

Executive Summary

STUDY ON WASH-NUTRITION BARRIERS AND POTENTIAL SOLUTIONS



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SUMMARY

Water, sanitation and hygiene (WASH) has an important effect on nutrition status. Globally, around half of the burden of child undernutrition is due to inadequate sanitation and hygiene. Yet many WASH programs do not recognise their potential effect on nutrition, while many nutrition initiatives do not include WASH. Integration of WASH and nutrition is therefore a promising strategy to improve nutrition outcomes.

A stakeholder consultation was conducted with key informants whose work relates to nutrition and/or WASH. Forty representatives from government agencies, development partners and civil society were interviewed, including national, provincial and district level staff. The purpose of the consultation was to identify current barriers to WASH and nutrition integration in Cambodia, and identify opportunities to address or overcome these barriers.

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FINDINGS



Knowledge and learning: Stakeholders reported that there is a growing evidence base to support integration of WASH and nutrition, and increased awareness of the available evidence. This evidence has encouraged policymakers to discuss WASH-nutrition integration. Knowledge of the rationale for WASH-nutrition integration is becoming more widespread, however this rationale is not always understood in detail. Stakeholders are learning about WASH-nutrition integration both top-down, from global evidence, as well as bottom-up, from seeing the effects of integrated work at a community or household level. Meetings, trainings and workshops provide forums for learning, but are insufficient to foster progress towards integration – particularly at subnational level. Stakeholders also learn about WASH-nutrition integration by working together routinely with counterparts from different sectors, for example where WASH and nutrition personnel are colleagues who share the same manager. Specific technical guidance on how WASH contributes to nutrition and what WASH-nutrition integration looks like would support integration.



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RECOMMENDATIONS



Knowledge and learning

Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none"> Time required to learn about WASH and nutrition linkages, in the context of competing priorities Lack of deep understanding about WASH and nutrition linkages Limited follow-up on technical discussions about WASH and nutrition linkages 	<p>Top priority:</p> <ul style="list-style-type: none"> Appoint focal points who can accumulate knowledge about WASH and nutrition. <p>High priority:</p> <ul style="list-style-type: none"> Generate local evidence for the links between WASH and nutrition, e.g. secondary analyses of data from pilot projects, and projects such as NOURISH that include control sites. <p>Additional recommendations:</p> <ul style="list-style-type: none"> Disseminate technical guidance, endorsed by all key national stakeholders, on the links between WASH and nutrition. Provide opportunity to attend training courses for key staff members, e.g. focal points, and high-level staff with responsibilities for program design. Enhance institutional and organisational structure around learning events to support follow-up.

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FINDINGS



Policy: The policy environment is siloed. While there are some strategies that draw together policies across multiple sectors, there is no single policy that relates to both WASH and nutrition. There are many policies relating to nutrition and WASH, and responsibility for these policies is split across multiple ministries. Due to the number of policies that already exist, developing any new policies for WASH-nutrition integration would only complicate the operating environment. At the same time, policy is an essential part of the enabling environment for WASH-nutrition integration. It is therefore necessary to prioritise the development of a policy framework that is supportive of integration. In order to develop a supportive policy framework without developing any new policies, it is possible to develop a strategy for WASH-nutrition integration, and map existing policies against this overarching strategy. However, policies are insufficient to cause change; to support WASH-nutrition integration, policies must include action plans, and be complemented by supportive institutional arrangements and funding at both national and Sub-national level.

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RECOMMENDATIONS

 Policy	
Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none">Time required to work across siloed policies and implementation structuresDevelopment partners replicate silos when aligning with government policyDoing work outside mandated sector-specific responsibilities is seen as a problem	<p>Top priority:</p> <ul style="list-style-type: none">Develop a cross-sectoral strategy that outlines how existing WASH and nutrition policies contribute to integrated efforts to improve nutrition outcomes.Leverage existing policies to divide responsibilities relating to integrated work between different sectors. <p>Additional recommendation:</p> <ul style="list-style-type: none">Cost the WASH and nutrition-related components of existing policies, and use these costings as a basis for fund mobilisation.



FINDINGS



Leadership: Effective collaboration requires clear leadership. In order to ensure that leaders have sufficient time and resources to lead integration efforts, leadership responsibilities should be mandated rather than driven by individual champions. However, it is also important to recognise that strong leaders make effective champions and can provide valuable support to integration efforts, particularly in the short and medium term. Leadership of efforts to integrate WASH and nutrition should come from within existing institutions, rather than by creating a new agency. Currently, roles and responsibilities are not clearly allocated across sectors or agencies, so it is unclear who is responsible for leading on specific aspects of WASH, nutrition, or WASH-nutrition integration. While individual leaders can work across siloed institutions, this is challenging and therefore it is necessary to focus on institutional arrangements that can connect silos. High-level leadership is necessary to foster buy-in to integration efforts. However, while high-level leaders can drive change it is not feasible for them to personally manage integration efforts. Government leadership at the national level is likely to be more effective than Sub-national leadership.

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RECOMMENDATIONS


<div>  Leadership </div>	
Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none"> Unclear leadership roles and responsibilities relating to WASH-nutrition integration Lack of institutional support for leaders to innovate in order to integrate WASH and nutrition Over-estimation among national level stakeholders of capacity for or interest in leadership at Sub-national level 	<p>High priority:</p> <ul style="list-style-type: none"> National level stakeholders provide clear leadership and guidance to Sub-national line agencies. <p>Additional recommendations:</p> <ul style="list-style-type: none"> Strengthen existing coordination mechanisms by ensuring leadership roles and responsibilities are allocated clearly, and sufficient support is provided for follow-through. High-level leaders promote buy-in to an existing coordination mechanism, likely CARD. Use evidence to advocate for WASH-nutrition integration to leadership, to encourage senior government leaders to support collaboration across sectors for WASH and nutrition integration. If increased Sub-national leadership is desired, national level to provide funding allocation to increase provincial and/or district government capacity to spend time on coordination for WASH-nutrition integration.

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FINDINGS



Governance: Vertical government implementation structures for WASH, and separate structures for nutrition, are very well established. Consequently, there is no government implementation structure that is responsible for both WASH and nutrition. Line ministries allocate funding vertically, and subnational governments have limited decision-making authority. Therefore, while some national stakeholders expect subnational governments to coordinate integration, subnational stakeholders reported that this is usually not feasible. An alternative approach is to use a coordination mechanism at national level, such as CARD national-level coordination mechanism could provide a forum to negotiate an overarching strategy for integration, and subsequently to agree on which ministries will take on which responsibilities under the guidance of the agreed strategy. Stakeholders also commented on governance of civil society, noting that development partners that fund or implement cross-sectoral programs are required to report to multiple ministries or line agencies, and therefore cross-sectoral programs require more administrative work compared with single-sector programs.



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RECOMMENDATIONS

<div>  Governance </div>	
Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none"> Lack of communication between ministries or line agencies Expectation that Sub-national governments will develop innovative approaches to integration, although Sub-national governments have limited capacity to innovate in the context of existing vertical structures Co-existence of multiple potential coordination mechanisms for WASH-nutrition integration 	<p>High priority:</p> <ul style="list-style-type: none"> Strengthen a single national coordination mechanism, likely CARD, and use this mechanism as a structure for integration. Explore opportunities to strengthen existing mechanisms that support development partner alignment, and consider how to streamline reporting for government and development partners. <p>Additional recommendations:</p> <ul style="list-style-type: none"> Work within existing vertical structures to promote openness to other ministries, and subsequently build buy-in to structures for integration. Consider appointing a single focal point in each ministry or line agency to participate in discussions about integrated work. Consider the feasibility of Sub-national governance of cross-sectoral projects, including an assessment of resources required. Identify lessons learned from previous examples of responsive cross-sectoral coordination, e.g. maternal death audits.

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FINDINGS



Financing: Funding for nutrition and WASH is limited. In this context there is already competition for funding, and stakeholders are concerned that integration will increase competition for funds by encouraging nutrition-focused actors to seek funds previously reserved for WASH, or vice versa. This level of concern leads to territorialism about sectoral mandates and discourages participation in cross-sectoral work. Stakeholders also commented that public and donor funding is usually siloed, whereas merged funding enables integrated work. There are costs to pursuing integration and these are often unfunded since funding is siloed and also tied to specific projects. At the same time, integration can lead to more efficient programs.



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RECOMMENDATIONS


 Financing	
Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none">Insufficient funding for core activities in WASH or nutritionIntegration activities are unfundedCompetition for funding, and perceived risk of future competition	<p>Top priority:</p> <ul style="list-style-type: none">Advocate to Ministry of Economy and Finance (MEF) for increased budget allocations to both nutrition and WASH.Advocate to donors for increased merged funding opportunities, e.g. through existing government coordination mechanisms and global civil society networks. <p>Additional recommendation:</p> <ul style="list-style-type: none">Include integration expenses in costings, and use costings to mobilise funds from government and civil society.



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FINDINGS



Personnel: Human resource capacity was identified as a major constraint to WASH and nutrition integration. Many people have limited knowledge or interest in activities outside their sector. Yet it is very difficult for people to have deep technical capacity across a broad range of content areas. Instead, there should be widespread, accurate understanding of how WASH and nutrition relate at the big picture level. At the level of technical detail, if it is not possible to find people who have deep technical capacity in both WASH and nutrition, it can be effective to bring together multi-sectoral teams of people who each have deep technical expertise in one area. High-level champions for WASH-nutrition integration are valuable and effective. However, it may be more sustainable to have focal points, which are institutionalised roles, rather than champions who are more personality-driven. Stakeholders reported strong emotional responses to integration – including both fear of change and openness to change – which can be expected to influence the

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RECOMMENDATIONS


<div>  Personnel </div>	
Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none"> Many people have limited technical capacity beyond their sector of primary responsibility It is overwhelming for an individual to have deep technical knowledge across a broad range of content areas Negative emotional reactions to integration are a strong disincentive to integrate that is difficult to manage People tend to focus on their existing responsibilities and established routines Limited time availability of potential champions for WASH-nutrition integration 	<p>Top priority:</p> <ul style="list-style-type: none"> Cultivate and support working relationships across sectors, whether within or between organisations, e.g. through the consistent allocation of the same individuals to attend meetings, funded time, funded transport. <p>High priority:</p> <ul style="list-style-type: none"> Consider how to promote integration in ways that reassure people of their responsibilities and mitigate territorialism, e.g. clear allocation of responsibilities and early communication about this allocation. <p>Additional recommendations:</p> <ul style="list-style-type: none"> Use champions strategically to advocate cross-sectoral work, but not to manage the process of integration. If focal points are appointed, recruit people who are experts in their content area and open to other content areas. Consider providing rigorous, funded training opportunities for a small number of staff rather than less detailed training for a large group.

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FINDINGS



Design: For programs implemented by civil society, program design is driven by the priorities of the donor. Many subnational government programs are focused on delivery of outputs that have been mandated at the national level, and programs implemented by development partners can also be designed to achieve pre-determined outputs. This means that designs can be developed around pre-determined outputs, rather than on selecting outputs that best support the achievement of stipulated outcomes. A greater emphasis on outcomes would provide more flexibility in design and is better suited to a cross-sectoral approach. There is a time lag to program design, and limited windows of opportunity to bring in new ideas. There is limited flexibility once designs are established, particularly for subnational governments, line agencies and implementing NGOs. Stakeholders reported several suggestions for integrated design, including co-location, behaviour change campaigns that include both WASH and nutrition messages, changes to supply-side WASH programs, and delivery through the private sector. An integrated theory of change or causal framework would support design of integrated or complementary programs.



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RECOMMENDATIONS


<div>  Design </div>	
Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none"> Lack of awareness of current good practice in other sectors Limited funding opportunities for co-location Donor-driven design Time-lag in design, and limited windows of opportunity 	<p>High priority:</p> <ul style="list-style-type: none"> Use current evidence, including locally generated evidence, during limited windows of opportunity to ensure programs are as up-to-date as possible. <p>Additional recommendations:</p> <ul style="list-style-type: none"> Advocate to donors to fund programs that are informed by the integrated theory of change or causal framework, including co-located programs. Sub-national governments to advocate for co-located funds, e.g. through province- level or district-level planning.

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FINDINGS



Implementation: There is a risk that efforts to promote WASH-nutrition integration can remain at the level of theoretical discussion, without moving to implementation; stakeholders identified a need to focus more on implementation. Cross-sectoral steering architecture is essential to support routine implementation of integrated work. While stakeholders reported some examples of integration being achieved through coordinating the implementation of discrete sector-specific programs, these were exceptions and this approach is unlikely to become common since there is very limited flexibility in implementation. Stakeholders described several successful implementation strategies for integrated programs, including a single contract, shared delivery platform, and an integrated design that is implemented in a segmented way. Stakeholders at national and subnational level explained that it can be very challenging for community members to participate in multiple activities, or learn information about multiple topics at once – this is an important implementation consideration for integrated programming that aims to address both WASH and nutrition.

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RECOMMENDATIONS


 Implementation	
Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none"> Ongoing theoretical discussions about WASH-nutrition integration do not necessarily lead to action, potentially resulting in participant disengagement It is difficult to establish and maintain steering architecture across sectors Expectation that integration can be achieved through coordination of discrete projects during implementation, despite the fact that this is very challenging in practice 	<p>High priority:</p> <ul style="list-style-type: none"> Promote cross-sectoral steering architecture that is institutionalised rather than project-driven, e.g. strengthened CARD, high-level champions for integration, and increased support for provincial- and district-level planning. <p>Additional recommendations:</p> <ul style="list-style-type: none"> Ensure that theoretical discussions, e.g. working groups and meetings, have an action plan and are managed through agendas, minutes, action items, etc. Promote an enabling environment for integration at the design stage, e.g. through policy, governance and financing.

