & reuse)
- Research and Design
- Business development

LEVELS OF CAPACITY

Sector Institutions and Enabling Environment

Organizational

Individual Capacity (HR)

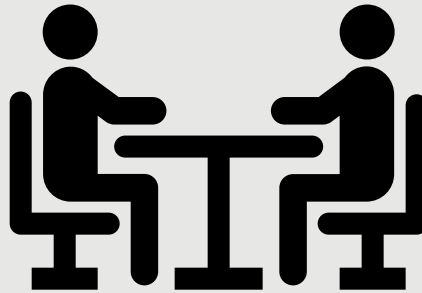Society

Methodology

Desk Review/ Secondary data

Review of key documents and previous studies

Analysis of Secondary data: GLAAS 2022, AMCOW, WALIS

KIIs/FGDs

Engagements with reps of more than 24 organizations: Knowledge and Training Institutes, INGOs, Development partners, Regional Associations and Training Centers

6 Country assessments

National and District Level: Nepal, India & Nigeria

National level: Ghana

Case focused: Philippines & Rwanda

Methods: desk review, FGD/KIIs, and (validation) workshop for key sector stakeholders.

FINDINGS

Human Resources Data from prior studies

AMCOW 2019 & 2021

- 15 countries in Africa carried out sanitation and hygiene human resource assessments

- 13 African countries have HR targets included in their national sanitation and hygiene strategy

- Average of 0.59% of WASH budget is committed to education, research and capacity development

WALIS 2019:

- The skills most reported as missing (in urban sanitation) were management and leadership skills, rather than technical skills

IWA 2014:

- Between 62 - 98% of the shortages (below) were in the field of sanitation

- There is an overall lack of a sanitation labour market

Figure from IWA Human Resource Capacity gaps study 2014
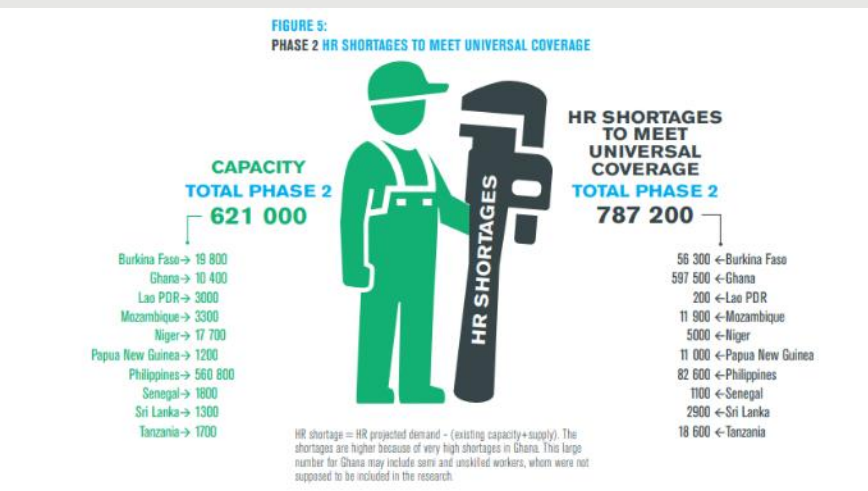
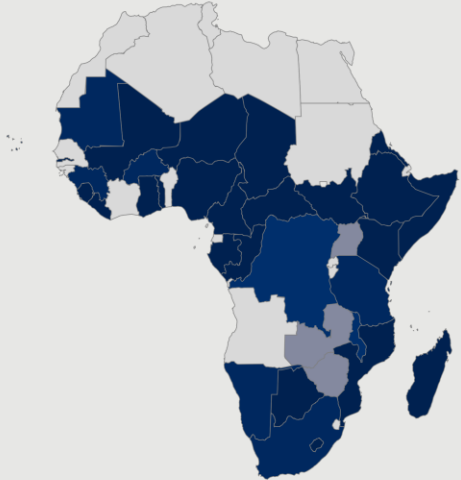# GLAAS 2022: Overall sufficiency of staff in African countries

Sanitation HR

- ■ Below 50% of what is needed
- ■ Between 50-74 % of what is needed
- ■ Between 75-94% of what is needed
- ■ Between 95-100% of what is needed
- ■ no data
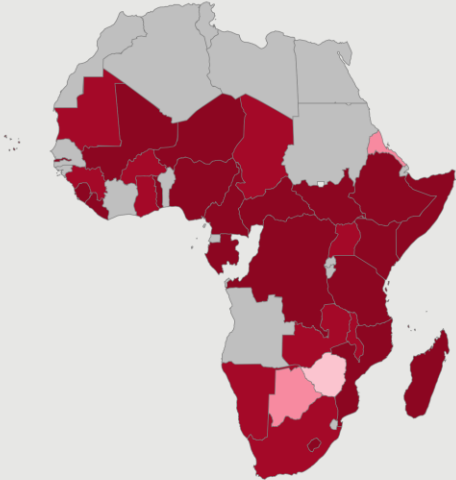
Hygiene HR