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FINDINGS



Monitoring, evaluation and reporting: Stakeholders are accountable to what they report on. This can discourage integration where reporting lines are siloed. Attribution of nutrition outcomes to sector-specific activities is extremely challenging. Joint monitoring is efficient, but requires consensus on relevant indicators. The current institutional context promotes parallel monitoring, rather than joint monitoring. Monitoring and evaluation provides an important opportunity to generate local evidence, however generating evidence regarding the specific changes attributable to WASH or nutrition is too burdensome for regular monitoring and instead requires special studies.

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RECOMMENDATIONS



Monitoring, evaluation and reporting

Barriers to integration	Opportunities to address or overcome these barriers
<ul style="list-style-type: none"> Lack of consensus across sectors around an integrated theory of change or causal framework Focus by funding bodies on sector-specific outputs, rather than broader outcomes Accountability and incentives for outputs are sector-specific Increased time burden to liaise with multiple sectors 	<p>High priority:</p> <ul style="list-style-type: none"> Develop an integrated theory of change or causal framework that includes the contribution of WASH to nutrition. This theory of change or causal framework can be developed based on existing materials. Build consensus around this integrated theory of change or causal framework. <p>Additional recommendations:</p> <ul style="list-style-type: none"> National ministries to provide technical guidance on indicators for joint monitoring, as well as clear allocation of responsibilities for indicators Explore possibilities for consolidated monitoring and reporting within defined areas, e.g. reporting against a cross- sectoral district plan.

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INTRODUCTION AND BACKGROUND

The contribution of WASH to undernutrition

The contribution of water, sanitation and hygiene (WASH) to nutrition outcomes is broadly recognised, particularly following the recent upswell of interest in multi-sectoral responses to undernutrition.^{1,2} While the evidence base for precise mechanisms linking WASH and undernutrition is still emerging, it is clear from available evidence that improved WASH is essential to effectively address nutrition outcomes.^{3,4}

Inadequate WASH infrastructure and practices lead to faecal contamination of water, food, and the environment, exposing people to faecally transmitted infections (Figure 1).^{3,5} Environmental contamination is of particular concern for young children, who are particularly susceptible to ingesting pathogens while exploring their environment during the early stages of child development (6–24 months) and who are also less likely to recognise potential sources of contamination, such as animal pens or dirty water, as a health risk.⁶

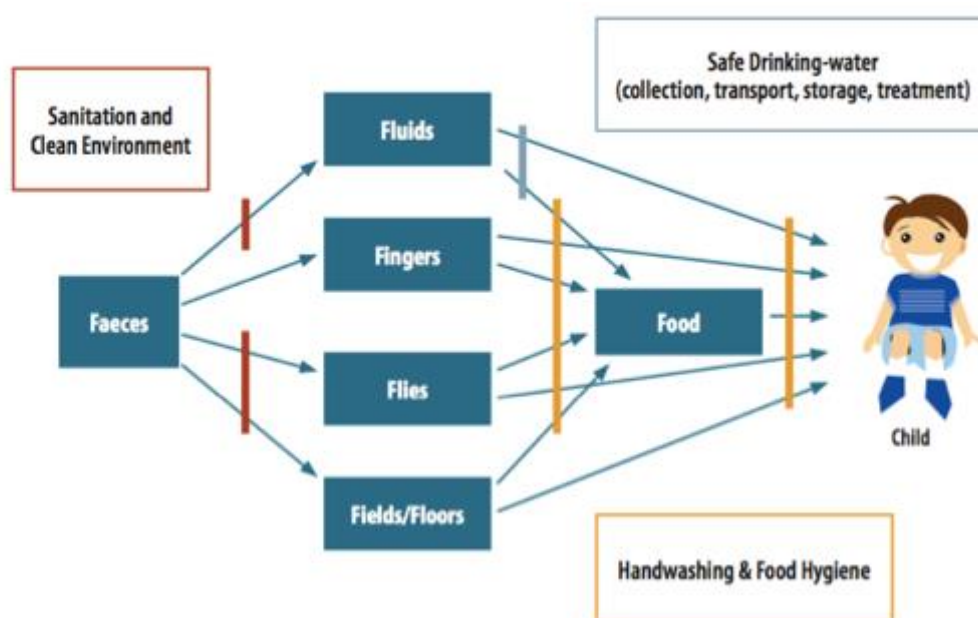


Figure 1 F-diagram (WHO 2015, adapted from Perez et al., 2012)

Faecally transmitted infections increase the risk of undernutrition, particularly in children. Diarrhoea, bacterial infections and intestinal parasites inhibit the absorption of energy and nutrients from ingested food.^{3,7,8} Malabsorption compromises immune function, increasing the risk of further infection as well as the risk of more severe and longer bouts of illness.⁹ Producing antibodies to fight infections – including faecally transmitted infections that do not lead directly to malabsorption, such as Hepatitis A, B and E, typhoid fever, schistosomiasis, and trachoma – expends energy and protein, with more energy and protein required to respond to more severe or longer bouts of illness.¹⁰ Where energy and protein requirements are increased, there is increased risk that ingested food will provide insufficient energy or protein to meet these requirements, particularly in cases of malabsorption. Thus infection

contributes to undernutrition, and undernutrition increases the risk of further infection.⁹ This undernutrition-infection cycle can lead to wasting (acute undernutrition) or stunting in cases of recurrent infection (chronic undernutrition).⁹

Furthermore, environmental enteropathy – defined as malabsorption, gut inflammation and increased susceptibility to enteric infections at a chronic but subclinical level – has been linked with poor child nutrition outcomes including stunting and cognitive deficits.^{1,11} Large national and cross-national analyses have demonstrated a direct correlation between the prevalence of open defecation in an area and child stunting in that same area – i.e. a correlation that is not mediated by incidence of diarrhoea – suggesting the influence of environmental enteropathy.^{11,12}

Poor WASH also contributes indirectly to undernutrition, due to the time and resource costs of actions taken to mitigate the effects of inadequate WASH infrastructure or supplies.³ For example, actions taken to access safe water, such as walking long distances and carrying large volumes of water, can substantially increase energy requirements and thereby increase the risk of energy deficiency.¹³ This disproportionately affects women and girls who are more likely to be involved in collecting safe water, and is an important contributing factor to chronic energy deficiency among women of reproductive age.^{13,14} The imperative to access safe water can also divert caregivers' time away from child care,¹⁵ which can have a negative effect on child nutrition status since child feeding and care practices are essential to protect and promote child nutrition.^{9,16}

Overall, it is estimated that half of the burden of child undernutrition is attributable to poor sanitation and hygiene (50% point estimate, 95% CI 39%–61%).¹⁷

Despite the fact that WASH is an important contributing cause of child undernutrition, WASH is not always a priority in nutrition policy and programming. The nutritional significance of poor WASH is often underestimated,¹⁰ overlooked¹⁸ or misunderstood.¹⁹ It is notable that – compared with health and agriculture – WASH generally receives less attention in multi-sectoral responses to undernutrition.²⁰ Globally, there is poor recognition of the preventive potential of WASH to avert undernutrition, and this translates to nutrition policies and programs that may be cognisant of the burden of undernutrition attributable to poor WASH but which do not integrate actions to improve WASH into a strategy to improve nutrition outcomes.¹⁸

Improved integration of WASH and nutrition has the potential to leverage the linkages between the two sectors in order to achieve synergistic effects.²¹ Available evidence of effectiveness is limited but indicates that nutrition programs that integrate WASH activities can achieve improved nutrition outcomes.^{16,22}

Integrating WASH and nutrition

The integration of WASH and nutrition is not an end goal. Importantly, there is no one correct way to integrate WASH and nutrition.³ Rather, WASH-nutrition integration is a strategic tool that can be used to improve nutrition outcomes.³ The appropriate level and type of integration is context-specific.³ Additionally, integration is likely to be incremental, building on success over time.³

While there is no single model of WASH-nutrition integration, there is a growing body of policy and program guidance,^{3,4,18,23,24} as well as examples of WASH-nutrition integration,²⁵⁻²⁸ to support policymakers, program managers, and other relevant stakeholders to promote WASH-nutrition integration.

Evidence from Bangladesh, Ethiopia, Honduras and Peru indicates that WASH can be successfully included in a multi-sectoral response to nutrition where this response includes a focus on alignment and coordination between sectors at national or subnational level.²⁷ Programs across Africa (the Democratic Republic of Congo, Mauritania, and multiple countries in the Sahel region) have illustrated that a “minimum essential WASH package” can be effectively included in vertical nutrition programs, such as humanitarian programs designed and implemented in response to specific, urgent needs.²⁷

It is also possible to apply natural synergies between WASH and nutrition to respond effectively to relevant needs, such as the waste disposal needs of floating and flood-affected communities in Cambodia.²⁷ WASH can be successfully integrated with nutrition programs through identifying and leveraging appropriate shared delivery mechanisms; for example, behaviour change communication relating to nutrition can successfully integrate hygiene messages²⁶ while health worker contact during the thousand-day window of opportunity for nutrition can also be a delivery point for hygiene education and demand generation for improved water and sanitation.²⁵ Additionally, health workers can be trained on key hygiene practices and supported to promote these practices during their routine activities.³

Finally, health facilities can model WASH hardware and practices that households can adopt at home, such as rainwater catchment systems and handwashing.³ Specific program examples of WASH-nutrition integration are listed in **Box 1**.

Box 1: Current program examples of WASH-nutrition integration

WASH programs are targeted in areas of high nutrition need. In one region of Mali, district officials from the Ministry of Health identified 180 communities with high stunting rates and very low access to and use of sanitation facilities. WASHplus is implementing a two-year program in these communities that includes both WASH activities (e.g. rehabilitating water supplies, community-led total sanitation, promotion of handwashing with soap) and nutrition activities (e.g. management of moderate acute malnutrition, promotion of exclusive breastfeeding).⁴

A multi-sectoral coordination mechanism for nutrition exists and includes the WASH sector. This is an approach promoted by the Scaling Up Nutrition (SUN) Movement, as well as the United Nations' Zero Hunger initiative, in multiple countries including Cambodia. The original Zero Hunger program was developed in Brazil in the early 2000s and provides a good example of effective multi-sectoral coordination for nutrition.²⁹

Nepal has a multi-sectoral nutrition plan that includes WASH, and this provides a framework for the USAID-funded SUSAHARA program to engage government staff from health, agriculture, WASH and other sectors at the district level.²⁸

WASH and nutrition practices are promoted together at community and household level. In Bangladesh, two USAID-funded implementing partners (SPRING and WASHplus) collaborate to promote WASH and nutrition practices together. WASHplus has provided technical inputs to SPRING staff, in order to support SPRING to integrate relevant WASH content into agricultural extension training for farmers, and health and hygiene training for community health workers.⁴

Demand generation for WASH products integrates demand generation for nutrition products. In Kenya, the Safe Water and AIDS Project has engaged in demand generation for health products since 2005. In 2007, this program was extended to include WASH products (e.g. WaterGuard and soap) and nutrition-specific products (e.g. micronutrient powder).³⁰

Additional case studies and program examples, including contact details, are available online at:

<http://www.washplus.org/wash-nutrition/casestudies>

<http://www.washplus.org/sites/default/files/nutrition-snapshots2015.pdf>

A recent World Health Organization-led evidence review identified several contributing factors that support integrated WASH-nutrition programming across the program cycle, including the geographic co-location of nutrition and WASH programs in areas with high incidence of diarrhoea, involvement of stakeholders from both WASH and nutrition in both design and management, a single contract mechanism or implementing partner, a shared budget or merged budgeting mechanisms, shared or aligned monitoring and evaluation framework(s) that disaggregate the contributions of specific WASH and

nutrition activities to program objectives under an integrated theory of change, and consolidated reporting.³ Effective approaches to integrate WASH into nutrition at a policy level include leveraging existing policies and strategies – including global strategies such as the Scaling Up Nutrition (SUN) Movement – to advocate for a multi-sectoral response to nutrition and greater integration of WASH.³

Despite the availability of evidence to inform approaches to WASH-nutrition integration, it is recognised that such integration is challenging. Key challenges to integration identified through program experience, previous research and expert advice include: siloed sector-specific knowledge; greater time and resource requirements for multi-sectoral compared with single-sector approaches; staff time, interest and technical capacity to work across more than one sector; sector-specific financing mechanisms and funding streams; separate design, implementation and monitoring processes; and a policy environment, as well as leadership and governance mechanisms, that are structured according to sector-specific approaches.^{3,21,23} In addition, the features of successful WASH-nutrition integration are necessarily context-specific.³

In order to inform efforts to integrate WASH and nutrition it is therefore appropriate to explore barriers and opportunities for integration at individual country level, as well as sub-nationally.

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WASH-nutrition integration in Cambodia

Nutrition and WASH are priority areas for both government and development partners in Cambodia. While previous efforts have led to substantial improvements in nutrition and WASH outcomes, outcomes remain poor by regional standards.³¹ One-third (32%) of children aged under 5 years are stunted and one-quarter (24%) are underweight,³² and an estimated 14% of women of reproductive age are underweight³² and 44% are anaemic.³¹ Forty-three per cent (43%) of the population do not have access to improved sanitation.³² Access to safe water is also low: 35% of the population use a non-improved source of drinking water during dry season, although this decreases to 17% during rainy season when more households use safe rainwater for drinking water.³² There are urban-rural disparities in WASH outcomes with 50% of people in rural areas having no access to improved sanitation and 41% having no access to improved water during dry season (19% during rainy season).³² Low coverage of improved WASH is recognised as an important contributor to the burden of undernutrition in Cambodia.³³

While there are no policies that link WASH and nutrition, current strategies provide a policy framework that indicates clear links between WASH and nutrition, as well as other related sectors. Current nutrition strategies adopt a multi-sectoral approach, linking nutrition with WASH – with a particular focus on adequate sanitation and elimination of open defecation – agriculture, poverty reduction and health.³⁴ The National Strategy for Food Security and Nutrition (NSFSN) (2014-2018) integrates multiple sectors, including WASH, under a food and nutrition security framework: the objectives of the NSFSN (2014-2018) encompass food security and agricultural productivity (*food availability*), social protection and resilience (*food access*), and health and WASH (*food utilisation*), as well as *stability* of availability, access and utilisation.³⁵ Current WASH strategies draw links with infrastructure, agriculture, rural development, health and education.³¹ The National Strategic Plan for Rural Water Supply, Sanitation and Development 2014-2025 includes objectives relating to improved water supply services, improved sanitation, hygiene behaviour change and institutional arrangements.³⁴

Both WASH and nutrition are multi-sectoral, cross-cutting issues. It is therefore unsurprising that multiple agencies have responsibilities for WASH, nutrition, or both. Government agencies with responsibility for both WASH and nutrition include the Ministry of Rural Development, Ministry of Health, Ministry of Planning, Ministry of Agriculture, Forestry and Fisheries, and Ministry of Education, Youth and Sport.³⁴ Ongoing efforts to improve strategic alignment, policy coherence and donor harmonisation have led to improved coordination and an increased emphasis on coordination bodies. The Council for Agricultural and Rural Development (CARD) is the government body mandated to facilitate coordination, policy guidance, monitoring and information management relating to nutrition.³⁶ The National Coordinating Mechanism for WASH sits under the Ministry of Rural Development (MRD), which is the lead agency for rural WASH.³⁴ Established technical working groups relate to nutrition (Technical Working Group for Social Protection & Food Security and Nutrition, hosted by CARD) and WASH (Technical Working Group for Rural Water Supply, Sanitation and Hygiene, hosted by MRD), while the more recently established

Sub-working Group on WASH and Nutrition includes stakeholders from both sectors with an emphasis on cross-sectoral coordination.³⁷

Cross-sectoral coordination between WASH and nutrition is also an emerging priority for development partners. Several large, multi-sectoral development programs, such as NOURISH,¹ EFAP-AF² and HARVEST,³ have included both WASH and nutrition or food security. In many cases this has taken the form of hygiene behaviours and education integrated into a program that includes other nutrition-related behaviour change communication messages and education. There have also been efforts to geographically align nutrition programs with investments in WASH infrastructure or demand generation for WASH infrastructure and supplies. Recently a cross-sectoral program has been funded specifically to strengthen integration across sectors contributing to food and nutrition security, such as agriculture, health and WASH.⁴

Purpose of this research

As detailed above, previous work has highlighted links between WASH and nutrition, and explored how WASH can contribute to improved nutrition. The purpose of this research is to support future efforts to integrate WASH and nutrition in Cambodia by considering what barriers currently exist to integration, and identifying opportunities to address or overcome these barriers. This report is intended to consolidate the opinions of stakeholders currently working in areas related to WASH and/or nutrition, in order to provide a basis for future discussions about integration in Cambodia.

CARD is planning to hold a high-level conference to discuss and highlight the links between WASH and nutrition and advocate for more integrated actions. This conference will build on the first National Nutrition Conference held in March 2015. As a critical input to the workshop, CARD plans to hold a briefing on the current barriers to integrated WASH and nutrition interventions, and the potential solutions to these barriers. The initial application of this report is to inform WASH and nutrition integration discussions at the CARD national workshop.

¹ *NOURISH* is an integrated nutrition, sanitation and hygiene program to be implemented 2014-2019.

² *Emergency Food Assistance Project-Additional Financing*, integrated sanitation, hygiene and food security program implemented 2013-2015.

³ *Helping Address Rural Vulnerabilities and Ecosystem Stability*, integrated food security and climate change program implemented 2011-2015.

⁴ *Multisectoral Food and Nutrition Security Project (MUSEFO)* to be implemented 2015-2017.

METHODOLOGY

Study aim and objectives

The aim of this research is:

To identify the current barriers to WASH and nutrition integration in Cambodia and the potential solutions to these barriers and to highlight current good practice towards integration of other multi-sectoral approaches.

By pursuing this aim, the study draws out findings regarding how WASH and nutrition could, and should, be integrated in Cambodia.

The study aim was addressed through the following research objectives:

1. To identify linkages between WASH and nutrition, common barriers to integration, opportunities for integration and good practice in integration, as reported in the existing literature on WASH-nutrition integration and nutrition-relevant programming from Cambodia as well as other low- and middle-income country settings;
2. To compare barriers to WASH-nutrition integration experienced in Cambodia against barriers reported in the literature on WASH-nutrition integration and nutrition-relevant programming from Cambodia as well as other low- and middle-income country settings;
3. To map opportunities for WASH-nutrition integration identified in Cambodia against opportunities reported in the literature on WASH-nutrition integration and nutrition-relevant programming from Cambodia as well as other low- and middle-income country settings; and
4. To explore variation in barriers and opportunities for WASH-nutrition integration in Cambodia, at national and sub-national level, and to understand underlying reasons for variation.

Research objective 1 was addressed through Phase 1 (literature review). Research objectives 2–4 were addressed through Phase 2 (primary research).

Analysis of primary data was expedited by using findings from the literature as an interim analytical framework (provided in this report as Annex 1).



Study design

The study used a phased approach to research.

The first phase, a desk-based literature review, informed the second phase of primary qualitative research, through (a) data collection tools used to guide interviews with participants, and (b) the interim analytical framework used to guide analysis of participants' responses.

This design accounts for the complexity and diversity of participants' experiences, and allowed unexpected and inconsistent findings to be identified and included in an emerging understanding of current barriers to WASH-nutrition integration in Cambodia, and potential solutions to these barriers.

Limitations of study design

1. Interpretation: Findings from primary research were used to test and, where appropriate, extend or challenge the interim analytical framework developed through the literature review. Nevertheless, it is recognised that the existing literature has influenced the findings that emerged from primary qualitative research.
2. Generalisation: As a qualitative study with purposive rather than population-based sampling, findings reflect participants' individual experiences and are not generalisable to Cambodia or internationally. Instead, findings provide deep insight into the barriers experienced, and opportunities perceived, by a group of people who are uniquely positioned to understand WASH-nutrition integration in Cambodia.

Phase 1: literature review

Phase 1 comprised a review of existing literature, including peer-reviewed publications, program documents and grey literature, designed to inform primary data collection.

The literature review was conducted in two parts, with each part serving a different function.

First, the literature review informed the *a priori* analytical framework for WASH-nutrition linkages, and barriers and opportunities for WASH-nutrition integration, that was used to guide interpretation of findings from primary research. A desk-based literature review was conducted to identify existing evidence for WASH-nutrition linkages, and established barriers and opportunities for WASH-nutrition integration. The search aimed to identify existing syntheses of the evidence and available case studies. The literature search included systematic reviews, primary studies and grey literature, and was conducted using databases relevant to WASH and nutrition (including PubMed, Scopus and MEDLINE). Targeted searches were also conducted using Google Scholar for case studies and lessons learned from programs that have integrated WASH and nutrition, as well as programs that have integrated either WASH or nutrition with other sectors (e.g. nutrition and food security, and WASH and neglected tropical diseases). The *a priori* analytical framework is included in this report as Annex 1.

Second, the literature review was used to assist in identifying specific WASH and nutrition programs in rural Cambodia that could be further explored through primary research.

Phase 2: primary research

Primary data collection was completed using semi-structured in-depth interviews with key informants.

Research was conducted at the national level, at the provincial level in two provinces (Kampong Cham and Pursat), and at the district level in one district (a NOURISH project district in Pursat). Final selection of the two provinces and one district for research was conducted in consultation with the Sub-working Group on WASH and Nutrition.

This approach to selection of study sites was selected to achieve balance between three research priorities:

1. Achieve sufficient depth and richness in research findings, by collecting data from multiple stakeholders at each study site;
2. Understand context-specific interactions between stakeholders, by collecting data from several different study sites; and
3. Explore differences between implementation approaches at national and sub-national level, by collecting data from national, provincial and district-level stakeholders.

Interviews were not conducted at the community level. While it was recognised that conducting interviews at community level would provide valuable insights into how WASH-nutrition integration is perceived and experienced within community-level implementation efforts, several interviews at community level would be required in order to ensure sufficient depth and richness of findings, and this would come at the expense of depth and richness of findings at national, provincial and/or district level. Consequently, interviews were conducted at three levels only.

Key informants were purposively selected in consultation with the Sub-working Group on WASH and Nutrition. Key informants comprised WASH and nutrition stakeholders at the national, provincial and district level. Key informants were selected to include representatives from relevant Ministries, development partners, and programs or projects in the WASH and nutrition sectors.

The organisations from which key informants were recruited are outlined in Table 1 below. Interviews were conducted with forty individual key informants from these organisations.

Table 1 Sampling scheme

Location	Phnom Penh	Kampong Cham	Pursat
Government	<ul style="list-style-type: none"> Ministry of Health Ministry of Planning Ministry of Rural Development 	<ul style="list-style-type: none"> Provincial Department of Rural Development Provincial Health Department 	<ul style="list-style-type: none"> Provincial Department of Rural Development Provincial Health Department <p>In a single district within a NOURISH project area:</p> <ul style="list-style-type: none"> Commune Council District Agriculture Office District Government District WASH Office Commune Women and Children Consultative Committee
Coordination bodies or mechanisms	<ul style="list-style-type: none"> CARD Helen Keller International (SUN Civil Society Network lead) Sub-working Group on WASH and Nutrition WSSCC 		
Development partners	<ul style="list-style-type: none"> GiZ Plan International Cambodia Save the Children SNV Sovann Phoum UNICEF WaterAid WHO WSP 	<ul style="list-style-type: none"> NAS 	<ul style="list-style-type: none"> Reproductive and Child Health Alliance

Interviews were conducted in person by the lead consultant, with the assistance of an interpreter at subnational level or where requested in advance by the key informant. Eligible participants were requested to provide their informed consent verbally to the lead consultant before commencing the interview. Interviews were recorded using a digital recorder and the lead consultant took written notes during the interview.

The interview guide consists of a series of open-ended questions, covering the domains and themes that emerged as significant through the literature review as well as providing opportunities for participants to raise additional insights based on their own experiences. The interview guide draws on tools previously used successfully by Teague and colleagues in an earlier study of barriers to WASH-nutrition integration and potential solutions at a global level.²¹ The interview guide is included in this report as Annex 4.

Each key informant was assigned a randomly generated unique identifier. This unique identifier is only known to the lead consultant and all other identifying information has been de-linked from participant data.

Interviews were recorded using a digital recorder, but have not been transcribed. Additionally the lead consultant took interview notes during each interview. Digital recordings, interview notes and signed informed consent sheets are kept in a secure location accessible only to the lead consultant and will be destroyed following acceptance of the final report by Plan International Cambodia.

Qualitative content analysis of each interview was conducted. The content of each interview was mapped against the *a priori* analytical framework for barriers and opportunities for WASH-nutrition integration, which was developed based on the literature review conducted in Phase 1 and is included in this report as Annex 1. Counter-findings and unexpected findings were also recorded. As anticipated, the analytical framework was refined and modified in response to findings that emerged from primary data, including unexpected findings. Once all interviews were conducted and mapped against the analytical framework, and necessary modifications were made to the analytical framework to ensure it adequately captured findings, emergent themes and sub-themes were identified.

Summaries of these themes and sub-themes are presented in the Findings section of this report, together with summaries of the current critical barriers to WASH-nutrition integration in Cambodia. Practical conclusions about opportunities to address or overcome these barriers, which have been derived from these Findings, are presented as Recommendations in this report.

In August 2016, a Consultative Workshop was conducted to review the draft findings and recommendations with key stakeholders. Following stakeholders' review of the draft findings, additional nuance or detail has been added to explain the findings as necessary. Importantly, since not all stakeholders who had been interviewed during the study were able to attend the workshop, no findings were changed or removed following stakeholders' review.

Additionally, as part of this Consultative Workshop, a ranking exercise was conducted to prioritise key recommendations and develop action plans for the top priority recommendations. The results of this ranking exercise, and the action plans, are presented in the Recommendations section of this report. The workshop terms of reference and attendance list are included as Annexes 5 and 6 in this report.

KEY FINDINGS

Knowledge and Learning

Stakeholders reported that knowledge about WASH and nutrition integration is growing in Cambodia, in response to emerging global and local evidence. Several stakeholders mentioned the 2014 secondary analysis of data from the Cambodia Demographic and Health Survey, conducted by the Water and Sanitation Program of the World Bank (WSP) as an influential study that had increased awareness of the link between sanitation and stunting and increased openness to global evidence about WASH-nutrition linkages among government and civil society.

The 2015 National Nutrition Conference was also mentioned as an event that had increased local knowledge of WASH-nutrition linkages. Stakeholders generally agreed that global evidence about WASH and nutrition is now discussed more than it had been previously, and some suggested that this was a response to the acceptability of the WSP analysis of Cambodian data. Additionally, stakeholders commented that evidence facilitates the initiation of discussions about WASH-nutrition integration with policymakers, and many stakeholders wanted to have more global and local evidence available to support advocacy. Evidence has been used to effectively support advocacy for closer collaboration between WASH and nutrition, and many stakeholders wanted additional, quality evidence in order to support future advocacy efforts.