- ■ Below 50% of HR needed
- ■ Between 50-74% of HR needed
- ■ Between 75-94% of HR needed
- ■ Between 95-100% of HR needed
- ■ no data

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Responsible actors (employers) in rural areas

Function	On-site Sanitation	Hygiene
Policy strategy coordination	Ministries (Health, Water Supply and Sanitation, Water Resources)	Ministry of Health / Ministry of Sanitation
Regulation	-- Only starting – (District Authorities - India, Regulatory Authority –Rwanda)	---
Monitoring	Local government - NGOs/CSOs often fill the gap	Health Centers
Oversight and Support	Local government - NGOs/CSOs often fill the gap	Health Centers
Community mobilization engagement	NGOs; mostly volunteers Local governments – mainly volunteers	NGOs; mostly volunteers Local governments – mainly volunteers
Design & Construction	Informal private sector (hired by household)	(Informal) private sector, NGO
Emptying & Transport	Remote Rural: no one; Rural on road/Rural mixed: Informal private sector; Closer to Urban: can be combination of informal private sector, local governments, and in some cases utilities who have explored their role beyond city borders	
Operation & Maintenance (incl. treatment & reuse)	Households; occasionally informal private sector	Households; occasionally informal private sector
Research and Design	NGOs, Academia, not very likely the private sector	NGOs, Academia, not very likely the private sector
Business development	(Informal) Private sector (incl. small entrepreneurs)	(Informal) Private sector (incl. small entrepreneurs)

Type of jobs in rural areas

Function	On-site Sanitation	Hygiene
Policy strategy coordination	Civil/environmental Engineers	Senior Environmental Health Officers, Public Health Engineers, Medical doctors
Regulation	---	---
Monitoring	Project Monitoring and Evaluation Officers, Sanitation Inspectors	(Environmental) Health officers, Sanitation /hygiene inspectors
Oversight and Support	Sanitation Supervisors, Sanitation Inspectors, Officers	Health Officers, Environmenal Health Officers.
Community mobilization engagement	Community Development Officers, (CLTS) Facilitators, Health Extension Workers, Community Health Workers, or in NGOs: Specialists	Community Health Workers, Teachers, Religious Leaders, or in NGOs hygiene specialists
Design & Construction	Mason, artisan or household /community member. Registered mason for public spaces	Mason, artisan or household/community member. Registered mason for public spaces
Emptying & Transport	Remote rural: Households, Farmers or no one; Rural on the road: Informal private sector or households. Closer to Urban: can be combination of informal private sector, local governments, and in some cases utilities who have explored their role beyond city borders	
Operation & Maintenance (incl. treatment & reuse)	Artisans/Masons Treatment & Reuse: farmers	Artisans/Masons for handwashing facilities
Research and Design	Researchers and Innovators	Researchers and Innovators
Business development	Sanitation entrepreneurs (truck drivers, emptiers, masons, hardware store owners)	Soap producers, Innovators (handwashing technologies)

Ghana: Responsible organisation & HR

| Function	Organisation	Human Resources
Policy strategy coordination	Ministry Sanitation and Water Resources (MSWR)	Environmental Health Officers (EHO), Public Health Engineers (EHE)
Regulation	Metropolitan, Municipal and District Assemblies	Environmental Health Officers (EHO),
Monitoring	Metropolitan, Municipal and District Assemblies (and MSWR)	Environmental Health Officers (EHO),
Oversight and Support	MSWR, Community Water Supply Agency, Regional Coordinating Council	Environmental Health Officers (EHO), Extension Services Specialists (ESS)
Community mobilization engagement	Community Water Supply Agency, Municipal and District Assemblies, NGOs/CBOs	Environmental Health Officers (EHO), Extension Services Specialists (ESS)
Construction	Private sector, informal	Households, artisans
Emptying & Transport	Private sector	Septic emptiers, manual laborers
Operation & Maintenance (incl. treatment & reuse)	Private sector	Households, artisans
Research and Design	Academia, private sector	Researchers, innovators
Business development	Private sector, GEA	Sanitation entrepreneurs

Nigeria – Responsible organisation & HR

Function	Organisation	HR
Policy strategy coordination	Ministry of Health, Ministry of Water Resources, Ministry of Environment, RUWASSA, STOWA	Administrators, Scientific Officers, Policy Expats
Regulation	RUWASSA, Ministry of Environment, Ministry of Water Resources	Administrators, Scientific Officers, Policy Expats
Monitoring	RUWASSA, WASH Department/Unit, Ministry of Environment	Planning and Monitoring Officers
Oversight and Support	LGA WASH Unit	WASH coordinator, community mobiliser, sanitation officer, hygiene officer, PMEO officer, WASH financial acccountant
Holding government to account	CBOs/CSOs, Traditional and Religious leaders	
Community mobilization engagement	WASHCOM, other volunteers, supposed to be led by WASH unit, CSO/CBO	Volunteers, volunteer hygiene promoters, community mobilisers
Design & Construction	Artisans, masons; public space - Works and Environmnet department	Toilet business owners; artisans, private contractors
Emptying & Transport	Pit emptying entrepreneurs, individuals	artisans, private contractors
Operation & Maintenance (incl. treatment & reuse)	Households, WASHCOM, Artisans	Volunteers and artisans, households
Research and Design	Ministry of Health, Ministry of Water Resources, Ministry of environment, RUWASSA	Academic, researchers,
Business development	---	Artisans, Mason, Toilet Business Owners