There was a perception, reported by several stakeholders, that if many high-level figures, across multiple sectors, have a broad understanding of the rationale for WASH-nutrition integration then this will provide a sound basis for developing a robust shared understanding of how WASH and nutrition could be integrated. Several stakeholders also commented that when policymakers understand the rationale for WASH and nutrition integration then they will be motivated to change current practice. However, this perspective was not consistently substantiated by informants responsible for developing and implementing government policy, many of whom raised concerns around implementation challenges.

This indicates that policymakers' understanding of the evidence for WASH and nutrition integration enables integration, but would be insufficient to support improved integration due to substantial implementation challenges.

When considering potential implementation challenges, several stakeholders noted that strong local evidence would support concrete discussions about what WASH-nutrition integration could look like, and would also support advocacy to policymakers and other stakeholders, particularly at subnational level, about what specifically could be done differently.

Stakeholders reported that emerging global evidence about WASH and nutrition integration, for example new evidence for the link between environmental enteric dysfunction and child stunting, is “trickling down” (KII39)

to people responsible for designing and implementing policy and programs, at national and subnational level. Some stakeholders reported that people working with local affiliates of international non-government organisations are particularly exposed to global evidence through guidance from global headquarters. Critically, however, many stakeholders commented that this evidence is not always fully understood, and that in some cases a person's acceptance of WASH-nutrition linkages may be due to their perception that they should accept this, rather than due to understanding the evidence – a “bandwagon” effect (KII40). Stakeholders noted that sometimes a person's assumed level of knowledge regarding the specifics of WASH and nutrition linkages is greater than their actual level of knowledge, including among high-level personnel. One stakeholder commented that it is often simply assumed that integration is good, without a clear rationale for why and how integration is useful. Additionally, interviews with stakeholders demonstrated that knowledge gaps remain; for example, several stakeholders explained that nutrition does not relate to water supply, although this opinion is not supported by current evidence. Stakeholders also noted that, even where certain individuals understand WASH and nutrition linkages, in large organisations this knowledge is unlikely to be institutionalised or diffused throughout the majority of staff members. This may not be the case in smaller organisations, as illustrated by an informant from a small non-government organisation (NGO), who was in a leadership position and had an in-depth understanding of current global evidence for WASH and nutrition linkages. This leader appeared to have influenced their staff members and programs in order to institutionalise an understanding of how WASH and nutrition are linked.

In addition to global evidence “trickling down”, stakeholders reported that knowledge about WASH and nutrition linkages can be learned from the bottom up, by reviewing lessons learned from community-level programs. Some stakeholders at district and commune level, as well as stakeholders with responsibility for community programs, noted that they perceived the rationale for WASH and nutrition integration based on their perception that holistic programs are more effective in achieving outcomes for families and communities. For example, one stakeholder noted that a program to teach families about home gardens had not achieved the hoped-for nutrition outcomes due to the fact that families did not have reliable access to water. Several stakeholders – including national government personnel and people from NGOs – commented that NGO staff may find it easier to appreciate the rationale for holistic, cross-sectoral programming compared with government staff, since NGOs tend to work across multiple sectors while government staff have sector-specific responsibilities.

Several stakeholders identified a need for additional guidance to address knowledge gaps. Many stakeholders identified a pressing need for clear technical guidance on specific synergies between WASH and nutrition in order to support integration efforts. For example, more than one stakeholder suggested that a manual or matrix that outlines areas of overlap would be very useful to guide policy and programming. Stakeholders also noted a need for clear guidance on how to operationalise integration, for example guidance on effective mechanisms for collaboration, reporting lines, meeting plans, etc. In particular, stakeholders from subnational government bodies – both local

governments and line agencies – commented that they required technical guidance from the national level on how to operationalise integration. Some stakeholders identified a need to learn about how to explain or advocate for integration.

Stakeholders also provided some concrete suggestions for opportunities to address perceived knowledge gaps. One stakeholder had completed a formal training course, ‘Food Security and Nutrition’, provided online by the Centres for Disease Control and Prevention (CDC). More than one stakeholder suggested that special research could be conducted on pilot projects in Cambodia to develop local lessons about what works to integrate WASH and nutrition, and the relative contribution of WASH and nutrition outputs to improved outcomes.

Many stakeholders mentioned learning events, such as meetings, trainings, workshops and technical working groups, that can bring people together across sectors to discuss WASH and nutrition. These learning events provide a forum for sharing existing knowledge, disseminating new knowledge, and developing a better understanding of different sectors. Stakeholders commented that learning about WASH-nutrition linkages is difficult or impossible if someone is completely unfamiliar with evidence, current practice, or people from outside their own sector. Many stakeholders found these events to be helpful, and suggested that more cross-sectoral learning events should happen and would effectively support integration. Some stakeholders also suggested that these events could provide a forum for the development of new ideas or approaches to WASH-nutrition integration, and that this would inform a consensus around how to promote WASH-nutrition integration. However, many other stakeholders commented that learning events alone are insufficient to support WASH-nutrition integration. These stakeholders suggested that learning events should take place within a supportive institutional structure in order to have a tangible effect. For example, stakeholders suggested that learning events should be accompanied by a structure to guide decision-making, development of an action plan, and monitoring of progress against the action plan. Stakeholders noted that this kind of structure requires some funding, largely to support the time required. One stakeholder noted that this structure and institutional support would enable working group meetings to move from being a “discussion”, which can remain theoretical and potentially circular, to a more action-oriented “conversation” (KII04).

Stakeholders also reported that learning events can be very time-consuming, particularly when there are multiple learning events organised by different organisations – which some stakeholders expected would likely occur for WASH-nutrition integration since this topic cuts across more than one sector and thus involves a broad range of organisations.

Several stakeholders working at the national level suggested that technical working groups at the subnational level can be a site for innovation. However, this was not corroborated by stakeholders at the subnational level, who consistently reported that technical working groups provide a forum for implementing organisations to report against existing work-plans, and that discussion tends to focus on how to overcome problems encountered in pursuing these existing work-plans rather than focusing on potential new

approaches. In particular, stakeholders from line agencies at provincial and district level reported that decisions are made at the ministry level, and that this was incompatible with participants at subnational meetings generating ideas about how to work differently.

Some stakeholders reported that they work routinely with people from other sectors, for example where WASH and nutrition personnel are colleagues who share the same manager. These stakeholders generally commented that these routine working relationships had led to an improved understanding of how WASH and nutrition relate to each other. In contrast, stakeholders whose work with people from other sectors is only on a non-routine basis, for example attending project-funded trainings together, had varying opinions about whether this supported their learning about the other sector. Some of these stakeholders commented that the existence of any direct working relationship was helpful, since it potentially provided a basis for future conversations to deepen understanding of the other person's work responsibilities in another sector. Other stakeholders, however, reported that non-routine collaboration provided insufficient basis for future or ongoing discussions or learning about the other sector.

Based on these findings, there are three main **barriers** to integration relating to knowledge and learning:

1. Time required to learn about WASH and nutrition linkages, in the context of competing priorities.
2. Lack of deep understanding about WASH and nutrition linkages.
3. Limited follow-up on technical discussions about WASH and nutrition linkages.

Policy

Stakeholders reported that current policies relating to WASH and nutrition are siloed and fragmented. Both WASH and nutrition are the subject of multiple policies across several ministries, with limited overlap. Importantly, this level of siloing was not always perceived as negative. Some government stakeholders, from ministries as well as line agencies, commented that siloed policies correspond to the discrete allocation of responsibilities between ministries, and that the discrete allocation of responsibilities is essential for effective implementation through existing vertical implementation structures. This opinion was expressed very strongly by more than one ministry stakeholder.

Stakeholders noted that there are multiple policies that relate to WASH and/or nutrition. Many stakeholders commented that, due to the number of policies that already exist, it would not be helpful to develop any new policy specifically relating to WASH-nutrition integration. Some stakeholders noted that existing policies would already capture any initiatives to improve WASH and nutrition integration. More than one stakeholder commented that it is difficult to stay on top of the policies and implementation structures that already exist, and that any new policy would further complicate the operating environment – that there is already “too much policy, too much strategy” (KII11). As an alternative to developing a new policy specifically relating to WASH-nutrition integration, one stakeholder mentioned the possibility of developing an overarching strategy for WASH-nutrition integration, which could then be used as a basis for mapping how existing policies and mandates contribute to this strategy. There are already strategies that draw together policies across multiple sectors, such as the National Strategy for Food Security and Nutrition 2014-2018 and the National Action Plan for the Zero Hunger Challenge in Cambodia. This approach would align with other stakeholders’ comments that it is more sustainable to use existing implementation structures and policies to guide WASH-nutrition integration, rather than developing new structures.

Stakeholders agreed that a supportive policy environment promotes effective, sustainable action to integrate WASH and nutrition. In particular, both national and subnational stakeholders, from both government and NGOs, noted that supportive policy or guidance is required to achieve effective coordination between line agencies at subnational level. Stakeholders also commented that policies provide guidance by mandating responsibilities between sectors and levels of government, which many government personnel reported is integral to action, particularly for cross-sectoral topics such as WASH-nutrition integration that do not fall neatly within the purview of a single ministry or department. Stakeholders from both government and NGOs reported that policies provide a clear basis for alignment by development partners.

However, a small number of stakeholders – most of whom were working at the national level in civil society organisations – commented that since implementation of a cross-sectoral program can happen more quickly than development of a cross-sectoral policy framework or guidance, the focus for

WASH-nutrition integration efforts should be to trial integration strategies through program implementation and then use lessons learned to feed into policy. This perspective was not supported by stakeholders working at the subnational level, including subnational government personnel as well as stakeholders from smaller NGOs, who generally suggested that ministries provide guidance to line agencies. Overall, the opinion of most stakeholders was that priority should be given to developing a policy framework – or guidance on the interpretation of existing policies – that is supportive of WASH-nutrition integration.

While stakeholders noted that policy is an integral part of the enabling environment for WASH-nutrition integration, some stakeholders also commented that policy alone is insufficient to cause change. One stakeholder noted that a policy cannot be operationalised without an action plan, yet not all policies include action plans. Many stakeholders noted that policies are underfunded, particularly the components of policy that relate to nutrition. Stakeholders also commented on the challenge of implementing policies relating to topics that cut across sectors, such as WASH-nutrition integration, and noted that supportive institutional arrangements are required, at both national and subnational level, to promote coordination between multiple implementing structures responsible for various policies that relate to WASH and/or nutrition.

Based on these findings, there are three main **barriers** to integration relating to the policy environment:

1. Time required to work across siloed policies and implementation structures.
2. Development partners replicate silos when aligning with government policy.
3. Doing work outside mandated sector-specific responsibilities is seen as a problem.

Leadership

Several stakeholders commented that effective collaboration requires clear leadership, even where collaboration is conducted among organisations or individuals of equal standing. One stakeholder described how they take the initiative to identify opportunities for closer collaboration between WASH and nutrition, and attempt to mobilise relevant actors to participate in collaboration. This stakeholder was very clear that this collaboration did not happen naturally, and would likely not be sustained without encouragement. More than one stakeholder also noted that, given the number of different actors whose work relates to WASH-nutrition integration, clear leadership is required to assign responsibilities and avoid each actor assuming that certain responsibilities should sit with others. One stakeholder commented that “very strong, active” leadership is required within coordination mechanisms, such as CARD or the Sub-working Group for WASH and Nutrition, to ensure that collaboration moves beyond theoretical discussions; for example, an active leader could assign tasks and monitor progress to ensure that effective action is taken (KII04). Other stakeholders also commented on the role of leaders in holding collaborators to account for achieving agreed objectives and outcomes in accordance with a pre-defined schedule. Stakeholders mentioned some examples of coordination mechanisms with defined leadership roles and responsibilities, such as the Scaling Up Nutrition (SUN) model and project-specific steering committees.

No stakeholder suggested that a new organisation should be created to promote WASH and nutrition integration. Instead, stakeholders suggested that leadership should come from within existing institutions. Stakeholders had varying opinions about which institution or institutions should be responsible for leading integration efforts. Some stakeholders proposed a single ministry, while others proposed a cross-ministerial coordination body such as CARD. Several stakeholders commented that it did not matter which body was responsible for leading, but that it was essential that one organisation lead efforts to discuss or promote integration. Several stakeholders also noted that leadership responsibilities should be institutionalised, rather than driven by individual interest or capacity, because they perceived that mandated responsibilities are more sustainable. Most stakeholders agreed that CARD is an appropriate leadership agency. While some stakeholders raised concerns about the feasibility of CARD being tasked with coordination responsibilities without also having implementation responsibilities, other stakeholders suggested that this arrangement could work well so long as there is buy-in to CARD’s leadership role from ministries that do have implementation responsibilities. One stakeholder suggested that all relevant ministries could contribute funding to a nominated lead coordination body, such as CARD or the Sub-working Group for WASH and Nutrition. Importantly, several government stakeholders – across different sectors and levels of government – suggested that their own agency should lead integration efforts. This illustrates the potential for leadership

discussions to become complicated; as one stakeholder said, “who integrates to who?” (KII23).

Government stakeholders consistently reported that, in order to support effective integration across sectors, roles and responsibilities need to be allocated clearly across sectors so that it is clear which organisation is responsible for leading on any specific component of WASH and nutrition. Many stakeholders were concerned about the lack of clarity, and desired clear guidance, for example in the form of regulations issued by each ministry. Stakeholders at both national and subnational levels recommended that the allocation of roles and responsibilities be decided between ministries at the national level and communicated to line agencies through existing vertical channels.

Some stakeholders described how leaders have previously taken innovative approaches to work across sectoral silos. For example, one stakeholder recounted how a “smart” program manager had pursued several sector-specific funding opportunities, and then combined the resulting sector-specific funded projects into a cross-sectoral program (KII06). Another stakeholder described how they proactively promote integration opportunities to actors from multiple sectors (KII23). However, stakeholders also described that siloed institutions have correspondingly siloed arrangements for funding allocation, meaning that there is limited funding available to support leaders’ work across different sectors. This was noted as an important disincentive for leaders to work across sectors. Some stakeholders commented that it is preferable to focus on institutional arrangements that can connect silos, rather than focusing on how individual leaders can overcome silos.

Many stakeholders noted that high-level leadership is necessary to foster buy-in to integration efforts. Several stakeholders commented on the importance of seniority and hierarchy in Cambodian government and civil society institutions. Stakeholders noted that this could have both positive and negative effects for integration: on the one hand, the support of high-level leaders is required in order to get traction; on the other hand, people will follow high-level guidance. Consequently, stakeholders commented that high-level leadership in support of WASH-nutrition integration is an important facilitator for integration efforts. Many stakeholders noted that line agencies will follow the direction of ministries, which was corroborated by stakeholders from within line agencies who reported strongly that they want specific ministry guidance on whether and how to pursue integration. Conversely, stakeholders noted that if senior government leaders do not support collaboration across sectors, then different sectors will not work together.

While acknowledging the influence of high-level leadership, several stakeholders also noted that senior leaders are generally extremely busy. These stakeholders commented that while senior leaders can champion the cause of WASH-nutrition integration, it is not feasible for these individuals to personally manage follow-through actions or provide specific guidance on how integration can be operationalised. Two stakeholders from government and civil society separately suggested how high-level leaders could support integration at the abstract level: either a very senior central figure, such as the Prime

Minister or Secretary of State, or senior civil servants in relevant ministries, could issue a formal recommendation that all ministries work together.

No stakeholder suggested that the government should not take the leading role in efforts to promote WASH and nutrition integration. At the same time, several stakeholders – most of whom work with large civil society organisations – commented that development partners can support innovation through piloting programs that take an integrated approach, and sharing lessons learned through these pilots with relevant government agencies. Yet, in general, stakeholders from development partners, particularly smaller NGOs, reported that designing and implementing programs that integrate WASH and nutrition would be easier if there was already national and subnational government support for integration. Some stakeholders, from both government and civil society, also commented that NGO activities at subnational level can crowd out local government activities and thereby preclude the development of strong local government leadership. Finally, one stakeholder commented that an innovative approach developed by a development partner could not be implemented at scale without government support, and therefore if government agencies are not open to hearing about integrated approaches then any innovation by development partners will have only a very limited effect.

Among national-level stakeholders, including both government and civil society stakeholders, there was some call for greater subnational leadership in efforts to integrate the implementation of WASH and nutrition activities. Stakeholders mentioned the current decentralisation and deconcentration agenda, and the fact that a single local government authority, such as the provincial government, has responsibility for all sectors, as reasons why subnational governments were positioned to lead efforts to integrate WASH and nutrition. However, this suggestion was not corroborated at the subnational level. Stakeholders from line agencies, at both province and district level, consistently reported that they wanted or needed leadership from ministry to guide their work. Stakeholders also reported that while provincial and district governments have some influence over line agencies, they nevertheless have limited capacity to make decisions about how WASH or nutrition activities should be implemented, due to vertical funding allocations, and are therefore not in a position to lead integration of these activities. One exception to this was reported, where a stakeholder described how a provincial governor had provided strong support to a cross-sectoral NGO-implemented project and this had encouraged provincial departments to work with the NGO and participate in the project.

Based on these findings, there are three main **barriers** to integration relating to leadership:

1. Unclear leadership roles and responsibilities relating to WASH-nutrition integration.
2. Lack of institutional support for leaders to innovate in order to integrate WASH and nutrition.
3. Over-estimation among national level stakeholders of capacity for or interest in leadership at subnational level.

Governance

Stakeholders reported that ministries and line agencies do not often work together, and that it is difficult to bridge the gaps between ministries. Stakeholders did not perceive that there are currently effective mechanisms to support ongoing cross-sectoral work governed by multiple ministries or line agencies. Where stakeholders did describe examples of cross-sectoral work governed by multiple ministries or line agencies, these were all either project-driven or responsive. For example, several stakeholders mentioned the current NOURISH program. One stakeholder identified maternal death audits, conducted in response to cases of maternal mortality, as an example of work that is conducted by multiple line agencies in collaboration. Another stakeholder from a provincial health department recalled collaboration between provincial departments in response to specific initiatives – they recalled that the health department had worked with the agriculture department in response to bird flu, as well as with the environment department in response to a cholera outbreak, and also with the education department in response to recurrent school vaccination programs – but could not recall a long-term project or program that involved collaboration between provincial departments. One stakeholder commented that while different ministries involved in a current cross-sectoral program were communicating, this did not feel “natural” and may not be sustainable (KII35).

Stakeholders reported that existing government vertical implementation structures are strong and well established. At the national level, many government stakeholders described their role as decision-making, and subnational line agencies’ role as implementation and monitoring. This was corroborated by government stakeholders at the subnational level, many of whom mentioned explicitly that they did not have a decision-making role.

Government stakeholders consistently commented that their current mandates are important and need to be implemented, and that this implementation can be done effectively through existing vertical governance arrangements. For example, one stakeholder commented on the imperative to achieve the national target for rural WASH coverage, which is part of their existing mandate. Both government and civil society stakeholders noted that there is sometimes insufficient funding for ministries and line agencies to implement their current mandates. In many cases, the implication of these comments was that existing vertical governance structures should be supported in order to support the achievement of existing mandates under challenging operating conditions.

Several stakeholders, most of who work at subnational level, described how provincial and district governments had limited decision-making authority due to vertical governance structures. Stakeholders explained that, due to vertical funding allocations made from ministries to line agencies, provincial and district governments have very limited authority to determine what activities are implemented.

One stakeholder from a provincial line agency provided the example of a program to build wells, where the provincial government had authority to approve adjustments to the planned location of wells, but any more substantive changes to the program required line ministry approval as well as provincial government approval.

Many stakeholders commented on the idea that provincial, district and commune levels of government could coordinate activities implemented in their local government area in order to support WASH-nutrition integration. On this issue, there was a substantial difference in perspective between national and subnational stakeholders. At the national level, many stakeholders described an expectation that subnational governments should coordinate activities in ways that support integration. The rationale provided for this was that the commune council, district government and provincial government sit outside sectoral silos and do not have a sector-specific mandate. There was some support for this opinion among subnational level stakeholders. Stakeholders at subnational level also reported that local governments have an important role in coordinating activities, for example by holding quarterly meetings with line agencies and implementing NGOs and reviewing progress reports; however, these stakeholders also described that the purpose of this coordination was to ensure activities are implemented to plan and to avoid duplication. However, stakeholders at subnational level described approaches to coordination that did not support local governments providing strategic guidance to program design or implementation, which would likely be required in order to coordinate activities in order to improve WASH and nutrition integration. For example, stakeholders described that district governments are responsible for developing action plans to meet existing priorities but are not responsible for defining priorities. Stakeholders also described how quarterly meetings were focused on progress against existing workplans approved at the ministry level, and how local government authorities' review of progress reports focused on how implementing agencies progress against these existing workplans rather than with reference to an overarching strategy developed by the local government. Some stakeholders at subnational level suggested that additional funding for province- or district-level planning would improve subnational government capacity to develop an overarching strategy and use this as a basis for coordinating local activities.

Stakeholders at national and subnational level also commented on the feasibility of using the technical working group mechanism to support cross-sectoral integration at subnational level. Several stakeholders suggested that an integrated technical working group at either provincial or district level, or both, including representatives from line agencies and chaired by a local governor, could support subnational coordination and integration across sectors. One civil society stakeholder at subnational level suggested that a provincial technical group should be created with the mandate to develop a master plan to guide all activities in the province. However, several stakeholders at subnational level reported that existing sector-specific provincial technical working groups did not function well, due to lack of availability of key personnel, limited commitment from one or more government agencies, and unclear guidelines on how provincial technical working groups

should function. It is therefore unclear whether a cross-sectoral provincial technical working group would function well.

An alternative governance structure suggested by many stakeholders to support cross-sectoral integration was to make use of a national level cross-sectoral coordination mechanism, such as CARD, to divide up responsibilities across vertical implementation structures. The proposal to have a national coordination mechanism that works at ministry level was supported by many stakeholders, at both national and subnational level. Stakeholders described how a national-level coordination mechanism could provide a forum to negotiate an overarching strategy for integration, and subsequently to agree on which ministries will take on which responsibilities under the guidance of the agreed strategy. One stakeholder identified this type of coordination mechanism as a priority to initiate integration efforts. Importantly, several stakeholders noted that there are multiple existing coordination mechanisms, led by different line ministries, and it is important to ensure that a single coordinating mechanism is the platform for WASH-nutrition coordination at the national level.

Many stakeholders agreed that CARD provides an effective cross-sectoral coordination mechanism. Stakeholders noted that multiple ministries are already linked with CARD, and that it is possible to advocate for additional ministries to join. At the same time, some government stakeholders at national level who do not currently participate in CARD were not certain of what CARD does and were not enthusiastic about linking with CARD due to the large number of existing working groups and coordination mechanisms that they already participate in. Several stakeholders also noted that the leadership taken by CARD regarding WASH-nutrition integration is predominantly driven by individual CARD members rather than being institutionalised. Yet, stakeholders who supported the role of CARD as a coordination mechanism for WASH and nutrition integration commented that while it is not perfect, it is good enough to support effective action: “for current situation we don’t have a choice, it’s the best” (KII08).

As mentioned above, many stakeholders commented that it is effective and sustainable to allocate discrete responsibilities to existing vertical, siloed, government agencies. As one government stakeholder commented, it is problematic to have more than one ministry responsible for the same implementation area because generally “they’re fighting [during] implementation” (KII36). Several civil society stakeholders described how, during a previous or current multi-sectoral project, their organisation has liaised separately with each ministry or line agency on specific activities that are relevant to that ministry or agency, thus following the same procedures for reporting as for a single-sector program. However, one civil society stakeholder commented that this can be more difficult, rather than easier, for implementation, and provided the example of a program that was reported on to multiple provincial departments; if one department was delayed, for example in providing an approval, or sending personnel to attend a training, then the entire program was delayed. In this way, separating a multi-sector program into discrete responsibilities for a number of line agencies increased risks for

program implementation and made implementation less effective rather than more effective.

Stakeholders also commented on the governance of civil society. Both government and civil society stakeholders agreed that development partners tend to align with government policies and strategies. However, more than one government stakeholder commented that development partners do not always liaise effectively with relevant government bodies, and these stakeholders identified the consequent lack of communication around alignment as a significant operational challenge. Conversely, one civil society stakeholder reported that it is difficult for their organisation to liaise with local governments because, from this stakeholder's perspective, local government authorities perceive NGOs to be "bothering them" due to the time and resources required for monitoring and review (KII14). These issues were not mentioned specifically with reference to cross-sectoral work, but are particularly pertinent to development partner activities that relate to the mandates of more than one ministry or line agency. Both government and civil society stakeholders commented that the administrative requirements for government oversight of development partners' cross-sectoral programs are higher than for single-sector programs.

Based on these findings, there are three main **barriers** to integration relating to governance:

1. Lack of communication between ministries or line agencies.
2. Expectation that subnational governments will develop innovative approaches to integration, although subnational governments have limited capacity to innovate in the context of existing vertical structures.
3. Co-existence of multiple potential coordination mechanisms for WASH-nutrition integration.

Financing

Stakeholders consistently reported that public and donor funding is limited in Cambodia. Stakeholders reported that existing policies and strategies are underfunded. Several stakeholders also mentioned that public funding for nutrition and WASH is particularly limited because these topics cut across several ministries, and because – for nutrition in particular – improved outcomes can be perceived as less tangible compared with, for example, physical infrastructure or school enrolments. One stakeholder described the results of a costing activity conducted by the Ministry of Health: to implement nutrition activities included in existing health sector policies or strategies over the period 2014–2020 would require USD45 million, however only USD11 million has been allocated. Many stakeholders reported that additional funding is required urgently for nutrition and rural WASH, and several stakeholders suggested that this funding should be mobilised from donors as well as the Ministry of Economy and Finance (MEF). However, more than one stakeholder – including people from government as well as civil society – noted that since Cambodia is approaching middle-income status, it may not be sustainable to secure donor funding to address long-term gaps in core funding.

Stakeholders' comments about the scarcity of funds for work relating to WASH and nutrition illustrated how funding constraints can drive government agencies to focus on their core mandate, and civil society organisations to focus on the essential activities that they have been funded to do. For example, one national government stakeholder commented that they were unwilling to take on responsibilities outside their mandate at the same time as raising concerns about funding for activities under this mandate. A civil society stakeholder described a previous project implemented by their organisation that had been funded as a single-sector project but had included complementary activities from additional sectors; funding cuts during implementation led to these additional activities being cut back in many implementation areas.