Ghana workforce

- EHOs are the largest group of professionals in sanitation, and the frontline staff leading in community mobilization

- EHO-population ratio is below the standard of 1:700 and there is uneven distribution across districts

- Not enough diversification. E.g., HR gaps in GIS mapping, technical drawing, M&E, data management, administration skills, and behavioral change communication/CLTS/SLTS

- There are shortages in numbers of staff for monitoring and enforcement


Number of EHOs per Region across Ghana

■ Female (district level)   ■ Males (district level)
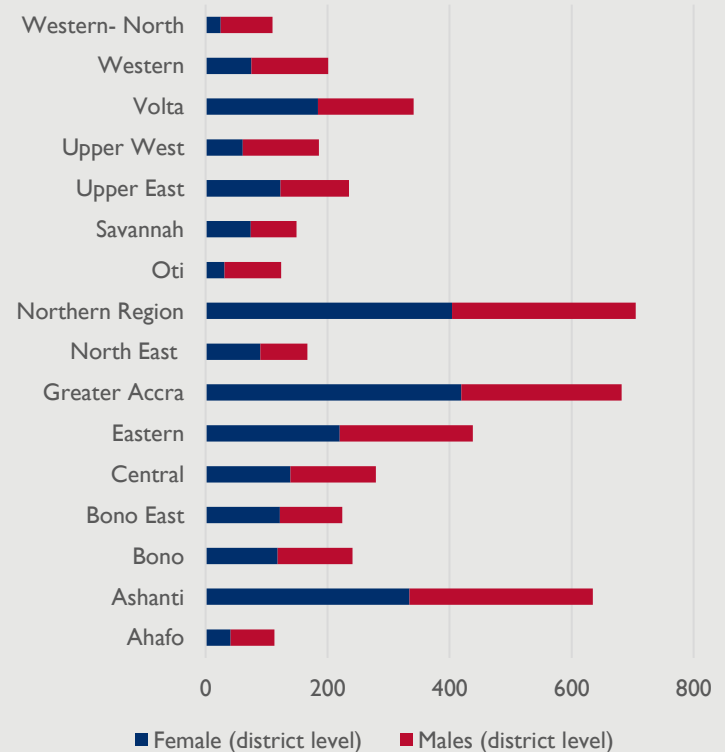
Nigeria workforce

- Local Government Authority (LGA) WASH Units and Rural Water Supply and Sanitation Agency (RUWASSA) have a broad range of staff categories:

  Monitoring & Evaluation; Community Mobilization & Hygiene Promotion; Sanitation; Water Supply; Admin/Accounts/Information; Works/Drilling/Maintenance

- Marked difference in RUWASSA and LGA staff numbers between States, partially explained by donor presence and use of volunteers.

- Large shortage of sanitary inspectors, Environmental Health Officers, and Community mobilisers – particularly in areas with low donor engagement

- Particular need for upgrading skills of the team; in particular on behaviour change communication

RUWASSA (Up) and LGA (Below) –Staff numbers and gender composition
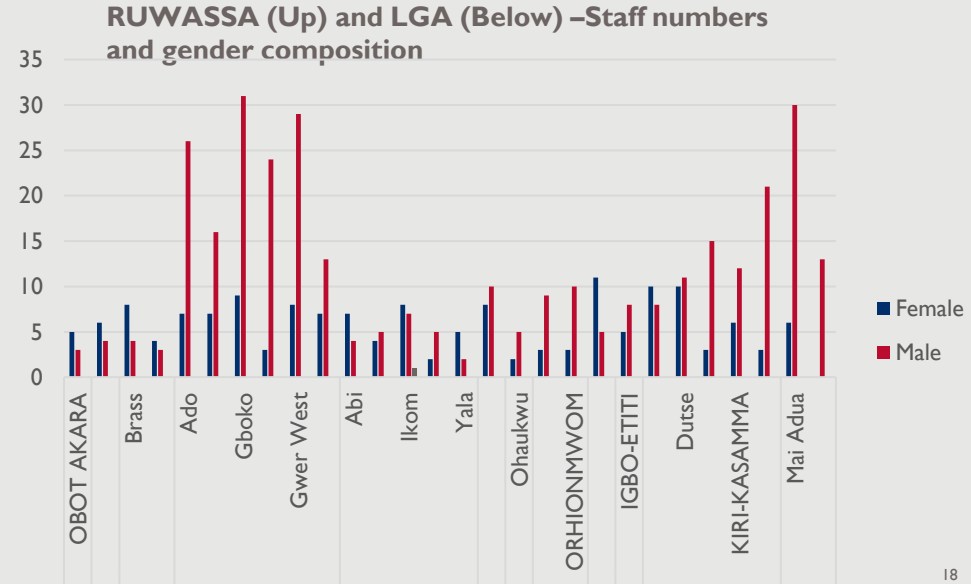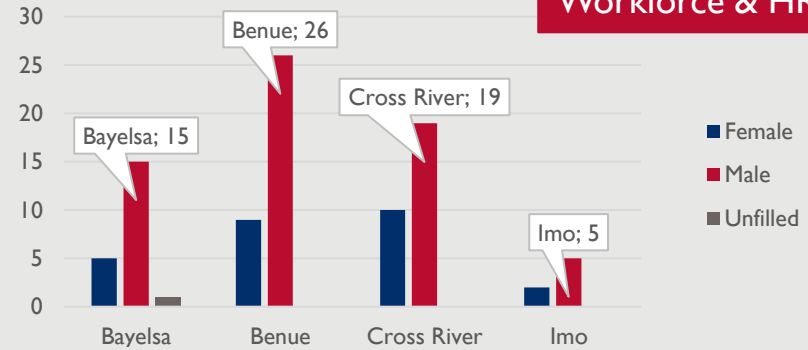
There is limited local government-led community mobilization, oversight, monitoring, or support