In the context of scarce funding, stakeholders reported concerns that WASH-nutrition integration will increase competition for funds by encouraging nutrition-focused actors to seek funds previously reserved for WASH, and vice versa. Many stakeholders were concerned that integration would lead to increased competition for both WASH and nutrition funding sources. One stakeholder commented that a key motivating factor for organisations to participate in integrated activities is the “expect[ation] that integration can provide opportunities” to increase access to funds through diversifying the organisation’s funding base (KII09). Another stakeholder commented, when discussing the value of evidence about WASH-nutrition linkages, that they would like to use evidence for how the WASH sector contributes to broader outcomes in order to assist in mobilising resources from a broader range of funding sources. Importantly, not all stakeholders were concerned that integration would lead to increased competition for funds. Indeed, one

stakeholder focused on how a diversified funding base would make it easier for an organisation to access funds.

However, stakeholders reported, or illustrated through their comments, that concern about increased competition for funding leads to territorialism about sectoral mandates and discourages participation in cross-sectoral work. One government stakeholder described a past case of integration, where some funding was removed from one government department in response to a reallocation of responsibilities, and as a result some people lost their jobs. Fear of losing funding, and job security, provides an important disincentive to support integration. Among development partners, stakeholders commented that the competition for funding reduces incentives for NGOs to collaborate, including cross-sectoral collaboration that would support integration. One stakeholder reported their experience in communication between CARD and ministries: ministries were only happy to communicate and cooperate with CARD to develop a cross-sectoral action plan once it was clear that no funding would be reallocated from any ministry to CARD.

Stakeholders commented that funding is generally siloed within sectors. Line agencies receive vertical funding allocations from ministries to conduct sector-specific work. Many donors fund NGO activities through sector-specific funding initiatives, meaning that these funds are earmarked for sector-specific activities and cannot support integrated work. A government stakeholder identified siloed funding as the major challenge to integration, and commented that if funding were allocated to do integrated work then that is the type of work that local government authorities would implement. Both government and civil society stakeholders also commented that funds were allocated for specific projects, or against defined workplans, meaning that there was no untied funding available to support integrated or cross-sectoral work. One stakeholder suggested that integration efforts would be better supported by funding that was provided against outcomes, such as stunting, rather than outputs, such as water supply infrastructure or community trainings, because funding provided for outcomes could be allocated to activities from a range of sectors that contribute to these outcomes.

Conversely, stakeholders commented that merged funding makes it easier to do integrated work. The NOURISH program was mentioned by several stakeholders as an example of merged funding. Stakeholders reported that funding for NOURISH is sourced from two discrete sector-specific initiatives, and combined by the donor under a single funding mechanism with a single contract. This example of merged funding corroborates a point made by several stakeholders: that merged funding is something that can best be done by donors, and should therefore be donors' responsibility. Multiple stakeholders from civil society organisations reported that their NGOs are responsible to the donors that fund their work, and therefore integrated work can be best supported by an integrated source of funding. One stakeholder commented that they believe "the penny's dropped" for many donors about the benefits of cross-sectoral or integrated work, and therefore this stakeholder expects to see more integrated funding available in the future (KII39). At the Consultative Workshop, however, some stakeholders commented that even if merged funding were available, it would still be challenging to do integrated work because any

program funded through merged funding would need to be implemented in alignment with vertical government implementation structures, which are specific to one sector. This indicates that merged funding enables integrated work, but is not sufficient by itself to promote WASH and nutrition integration.

Many stakeholders identified costs associated with pursuing integration, and noted that these costs are generally unfunded since funds tend to be allocated within sector-specific silos. More than one stakeholder nominated the cost of pursuing integration as a major barrier to integration efforts. The two types of cost most frequently identified by stakeholders were: time to attend meetings, liaise with representatives from other sectors, and coordinate across sectors; and costs associated with training and capacity building to learn about other sectors or WASH-nutrition linkages. One stakeholder commented that to participate in coordination mechanisms for both WASH and nutrition required substantial time, transport, and other resources, literally “double everything” (KII39). Stakeholders identified that it is challenging or impossible to cover these costs when funding is allocated to sector-specific work, or to specific project or program activities that may not include the full costs associated with integration efforts, given that government agencies and development partners have very few funds that are not tied to specific projects. One stakeholder mentioned that, even under an integrated NGO program, their costs for participating in multiple multi-sector trainings, including per diems and transport, were not covered by the program. A subnational government stakeholder suggested that, to sustain an integrated approach, it would be helpful to increase the budget allocation for province- or district-level planning, which this stakeholder suggested could then provide some funding not tied to specific sectors or projects, which could therefore be used to support integration costs. Some stakeholders suggested that costing exercises could be used to mobilise additional public and donor funds, including funds for costs associated with integration. Finally, some stakeholders commented that integration has the potential to reduce costs by increasing the efficiency of implementation and leveraging benefits to two sectors from a single program. For example, one stakeholder noted that it is more efficient to include some additional messages relating to WASH in a behaviour change campaign focused on nutrition than it is to develop a parallel campaign to deliver WASH messages. This same stakeholder suggested that the potential for efficiency gains could make WASH-nutrition integration appealing in the context of funding scarcity.

Based on these findings, there are three main **barriers** to integration relating to financing:

1. Insufficient funding for core activities in WASH or nutrition.
2. Integration activities are unfunded.
3. Competition for funding, and perceived risk of future competition.

Personnel

Many stakeholders identified human resource capacity as an important constraint on efforts to integrate WASH and nutrition. Stakeholders commented that many personnel have limited knowledge or expertise relating to activities beyond their current sector-specific responsibilities. One government stakeholder who works in WASH commented that it is challenging to build consensus among people within the WASH sector whose current work responsibilities relate to rural construction about how the sector can support improved nutrition outcomes, because this stakeholder perceives that people whose work is mainly focused on rural WASH infrastructure construction tend to focus on supply-side “hardware” rather than demand-side “software” (KII37). A civil society stakeholder commented that smaller NGOs funded to implement programs tend to have staff with the capacity to implement programs relating to one sector, but not multiple sectors; therefore if a single NGO is contracted to implement an integrated WASH-nutrition program then this will reveal capacity gaps among staff members.

Stakeholders also commented on other capacity gaps, noting that not all people working in nutrition have a nutrition background, and that some government staff – particularly people in management positions – have a background in management or administration, rather than a technical area related to their position. Stakeholders noted that these gaps in technical capacity make it more difficult for people to participate in discussions about the technical rationale for WASH and nutrition integration, or to identify potential areas of overlap or synergy between WASH and nutrition.

Stakeholders reported various opinions about the depth of technical expertise that is required to support WASH and nutrition integration. Some stakeholders commented that all personnel involved in WASH and/or nutrition work should understand the importance of WASH-nutrition integration, in order to provide an enabling environment for integration efforts. One civil society stakeholder proposed that personnel involved in program design must be able to “see the whole picture” of how each sector contributes to the outcomes addressed through a program (KII24), while another stakeholder commented that all people involved in a cross-sectoral program should understand, in detail, all aspects of the program across each sector. Yet many stakeholders commented on the difficulty of balancing depth and breadth of technical expertise. For example, one government stakeholder noted that any individual responsible for an integrated program would likely have deep expertise in only one narrow technical area. A civil society stakeholder noted that it is “overwhelming” for a single person to be responsible for multiple technical areas (KII02). One stakeholder who had participated in trainings designed to build their technical capacity outside their existing sector commented that, even while attending the training, they had focused mainly on how training content related to their own sector. In response to the issue of balancing depth with breadth, several stakeholders suggested creating multi-sectoral teams of people who have deep

technical expertise in complementary areas. Some civil society stakeholders reported that their organisations had deliberately recruited one or more staff members with complementary technical expertise from another sector, or that their organisations planned to do this in the future, in order to build a multi-sectoral team within the organisation. In contrast, one government stakeholder commented strongly that their department did not require any new personnel to build capacity.

Stakeholders also commented on how working relationships can influence integration of WASH and nutrition. Several stakeholders commented that direct working relationships between people from different sectors are an important support for cross-sectoral collaboration and potential integration. One stakeholder explained that if people know each other well then it is easy to work together, but if they do not know each other then it is not possible to contact each other or even begin to discuss how to work together. This was corroborated by a civil society stakeholder who described a previous cross-sectoral program that involved government representatives from six different agencies, and explained that this program had funded coordination meetings so that these representatives would “know each other” (KII24). More than one stakeholder noted that it is difficult for government staff from different ministries or line agencies to develop working relationships, to the extent that it is difficult to arrange a time to meet to discuss future coordination. In contrast, several stakeholders from civil society described sustained working relationships between WASH specialists and nutrition specialists within their organisations; in most cases, these working relationships were described as productive and sustainable, and stakeholders commented that this was due to an integrated organisational structure that included formal, direct working relationships between WASH and nutrition staff, for example where both WASH and nutrition technical specialists report to a health specialist.

Stakeholders commented on the effectiveness of champions in the Cambodian context. Many stakeholders perceived champions to be very valuable. Several stakeholders noted that, particularly given the influence of seniority and hierarchy in Cambodia, high-level champions are very effective at promoting change. Stakeholders who identified high-level champions mentioned that these people were respected and “inspiring” (KII04). One stakeholder noted that a current champion for WASH-nutrition integration has the capacity to encourage people who may be “cynical” about the feasibility of integration to overcome this cynicism and support integration efforts (KII12). Some stakeholders also commented that high-level champions have access to senior government circles and are therefore able to raise the issue of WASH-nutrition integration at high-level meetings. Stakeholders also noted that champions are individuals, and their interest in causes that they champion is, to an extent, personality-driven. One stakeholder commented that, although past champions have been effective at promoting change in Cambodia, potential government champions tend to prefer championing causes that have immediate, tangible returns – such as road construction or irrigation – rather than nutrition. Other stakeholders described how champions’ interest in WASH-nutrition integration is the result of individual decisions and experiences, and raised concerns about sustainability.

Several stakeholders suggested that focal points be appointed to support WASH-nutrition integration efforts. Some stakeholders commented that focal points should have deep technical expertise in their sectoral area, but do not need an equivalent level of technical expertise in additional areas in order to begin working as a focal point. Additionally, however, more than one stakeholder noted that a focal point would provide a consistent point of contact for discussions about WASH-nutrition integration, and that the person who was appointed to a focal point role would accumulate technical understanding of content outside their sectoral area through consistent participation in these cross-sectoral discussions. Some stakeholders specifically commented that focal points, which are institutionalised, would be a sustainable mechanism to support WASH-nutrition integration. This contrasts with the concerns stakeholders raised about the sustainability of champions.

Some stakeholders reflected on the fact that individual personnel focus on their allocated work responsibilities, and work within the routines that develop around those responsibilities. One stakeholder commented that it is difficult, if not impossible, for an individual to “break the rules” by acting out of their routine (KII05). Yet an individual’s training or previous work experience may provide them with expertise beyond what is required for their current routine. For example, one civil society stakeholder commented that staff members of their organisation tend to work on successive, diverse projects, and therefore often have skills and expertise beyond what is required for their current responsibilities; for example, this stakeholder noted that one of their staff members, the current coordinator of a mobile kitchen program, is a medical doctor and therefore has technical capacity relevant to nutrition that is not being utilised in this program.

Many stakeholders reported strong emotional responses to integration, or the prospect of integration. Most of the emotional responses mentioned were negative: territorialism, fear of losing something through integration, or fear of change. Some stakeholders reported concerns around “[w]ho integrates to who?” (KII23). For example, several stakeholders proposed that all components of WASH and nutrition should become the responsibility of their organisation. In addition, many stakeholders reported strong opinions that their existing sectoral activities should be their priority, particularly in the context of funding scarcity. One government stakeholder whose work related to nutrition was familiar with the evidence that poor sanitation compromises nutrition outcomes, but was unwilling to explicitly recognise the contribution of WASH to nutrition and instead preferred to focus on the contribution made by their existing work to nutrition outcomes. When asked whether their ministry might include some WASH activities in future work, this stakeholder responded “[a]ll partners who are interested in including [our mandated activities] into their programs, please contact [our ministry]” (KII28). More than one stakeholder also reported concerns that integration could lead to job insecurity, for example someone from another sector might “steal your job without telling you” (KII03). These negative emotional responses to the idea of integration can be expected to discourage people from supporting or participating in efforts to integrate WASH and nutrition. At the Consultative Workshop, some stakeholders were

surprised to learn that competition had been identified as a concern. This indicates that people who are feeling concerned or territorial about the prospect of integration may be unwilling to discuss this, which could make it more difficult to allay their concerns directly.

Other stakeholders described positive emotional responses to the concept of integration. Several stakeholders commented that they are very motivated to find new strategies to promote population health, particularly since the rate of child stunting has not yet substantially decreased, and are therefore open to WASH-nutrition integration as a plausibly effective new strategy. Several stakeholders also commented that they hoped more programs would be integrated in the future, because they perceive that integrated programs provide a more holistic response to an issue, and thus achieve better outcomes compared with a single-sector approach; one stakeholder noted that "none of this alone [no sectoral contribution alone] is enough to address the issue" (KII35). In contrast to territorial concerns, more than one stakeholder noted that they would be pleased if more programs were implemented that related to their existing mandate, because they believe that their mandate is important and should receive more attention. No sector stood out as more positive or negative about the prospect of integration; some stakeholders from each sector reported negative emotional responses, and some stakeholders from each sector reported positive emotional responses. However, stakeholders at national level tended to express emotional responses more than stakeholders at subnational level. Several stakeholders in subnational line agencies reported that they did not wish to express an opinion about the prospect of integration because their role is follow the direction of relevant ministries. Stakeholders commented that people's emotional responses to the prospect of integration – particularly, fear of change and openness to change – will influence the progress of integration efforts. One stakeholder noted that an enabling environment for WASH-nutrition integration is an environment where people believe that change can be positive.