- Multiple countries face **decentralization without appropriate allocation** of decision making and human and financial resourcing

- There is a lack of adequate **leadership and support for staff, systems, equipment, and processes**

- Those in charge of sanitation and hygiene programs in local government **are not educated in behavior change, or oversight of community-managed** systems or services

- There is a **shortage in personnel** needed to monitor, provide continuous (technical) support and enforce regulations

- There is a lack of adequate **skills to properly plan and prioritize** based on health risk assessments/sanitation safety planning etc.

- There is a lack of understanding of the **contracting cycle** and ability to engage the informal private sector

The role of the private sector is still limited

| Construction	Emptying & Transport	Operation & Maintenance (incl. treatment & reuse)
Business development	Training	Consultancy

- Nigeria: Toilet business owners – artisans and masons – need training on sanitation technologies and entrepreneurship (sales, marketing, financial management, contracting)
- Ghana: Quality and work ethics concerns particularly linked to informal artisans providing household services
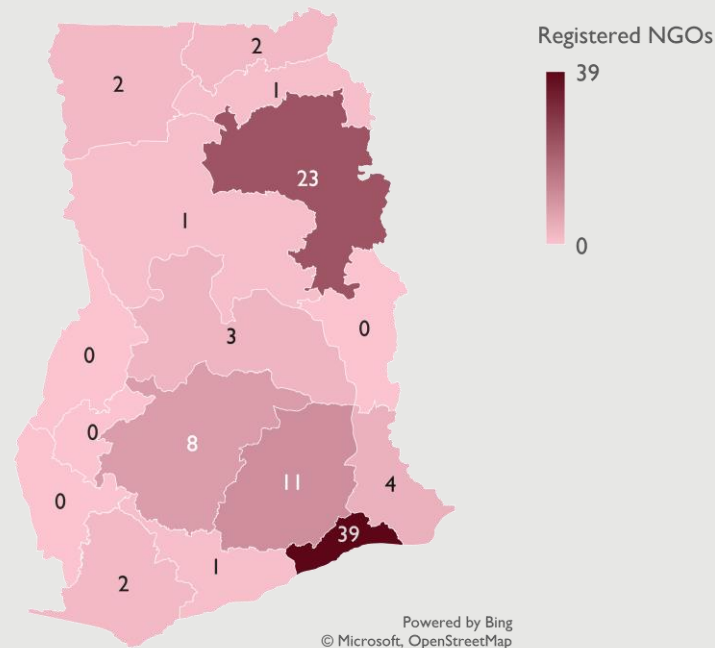
Development partners fill (or fund) significant functions

NGOs in Nigeria focusing on Area-wide Sanitation
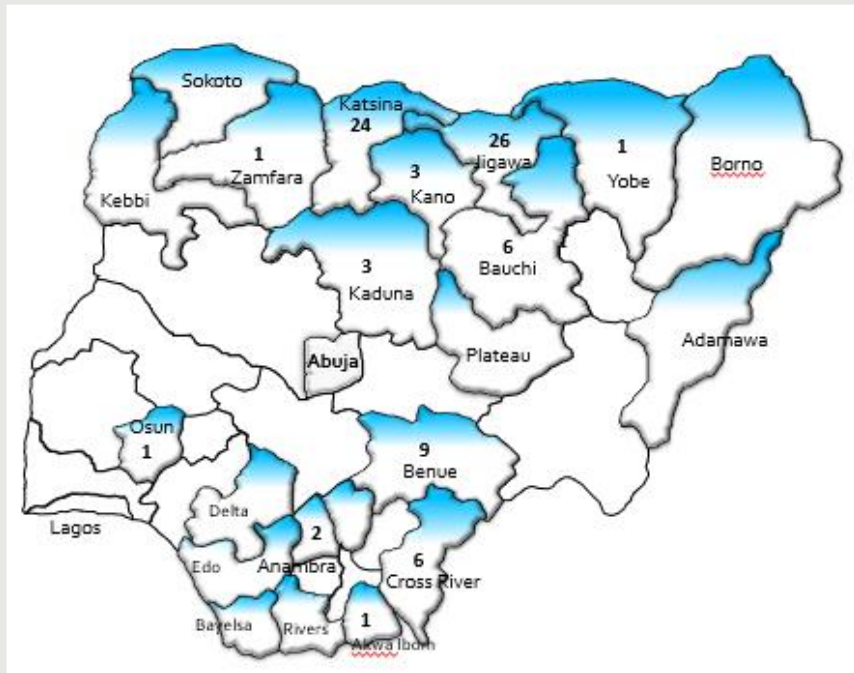
NGOs in Ghana registered with CONIWAS to work on WASH

Registered NGOs

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Dependence of functions on volunteers is high: programs, remuneration and motivations vary

	Ghana	Nigeria	Rwanda	Ethiopia
Government program volunteers	✘	✔	✔	✔

	Ghana	Nigeria	Rwanda	Ethiopia
Remuneration	✘	Only travel allowance for LGA volunteers	Only travel allowance	✘

|	Ghana	Nigeria	Rwanda	Ethiopia
Motivation	Giving back to community	Giving back to community, prestige/ status	Unknown	Giving back to community, hoping on employment opportunities

Nigeria dependence on volunteers

The sector depends on volunteers in many different roles:

- Community WASH committees

- Volunteer hygiene promoters: women mostly (4/5)

- Natural Leaders/ Community Consultants

- Champions: Religious leaders, Village heads and teachers

- LGA WASH Unit Volunteers

There is an observed fatique in volunteerism of the WASH committees

- As the government is not recruiting there is no chance of formally recruiting them into the sector

Number of Volunteers in sampled LGAs
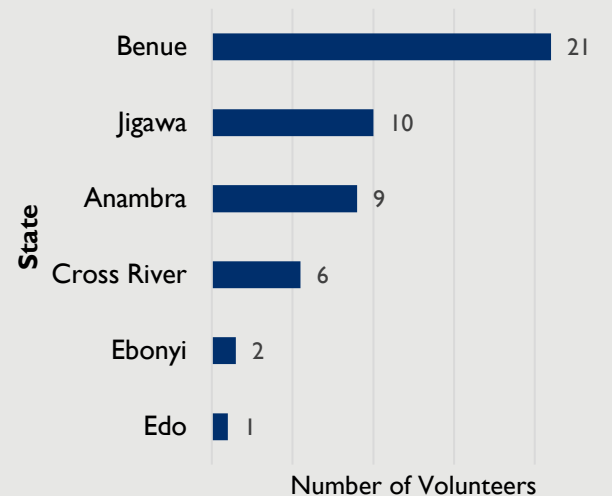
These LGA volunteers often work in community mobilization, and get stipend for travelling and feeding allowances

Identified trends & impact on HR

Trend	Impact on HR
I. Climate Change	Will impact jobs (or at minimum competencies) Will require the need to work across departments and potentially positions that are focused on cross-sectoral coordinative work
II. Federalization/decentralization	Transfer of tasks and responsibilities without delegating power to manage HR Inadequate support to local governments to develop/strengthen capacity
III. Governments' paradigm on behavior change	Devolving the responsibilities from public sector to households, which in cases results in the public sector not taking its responsibility nor creating necessary jobs for rural sanitation & hygiene
IV. SDGs have pushed the ODF agenda	Has increased the focus on sanitation, and some countries have developed a workforce for it (India); others have strongly relied on NGOs/development partners
V. Post ODF/FSM/Sustainability of services/behaviors is low on public sector agenda	Limited/no jobs are planned for or put in place to manage faecal sludge, maintain the sanitation facilities (or manage repair after collapse) in the public sector
VI. Focus on Urban	People will go where the jobs go Reduces the likelihood of an increase in HR in rural areas Reaching the last mile in far remote rural areas will be that much harder to do

Identified trends & impact on HR

Trend	Impact on HR
VII. Pandemic and future epidemics	May impact household demand for sanitation and handwashing facilities May impact the availability/creation of hygiene-related jobs in particular
VIII. Gender Equality and Inclusion	Should impact recruitment processes Will require GESI specialists Will continue to need advocacy and influencing skills
IX. Digitalization	Impacts the work of HR in the field Large impact on capacity development and learning opportunities
X. Integration with solid waste management (in some countries)	There is a potential to group the work with solid waste, which is politically more attractive to invest in This risks losing staff time to solid waste management
XI. Private sector engagement	Will create jobs in both formal and informal private sectors (has yet to be proven viable) Requires a completely different mindset Requires human resources in public sector that understand and can create/support an enabling businesss environment

Factors and barriers affecting sector HR

Enabling environment barriers:

- Inadequate financial resources for sanitation
- Unstructured nature, inadequate coordination across sectors and capacity development channels
- Limited incentives provided to local governments to achieve area wide sanitation coverage
- Limited jobs created for the sector to absorb new capacity coming in (e.g. School of Hygiene graduates not having a job)
- Jobs are tied to duration of Projects
- Focus (politically) on containment/achieving ODF
- Inadequate support from public sector to create enabling environments for businesses (i.e policies on taxation of raw materials, coordination etc.)