Based on these findings, there are five main **barriers** to integration relating to personnel:

1. Many people have limited technical capacity beyond their sector of primary responsibility.
2. It is overwhelming for an individual to have deep technical knowledge across a broad range of content areas.
3. Negative emotional reactions to integration are a strong disincentive to integrate that is difficult to manage.
4. People tend to focus on their existing responsibilities and established routines.
5. Limited time availability of potential champions for WASH-nutrition integration.

Design

Stakeholders reported that, for programs implemented by civil society, program design is driven by the priorities of the donor. Many civil society stakeholders commented that NGOs need to respond to donors' requirements, and must follow donors' perspectives. One stakeholder commented that Cambodian organisations have no influence over donor priorities, and that action at the global level is therefore required to change how donors fund programs. As mentioned above, some stakeholders commented that donors should provide grants that integrate WASH and nutrition, as USAID has done by merging funding from two sector-specific funding initiatives to support the integrated NOURISH program, in order to promote integrated programming. More than one stakeholder noted that current interest in WASH-nutrition integration is likely to be influenced by increasing interest among donors in integrated or multi-sectoral programming. Another stakeholder, however, described how their organisation had identified a need for integrated programming when there was no funding opportunity for integrated work, and had subsequently submitted a proposal once funding for this kind of work became available.

While some stakeholders at national level suggested that smaller, implementing NGOs should propose design adjustments, this was not corroborated by other stakeholders. Generally, stakeholders reported that NGOs are responsible to the donor, or the lead grantee if the NGO is a subcontractor. One civil society stakeholder commented that, although implementing NGOs supervise and manage projects, they can have little sense of ownership over projects that they implement. Another civil society stakeholder recalled a previous program design that had gone "back and forth more than ten times" between the NGO and the donor, because the draft program design did not meet the donor's expectations about what the design would include (KII24). Stakeholders who work for implementing NGOs reported that proposals will not be successful unless they align precisely with what the donor or lead grantee wants to fund.

Stakeholders reported that designs are often focused primarily on outputs, rather than outcomes. Stakeholders commented that many subnational government programs are designed to deliver outputs that have been mandated at the national level. Stakeholders also explained that programs implemented by development partners can also be designed around outputs, particularly where programs are funded by donors who are focused on sector-specific outputs that are part of a global or regional strategy. One stakeholder commented that "some people [are] so narrow" by designing programs based on what outputs a single sector can contribute, rather than what contributions are required to achieve the best outcomes (KII11). Conversely, stakeholders commented that a focus on outcomes rather than outputs provides more flexibility and is better suited to a cross-sectoral approach. One stakeholder commented that multi-sectoral design happens naturally when people "[t]hink holistically" about stunting (KII05). Many stakeholders expected that integrated designs would be more effective in achieving improved outcomes compared

with single-sector designs, with one stakeholder commenting that this was “quite obvious” (KII11).

Stakeholders commented on the timing and scheduling of design. Several stakeholders noted that there is a time lag between when evidence emerges and when this evidence informs design. Stakeholders also commented that this time lag can be significantly extended when there are limited windows of opportunity for evidence to inform program design, such as the development of a new multi-year strategy. For example, one stakeholder noted that evidence for WASH and nutrition integration was not accessible when the current WASH national strategy was developed, and therefore this strategy does not include nutrition. Several stakeholders therefore commented that it was important to take advantage of the timing of program cycles and strategy development. Furthermore, multiple civil society stakeholders mentioned that programs were generally designed rapidly, due to the time pressures of funding opportunities, and that limited change is possible after proposals have been submitted. Government stakeholders also reported that there is very limited flexibility once designs have been approved by the relevant ministry; changes to the design require approval from ministry. At the Consultative Workshop, it was noted that it is possible for NGOs to negotiate changes to a program design after funding has been allocated, but that this depends on the relationship between the donor and the implementing partner, as well as the timeframe and the amount of funds involved. Following this discussion at the workshop, it was agreed that smaller implementing NGOs had relatively less power to negotiate a change to program design compared with larger development partners.

Stakeholders reported several suggestions to facilitate integrated design. Many stakeholders suggested that WASH and nutrition programs should be co-located, generally through targeting WASH programs to areas and groups where nutrition outcomes are poorest. Stakeholders recognised that co-location depends on funding availability, and more than one stakeholder suggested that ministries and donors should choose to fund WASH activities based on nutrition data, such as Ministry of Health data on child diarrhoea. Several stakeholders also suggested that behaviour change campaigns, commonly used to deliver either nutrition or WASH messages, could be used to deliver messages across both sectors. One stakeholder noted that nutrition and WASH messages had previously been added to a standard design for delivering early child care and development messages through parents’ groups. Additionally, one stakeholder suggested that supply-side WASH programs could be adjusted to become more responsive to specific nutritional needs among target beneficiaries, for example by emphasising how program components apply to children aged under two years, which is a time in the life cycle when children are particularly vulnerable to nutritional shocks. This stakeholder provided the example that WASH supply-side programs could include a special emphasis on water supply for under-2 children to ensure water quality is particularly high for these children. Another stakeholder suggested that supply-side WASH activities could be integrated into agriculture programs. Finally, more than one stakeholder commented that current practice in both WASH and nutrition programs is to coordinate with the private sector and use the market as a distribution mechanism for WASH- or nutrition-related commodities. These stakeholders suggested that an integrated

program could include one or more market-based mechanisms that respond to both WASH and nutrition needs.

Many stakeholders commented that an integrated theory of change or causal framework, describing how WASH and nutrition efforts can work together to promote improved outcomes and illustrating specific synergies between WASH and nutrition, would support integration efforts. One stakeholder explained that an integrated theory of change or causal framework would not only inform the design of programs that included both WASH and nutrition components, for example a behaviour change campaign that included both WASH and nutrition messages, but would also inform the design of programs that focus on delivery of a discrete sector-specific component, for example construction of an irrigation system, by illustrating how this work is complementary to efforts to improve nutrition. Several stakeholders mentioned the UNICEF-supported theory of change developed in 2016.³⁸ However, most of these stakeholders commented that this theory of change is focused on how to implement WASH and nutrition integration in Cambodia, rather than providing an outline of how WASH and nutrition interventions and outcomes relate to each other.

Based on these findings, there are four main **barriers** to integration relating to design:

1. Lack of awareness of current good practice in other sectors.
2. Limited funding opportunities for co-location.
3. Donor-driven design.
4. Time-lag in design, and limited windows of opportunity.

Implementation

Many stakeholders commented that efforts to promote WASH-nutrition integration could potentially remain at the level of discussion, without moving to implementation, and noted that it is necessary to focus on how to move from discussion to action. Both government and civil society stakeholders, mainly at national rather than subnational level, commented that discussions about WASH and nutrition integration to date have been focused on discussing the rationale for integration, and have remained “quite theoretical” (KII35). More than one stakeholder commented that, while a consensus is emerging about WASH-nutrition linkages at a theoretical level, these links are unclear at an operational level: “how to do [integration]” is still unresolved (KII09). Several stakeholders noted that if discussions continue without leading to action, then participants’ motivation will decrease and momentum will be lost. One government stakeholder explained that at the first meeting of a discussion group focused on WASH-nutrition integration, participants had been “enthusiastic” – but that without a clear plan, at subsequent meetings participants were less enthusiastic (KII11). Stakeholders suggested that meetings and discussions around WASH and nutrition integration should be supported by action plans, as well as a rigorous structure for taking minutes and following up on agreed action points, as a way to progress from in-principle agreement to operationalisation.

Stakeholders identified steering architecture as essential to support the effective implementation of integrated work. Several stakeholders noted that in the absence of cross-sectoral steering structures, steering architecture can be fragmented across siloed sectors, creating implementation challenges. One stakeholder described how staff from different provincial departments monitor different components of the implementation of a single program, for example the provincial health department monitors Village Health Support Groups’ (VHSGs’) implementation of health content while the provincial department of rural development monitors VHSGs’ implementation of WASH content, despite the fact that this content is being implemented in an integrated way by a single cadre. Another stakeholder noted that fragmented steering architecture increases the risk of implementation delays, since delays in approvals or inputs by any one steering body will likely delay implementation overall. In contrast, some stakeholders described successful examples of cross-sectoral steering architecture that had been set up to guide the implementation of integrated projects. For example, one stakeholder recalled that representatives from six provincial government departments and committees – the departments of agriculture, health, rural development and women’s affairs, as well as the provincial disaster management committee and the provincial project management unit – participated in a team that provided oversight to a multi-sectoral program. Yet, a civil society stakeholder responsible for implementing a multi-sectoral program commented that cross-sectoral steering architecture is extremely difficult to set up, in part due to communication delays and a lack of clarity about which representatives should be involved in discussions about cross-sectoral work. Several stakeholders also noted that cross-sectoral steering structures are more difficult to maintain compared with single-sector

structures. One civil society stakeholder explained that this is largely because sector-specific vertical funding allocations can support single-sector structures, in addition to any funding tied to the integrated project or program, while there is no comparable funding mechanism to support cross-sectoral structures.

Stakeholders commented on the idea that cross-sectoral integration could be achieved through coordinating the implementation of discrete sector-specific programs. Some stakeholders at the national level suggested that subnational governments, or local NGOs, should coordinate the implementation of multiple programs. For example, one civil society stakeholder working at the national level suggested that implementing NGOs could strategically source funding from a range of thematic areas and then implement this range of projects in an integrated way. A national-level government stakeholder suggested that provincial governors should “use their power” to coordinate line agencies and development partners working in their province, in order to guide the cross-sectoral integration of activities being implemented in their province (KII36). At the subnational level, some stakeholders corroborated this suggestion by providing examples of where this had been done successfully. For example, one civil society stakeholder described how an NGO deliberately sought additional funding from new sectors in order to implement complementary activities to better support the target beneficiaries of pre-existing sector-specific programs. Another stakeholder described how a district governor had successfully coordinated line agencies and development partners in their district to support community-led total sanitation (CLTS). Importantly, however, as described above (under ‘Governance’), stakeholders reported that subnational governments are not well supported to coordinate the implementation of activities across sectors. Additionally, the feasibility of coordinating the implementation of sector-specific activities is questionable since stakeholders reported that there is limited flexibility during implementation. Government stakeholders explained that line agencies’ workplans are approved and funded on an annual basis, and that any design changes or substantive variations to the workplan require ministry approval. Stakeholders also explained that NGOs have limited capacity to make design changes to funded programs, as discussed above (under ‘Design’). Additionally, more than one stakeholder commented that NGOs, particularly smaller NGOs, have little or no access to funds that are not tied to a project and therefore have insufficient financial capacity to develop a strategy linking different projects, or to absorb costs associated with coordinating discrete projects.

Stakeholders identified several implementation strategies and mechanisms that they perceived had been, or could be, successful in supporting WASH and nutrition integration. More than one civil society stakeholder mentioned that a single contract mechanism for a program that addresses multiple sectors would support NGOs to implement in an integrated way. A single contract mechanism can overcome sectoral silos within a single program. However, some stakeholders noted that having a single contract mechanism does not remove the requirement to engage in parallel reporting to multiple government ministries or line agencies. Several stakeholders also commented that using a single delivery strategy or cadre, such as home visits by VHSGs, parents’ groups, and school-based programs, to implement both WASH and nutrition

content had been an effective strategy for delivering integrated programs. In particular, one stakeholder noted that the implementation of WASH and nutrition could be integrated through a shared focus on household-level change. Finally, some stakeholders described arrangements where programs were integrated at the level of design, but implemented in a segmented way, and perceived these arrangements to have been successful. Stakeholders provided examples from a number of programs where one component, such as WASH or agriculture, was outsourced to a specialist agency with expertise in implementing in that technical area. Some stakeholders also commented that different delivery mechanisms are suited to different components of WASH and nutrition, and that an implementing organisation should only be responsible for the delivery of components that are suited to delivery mechanisms where the organisation has capacity. One stakeholder commented that the approach of designing, monitoring and steering programs together, while implementing program components separately, had been demonstrated to be successful in previous efforts to integrate sexual and reproductive health with HIV.

Stakeholders identified demand-side uptake of integrated programming as an essential implementation consideration. Several stakeholders, including both government and civil society stakeholders at national and subnational levels, commented that there are limitations what community members can take on board. One stakeholder reported that, if a program promoted a large number of diverse behaviours at one time, this would be “too much” for community members to take on board (KII39). Another stakeholder recommended that diverse messages, relating to more than one sector, should be communicated under a single “brand” to emphasise the internal coherence of the group of messages and deliver these messages in a way that is more easily understood at the community level (KII05). A stakeholder who worked at the community level suggested that different messages should be communicated through separate activities, in order to introduce sector-specific topics one by one and build up community members’ understanding incrementally. Conversely, more than one stakeholder commented that community members could potentially find it easier to take in an integrated suite of messages because these messages provide holistic guidance to how people and households should behave.

Based on these findings, there are three main **barriers** to integration relating to implementation:

1. Ongoing theoretical discussions about WASH-nutrition integration do not necessarily lead to action, potentially resulting in participant disengagement.
2. It is difficult to establish and maintain steering architecture across sectors.
3. Expectation that integration can be achieved through coordination of discrete projects during implementation, despite the fact that this is very challenging in practice.

Monitoring, Evaluation and Reporting

Stakeholders from both government and civil society commented that their organisations are held accountable to what they report on, and that reporting lines are siloed. For example, both government agencies and NGOs report on the outputs that they are funded to implement and the outcomes they are funded to achieve, and since funding is generally allocated within sector-specific silos, reporting is siloed also. More than one stakeholder also explained that cross-sectoral programs are reported on separately to sector-specific ministries and line agencies, meaning that these programs are generally held accountable to a series of discrete, sector-specific outputs. Stakeholders explained that these siloed reporting lines reinforced divisions between sectors and make it more difficult for implementing organisations to pursue an integrated approach. One stakeholder commented that, since reportable indicators and targets drive what activities are done, consideration should be given to what indicators, targets and other reporting requirements would incentivise organisations to adopt an integrated approach.