Organizational barriers:

- Government recruitment freezes or setting of quotas
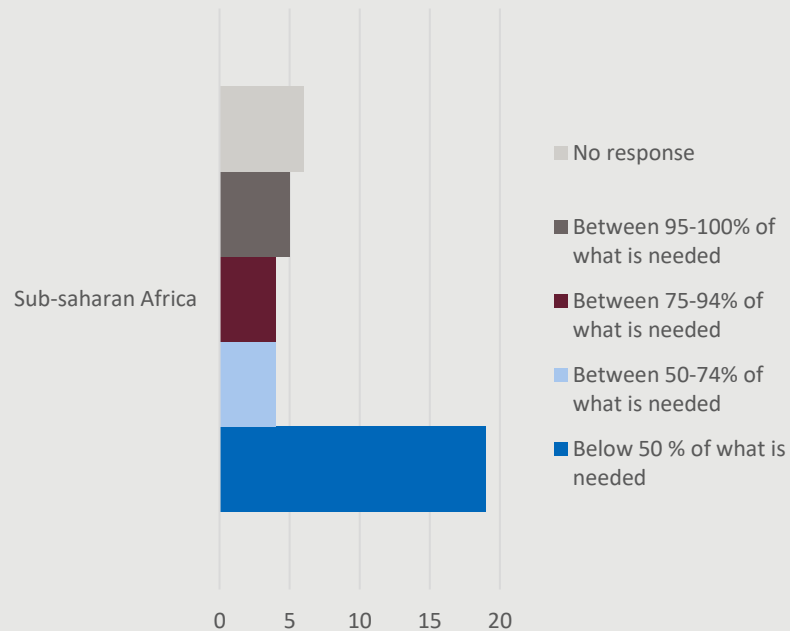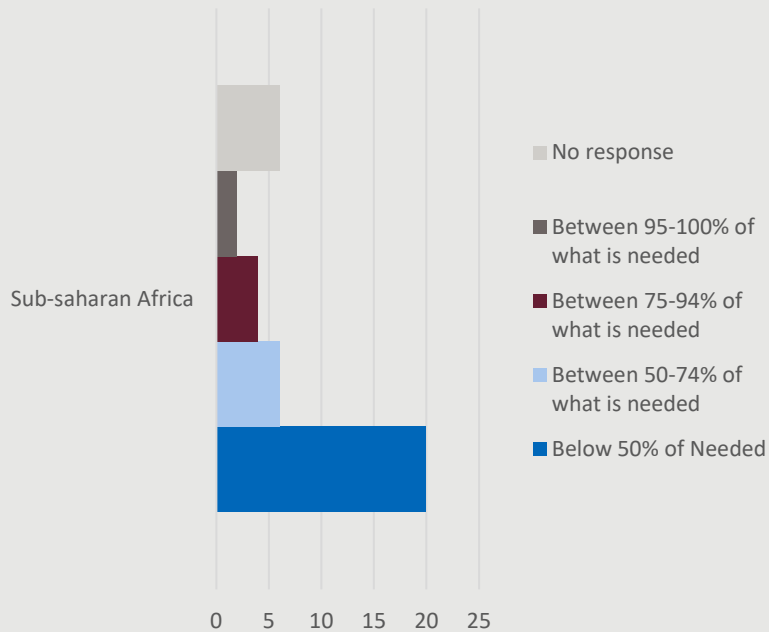- Unequal distribution of staff across the regions/states

Individual barriers:

- Unattractive remuneration/conditions public sector (Ghana)
- Overburdened workforce – especially at local level

GLAAS 2022: Overall sufficiency of training institutions

ONSITE SANITATION & FSM

Sub-saharan Africa

No response

Between 95-100% of what is needed

Between 75-94% of what is needed

Between 50-74% of what is needed

Below 50% of Needed

0   5   10   15   20   25

BCC, HYGIENE FACILITIES/TECH

Sub-saharan Africa

No response

Between 95-100% of what is needed

Between 75-94% of what is needed

Between 50-74% of what is needed

Below 50 % of what is needed

0   5   10   15   20

Source GLAAS preliminary data: 38 countries in Africa filled in
GLAAS SURVEY 2021/2022

10/25/2022

27

INGOs are those that offer capacity development for community mobilization, BCC, hygiene promotion, sanitation marketing, MBS

- There is **limited investment in capacity development for rural sanitation and hygiene by the public sector** (for masons, artisans, community mobilisers).

- There are **limited local institutions focused on capacity development or continuous professional development of sanitation and hygiene professionals** (e.g. limited TVETs that have hygiene behavior change curricula).

- Existing curricula is **not often upgraded with new and innovative approaches** currently being used in the sector (e.g the latest technologies)

- The efforts by Development Partners and INGOs often **remain uncoordinated, can overlap in geographical areas covered and topics/ audiences covered**; leaving areas untouched

- Many capacity development efforts **lack continuous efforts to ensure application of learning** (e.g. through continuous support, mentoring or peer to peer learning) and there is **limited consideration** of local government staff or volunteer **workload** before adding new tasks

DISCUSSION
FINDINGS

- **For participants from Ghana/Nigeria**: Do these findings resonate? Is there anything that surprised you or that you don't agree with?

- **For participants from other countries:** How do the presented findings correspond to your context? Do you recognise findings, or what is different in your context?

- **For all participants**: Are there other insights, gaps, barriers and/or responses/initiatives that you would have expected to see here or would suggest the project to look into further?

PHOTO CREDIT: WASHPALS

PRELIMINARY RECOMMENDATIONS/ PROPOSED ACTIONS

Take collective responsibility for professionals and competencies in national plans for universal access

- Country governments to collectively across WASH (related) sectors, assess the human resource shortages (nrs) & competencies (gaps) and the issues causing these
  - Developing a group responsible for this (e.g. Zambia's Skill Advisory Group) (short term)
  - Include human resources required to deliver the national plans - through formal assessments (long term)
- Country governments – supported by Development partners – to coordinate the capacity development providers (universities, TVETs, and others) and sector actors to deliver activities to fill gaps, address barriers and develop a strong workforce (intermediary)
  - Development Partners / INGOs to develop a platform to coordinate and plan their capacity development efforts (e.g. CONIWAS Ghana) with a rotating leadership between the larger INGOs
- Country governments, local governments and INGOs to plan for the future of the sanitation and hygiene sector workforce by advocating for budgets and the taking of responsibility to address the issues (across sectors) (intermediary)

PHOTO CREDIT: WASHPALS 2

Develop and professionalize a sanitation and hygiene labor market

- Development partners, Government departments and INGOs should continue to advocate for increasing investment in (rural) sanitation and hygiene, and/or work on cross-sector subsidies

- Government (potentially with support from ILO/ World Bank) to work on standardization of jobs, roles and needed qualifications, salaries, and job conditions for all levels, that are aligned with other sectors, including through development of appropriate HR policies

  - At minimum: Community health workers, Environmental Health officers, Sanitary /Hygiene inspectors, Health promotion specialists, Community facilitators

- Assess roadmaps to (and feasibility of) formalization of informal private sector (e.g. masons, artisans, emptyers)

- These professionalization efforts need to be coordinated with the Ministry of Education, Economy and/or Labor

Implement incentive mechanisms and delegate decision making power on HRM for local governments to increase their capacity

- Public Services Departments should develop recruitment acts, policies and guidance for local governments to recruit and select their employees

- Sanitation / hygiene departments at national/federal level:

  - should develop guidance and support systems that support decentralised units to fulfil their responsibilities

  - develop incentives & rewards for good performance (e.g. in Nepal municipalities with WASH plan get budget for it; in India there was competition between best performing districts)

- Sanitation/ hygiene departments at national/ Federal level should support those local governments that are willing with capacity development or guidance

Bring local sector programs together for planning and sharing HR

- Joint planning of programs and tasks should happen at development partner level, national level, and local government/municipality level.

- Country government departments (Sanitation, Hygiene, Solid Waste, Agriculture, Education, Health) should coordinate centrally to develop and implement incentives for the sectors to work together and collaborate

Creating Incentives or programs to attract needed skills and expertise to rural areas

- The public services departments to implement financial incentives for the rural workforce - additional pay, offer health/ insurance packages for families, and other benefits.

- Set up of public services programs, in which every 5 years of service a minimum of x % of time should be spend in rural area.

- Capacity development programs (country, NGO, INGO) to build up local expertise (e.g. Indian volunteers of Swach Bharatt mission now considered for sanitation supervisor position)

- Introduction of internship/ trainee programs in rural areas to familiarize the upcoming professionals with working in the rural areas.

- CSOs, NGOs, Development partners could advocate with those in other sectors that are facing difficulties to attract workforce (e.g. Health) for investment in rural areas public services (Transport, Public Schools, Roads, Electricity, and WASH) to attract rural workforce. The argument in Ireland used is to counter urbanization, and create economic opportunities.

Improve HR data collection and HR management

- All employers should have a transparent data collection on human resources (gender, education, salaries, attrition) and do HR satisfaction surveys as well as departure surveys. It will help to plan for the future, and address issues.

- All employers should develop standard roles and job descriptions and do not allow these to fully change every project (i.e., keep time to sustain the basic role)

- All employers should seriously consider workload before adding a new role/ task on an individual (this includes new funded projects)

- Private sector, and (especially local) NGOs should develop clear career paths that do not drain the experts from the country's system.

Local governments should build a diversified workforce to perform their functions

- Public sector should diversify its workforce centrally in sanitation / hygiene departments to reflect the programs that are aiming to mobilise communities or drive behaviour change

    - i.e. Behaviour change specialists, Public Health Specialists

- Local government should work with local training institutes and experts to build mid-level professionals who can manage oversight and implementation and monitoring of programs

- Local government should investigate further to transition (talented) community health workers/ volunteers into formal (local) government jobs

Recognise the potential of lower-level skilled workers to deliver (rural) on-site sanitation and hygiene

- Country governments to consider recognizing experience as education level (especially for women)

- Local governments to work on shorter capacity development programs to educate and provide continuous updating of those working on health/hygiene promotion/community mobilisation and masonry and where possible attract new workers (i.e. unemployed youth)

- As part of increasing private sector engagement, programs to introduce entrepreneurs/masons (without diplomas or literacy) to sanitation and support/train them on viable sanitation solutions (e.g. pit latrines/twin pits), and business skills

Explore the formalization of the informal sector

- Local governments can mobilise the informal sector in its programs (e.g. India where masons were mobilised by the districts and trained on the models they needed to put in place)

- Certification schemes can be developed in which the government works with the TVET institutes to develop a program for masons that include toilet / handwashing facilities (in buildings)

- Governments can work also on policies to develop building codes for new housing developments, making toilets and handwashing part of the pre-requisite to build.

- Development partners/ INGOs can – investigate the steps to formalisation of the informal sector in particular around the steps to formally get them registered and paying taxes. This research should also include finding any unintended consequences.

Develop sanitation professionals through TVET, university and non-formal learning

- Country government (with Ministry of Education) should develop a strong TVET structure, with strong courses that are focused on low and mid–level professionals that have a high practical nature and allow professional development / updating

- Universities (and consortia of universities) should collaborate and share open source their materials to develop Sanitation Leaders (through university degrees) who are technically, socially, politically and environmentally trained (e.g. GSGS and the potential of African Centres of Excellence)

- Development partners, INGOs, and employers should develop other vehicles for learning and recognition for those professionals coming in via other sectors

- Employers should work to find appropriate professional development/continuous learning – and professionalise that way

- Adopt capacity development principles and develop the ability for people to apply their learning

Mainstream peer-to-peer learning for public sector staff working on sanitation and hygiene

- Develop the peer-to-peer activities as part of the role, and subsequently support new staff entering those roles

- Introduce a facilitator/coordinator of the peer-to-peer learning activities that coordinates this locally

- Evaluate and reflect yearly

Some of the recommendations specific to Ghana and Nigeria

Ghana

- Diversify the sanitation professionals at MMDA

- Investigate if the standard of 1:700 ratio for EHO is financially feasible (can the jobs be created)

- Work on EHO curricula for sanitation and hygiene

- Build the policies, incentives, enabling environment and enforcement for the HR to safely empty, transport and dispose of fecal waste

- Build capacity on innovative technolgies (e.g. biodigesters, satopans)

- Support the growth of the informal sector - masons, artisans and sanitation as a business.

- Develop a National Sanitation Authority to focus on sanitation delivery at the national level

Nigeria

- Work on upgrading of skills and knowledge of the professionals (complex problem solving, adaptive management, project management)

- Investigate potential ways in which to increase number of Environmental Health Officers and their skills in behavior change communication.

- Foster the domestication of national and State plans into LGA level plans to translate into identification of gaps and much needed HR gaps

- Inform farmers on safe emptying practices, and capacitate them to safely reuse to cover shortage in these fields

- Support the growth of the informal sector - masons, artisans and sanitation as a business.

GROUP DISCUSSION 1 RECOMMENDED ACTION

10 Min

- Are the proposed recommendations/actions valid and relevant in response to the findings presented earlier?

- Can you suggest other proposed actions, either in Ghana/Nigeria or in your own country/in general? (discuss newly proposed actions to make sure everybody understands them, then add them to list of actions – see hereunder)

PHOTO CREDIT: WASHPaLS

EXERCISE
RECOMMENDED ACTION

5 Min

Individually stickers/post-its to indicate:

- Level of relevance of each proposed action (how relevant is this action to your context (low, medium, high)? Ask them to write the name of their country on the stickers/post-its

- Prioritization of the actions (use 3 stickers to indicate which actions have highest priority)

- For those actions you have deemed medium or highly relevant, indicate who/which actor(s) should take the lead on such an action in your country/context. Either write on the same sticker/post-it or add a post-it, and be as specific in identifying the lead actors as you can be.

PHOTO CREDIT: WASHPaLS

WASHPaLS #2

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