Many stakeholders commented on the challenge of attribution in evaluations of integrated work. Stakeholders explained that attribution is extremely difficult when there are complex causal chains with many contributing factors, as is the case for the contributions made by WASH – and many other sectors – to improved nutrition outcomes. Generally, stakeholders were unsure about what sections of these complex causal chains their organisations were responsible for monitoring. One WASH stakeholder did not know whether their organisation should measure nutrition outcomes or focus instead on measuring WASH outcomes that have an established causal link with nutrition outcomes. One nutrition stakeholder commented that nutrition programs should include direct WASH indicators, such as access to safe water, rather than proxy measures such as diarrhoea. However, another stakeholder commented that measuring direct WASH indicators provides incomplete information unless indicators from other sectors that contribute to nutrition outcomes, such as health service utilisation and agricultural productivity, are also measured. Stakeholders also noted that attribution is linked with accountability. Several stakeholders recognised that both WASH actors and

nutrition actors want to claim that their work has contributed to reductions in child stunting, and that it is difficult or impossible to determine the relative contributions made by each sector. One stakeholder commented that it is “quite dangerous” to attempt to attribute changes in nutrition outcomes to the contribution of a single sector (KII35). Many stakeholders recognised that existing monitoring and evaluation systems do not provide for accurate reporting on cross-sectoral outcomes. For example, a civil society stakeholder mentioned that donors expect implementing NGOs to report on longer-term outcomes, such as stunting, for single-sector projects, and noted that these narrowly focused reports did not provide a complete picture of how or why longer-term outcomes had changed. A government stakeholder with

responsibility for WASH noted that if their agency became responsible for improving nutrition outcomes, then substantial changes would be required to existing monitoring arrangements to be able to understand the effect on nutrition. Several stakeholders suggested that an integrated theory of change or causal framework for WASH and nutrition would support monitoring and evaluation by informing the development of a results framework that specifies how a project's specific outputs contribute to the broader theory of change or causal framework.

Stakeholders commented that monitoring and evaluation of WASH and nutrition programs provides an important opportunity to generate local evidence and draw out local lessons for what works in integrated programming. More than one stakeholder also commented that current programs that integrate WASH and nutrition will generate evidence for the relative effectiveness of integrated programs compared with non-integrated programs. Importantly, however, some stakeholders cautioned that generating evidence for the effects attributable to specific WASH and nutrition outputs requires time and resources that are not available for routine monitoring and evaluation activities. One stakeholder suggested that a dedicated research study could be conducted to measure a very broad range of outputs and outcomes, including WASH, nutrition, and other sectors that contribute to nutrition outcomes, in order to isolate the contribution of each sector to nutrition outcomes. At the Consultative Workshop, it was suggested that generating evidence of change in nutrition outcomes that is attributable to WASH or nutrition is too burdensome for regular monitoring – but that it is crucial to generate this evidence, and therefore special studies are required.



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Stakeholders commented that joint monitoring would support WASH-nutrition integration. One stakeholder suggested that a coordination body, such as CARD, could build consensus between ministries as well as development partners around a set of joint monitoring indicators relating to WASH and nutrition. Another stakeholder commented that if multiple ministries were to agree to joint monitoring indicators then this would drastically reduce the administrative burden – for both government and development partners – of reporting to multiple ministries and line agencies. Stakeholders also noted that a joint monitoring framework would substantially reduce the burden on individual government agencies and civil society organisations to identify indicators that provide a sound basis for attribution and collect data across this presumably large number of indicators. One civil society stakeholder commented that volunteers who are currently implementing a project at community level are kept very busy reporting to three different provincial departments, and that a more efficient approach in another program implemented through the same NGO is to have local focal points who conduct consolidated monitoring and reporting.

Stakeholders reported that the current institutional context supports parallel, rather than joint, monitoring and reporting. Several stakeholders provided examples of parallel reporting, where a single project, or a single outcome, is reported to multiple government agencies. Stakeholders commented that divisions between line agencies presented a substantial challenge to joint monitoring and reporting, although more than one stakeholder provided an example of consolidated monitoring that had occurred with the participation and support of different line agencies. Additionally, stakeholders noted that siloed funding allocations support parallel monitoring and reporting, since monitoring activities are funded under discrete sector-specific funding allocations and funding bodies require reports to be submitted on only the activities that they have funded. Stakeholders from civil society acknowledged that reporting to multiple funding bodies and line agencies was time-consuming and a major administrative burden, and one civil society stakeholder suggested that line agencies may also perceive this volume of reporting as burdensome.

Based on these findings, there are four main **barriers** to integration relating to monitoring, evaluation and reporting:

1. Lack of consensus across sectors around an integrated theory of change or causal framework.
2. Focus by funding bodies on sector-specific outputs, rather than broader outcomes.
3. Accountability and incentives for outputs are sector-specific.
4. Increased time burden to liaise with multiple sectors.

RECOMMENDATIONS

Knowledge and learning

Top priority:

- Appoint focal points who can accumulate knowledge about WASH and nutrition.

High priority:

- Generate local evidence for the links between WASH and nutrition, e.g. secondary analyses of data from pilot projects, and projects such as NOURISH that include control sites.

Additional recommendations:

- Disseminate technical guidance, endorsed by all key national stakeholders, on the links between WASH and nutrition.
- Provide opportunity to attend training courses for key staff members, e.g. focal points, and high-level staff with responsibilities for program design.
- Enhance institutional and organisational structure around learning events to support follow-up.

Policy

Top priority:

- Develop a cross-sectoral strategy that outlines how existing WASH and nutrition policies contribute to integrated efforts to improve nutrition outcomes.
- Leverage existing policies to divide responsibilities relating to integrated work between different sectors.

Additional recommendations:

- Cost the WASH- and nutrition-related components of existing policies, and use these costings as a basis for fund mobilisation.

Leadership

High priority:

- National level stakeholders provide clear leadership and guidance to subnational line agencies.

Additional recommendations:

- Strengthen existing coordination mechanisms by ensuring leadership roles and responsibilities are allocated clearly, and sufficient support is provided for follow-through.
- High-level leaders promote buy-in to an existing coordination mechanism, likely CARD.

- Use evidence to advocate for WASH-nutrition integration to leadership, to encourage senior government leaders to support collaboration across sectors for WASH and nutrition integration.
- If increased subnational leadership is desired, national level to provide funding allocation to increase provincial and/or district government capacity to spend time on coordination for WASH-nutrition integration.

Governance

High priority:

- Strengthen a single national coordination mechanism, likely CARD, and use this mechanism as a structure for integration.
- Explore opportunities to strengthen existing mechanisms that support development partner alignment, and consider how to streamline reporting for government and development partners.

Additional recommendations:

- Work within existing vertical structures to promote openness to other ministries, and subsequently build buy-in to structures for integration.
- Consider appointing a single focal point in each ministry or line agency to participate in discussions about integrated work.
- Consider the feasibility of subnational governance of cross-sectoral projects, including an assessment of resources required.
- Identify lessons learned from previous examples of responsive cross-sectoral coordination, e.g. maternal death audits.

Financing

Top priority:

- Advocate to Ministry of Economy and Finance (MEF) for increased budget allocations to both nutrition and WASH.
- Advocate to donors for increased merged funding opportunities, e.g. through existing government coordination mechanisms and global civil society networks.

Additional recommendation:

- Include integration expenses in costings, and use costings to mobilise funds from government and civil society.

Personnel

Top priority:

- Cultivate and support working relationships across sectors, whether within or between organisations, e.g. through the consistent allocation of the same individuals to attend meetings, funded time, funded transport.

High priority:

- Consider how to promote integration in ways that reassure people of their responsibilities and mitigate territorialism, e.g. clear allocation of responsibilities and early communication about this allocation.

Additional recommendations:

- Use champions strategically to advocate cross-sectoral work, but not to manage the process of integration.
- If focal points are appointed, recruit people who are experts in their content area and open to other content areas.
- Consider providing rigorous, funded training opportunities for a small number of staff rather than less detailed training for a large group..

Design

High priority:

- Use current evidence, including locally generated evidence, during limited windows of opportunity to ensure programs are as up-to-date as possible.

Additional recommendations:

- Advocate to donors to fund programs that are informed by the integrated theory of change or causal framework, including co-located programs.
- Subnational governments to advocate for co-located funds, e.g. through province-level or district-level planning.

Implementation

High priority:

- Promote cross-sectoral steering architecture that is institutionalised rather than project-driven, e.g. strengthened CARD, high-level champions for integration, and increased support for provincial- and district-level planning.

Additional recommendations:

- Ensure that theoretical discussions, e.g. working groups and meetings, have an action plan and are managed through agendas, minutes, action items, etc.
- Promote an enabling environment for integration at the design stage, e.g. through policy, governance and financing.

Monitoring, evaluation and reporting

High priority:

- Develop an integrated theory of change or causal framework that includes the contribution of WASH to nutrition.
- Build consensus around this integrated theory of change or causal framework.

Additional recommendations:

- National ministries to provide technical guidance on indicators for joint monitoring, as well as clear allocation of responsibilities for indicators
- Explore possibilities for consolidated monitoring and reporting within defined areas, e.g. reporting against a cross-sectoral district plan.

Priority action plans

Action plans developed for the top priority recommendations during the Consultative Workshop are outlined below.

Action Plan A: to develop focal points for WASH-nutrition integration

Stakeholders drafted an Action Plan to address top priority recommendations relating to knowledge and learning, and personnel:

- Appoint focal points who can accumulate knowledge about WASH and nutrition; as a means to
- Cultivate and support working relationships across sectors (whether within or between organisations), e.g. through the consistent allocation of the same individuals to attend meetings, funded time, funded transport.

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Action	People responsible	Output(s)
Year 1		
A1. Develop Terms of Reference for Focal Points. Focal Points should be responsible for accumulating knowledge, as well as acting on this knowledge to advocate for WASH-nutrition integration as appropriate.	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Terms of Reference
A2. Develop selection criteria for recruitment of Focal Points. Focal Points can be recruited from government as well as outside government (e.g. academia, NGOs). One of the most important selection criteria for Focal Points is that they will be able to make a long-term commitment to the Focal Point role.	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Selection Protocol
A3. Recruit Focal Points. The number of Focal Points recruited should be large enough to allow for some dropout, but small enough to ensure that there are sufficient resources for training and ongoing support of Focal Points. An appropriate number of Focal Points may be between 4 and 6.	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Qualified Focal Points, who have been selected according to the Selection Protocol
A4. Develop a Workplan and Budget. The Workplan and supporting Budget should outline how to build Focal Points' technical expertise in WASH-nutrition integration.	Focal Points Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Workplan agreed • Budget mobilised
A5. Put in place an incentive system for Focal Points.	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Motivated Focal Points (measurement to be determined; may include retention, responsiveness)

Years 2–3		
A6. Establish a Focal Point pool.	Focal Points	<ul style="list-style-type: none"> • Peer support between Focal Points (measurement to be determined; may include attendance at group events)
A7. Activate Focal Points. Focal Points to engage in knowledge sharing, providing advice, and evidence-based advocacy.	Focal Points	<ul style="list-style-type: none"> • Outputs produced by Focal Points, including technical guidance, briefings, and policy advice

Action Plan B: to mobilise funds for WASH-nutrition integration

Stakeholders drafted an Action Plan to address top priority recommendations relating to financing:

- Advocate to Ministry of Economy and Finance (MEF) for increased budget allocations to nutrition and WASH; and
- Advocate to donors for increased merged funding opportunities, e.g. through existing government coordination mechanisms and global civil society networks.

Action	People responsible	Output(s)
Year 1		
B1. Cultivate champions within government. Identify, engage and support champions within CARD, MRD and MOH who support WASH-nutrition integration and are in a position to influence policymakers.	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Champions identified and engaged
B2. Document evidence for the benefits of WASH-nutrition integration in Cambodia. Collate evidence and ensure it is presented clearly, to support lobbying and advocacy efforts in Years 1–3. <i>[Refer Action Plan A4: this evidence can also be used to develop Focal Points' technical expertise.]</i>	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Evidence dossier prepared

B3. Lobby key donors currently funding work in WASH and nutrition. Target USAID, World Bank, GiZ, ADB, and possibly also UNICEF. Lobby these 4-5 donors to provide: (a) more funding for WASH and/or nutrition; (b) more programs in WASH and/or nutrition; and (c) more flexibility in how funding can be used in WASH and/or nutrition, in order to support work that integrates WASH and nutrition.	Champions within CARD, MOH, MRD Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Number of lobbying activities • Number of champions participating in lobbying activities
B4. Develop Funding Strategy. Identify priority activities that could be funded by MEF in Years 2-3. This requires cross-sectoral joint planning.	Sub-working Group on WASH and Nutrition Champions within CARD, MRD and MOH	<ul style="list-style-type: none"> • Funding Strategy
Years 2–3		
B5. Continue to lobby key donors. (As per Year 1.)	Champions within CARD, MRD and MOH	<ul style="list-style-type: none"> • Number of lobbying activities • Number of champions participating in lobbying activities
B6. Continue to cultivate champions within government. (As per Year 1.)	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> • Champions engaged
B7. Advocate to Ministry of Economy and Finance. Based on the Funding Strategy developed in Year 1, advocate to MEF to fund priority activities and increase funding allocation to line ministries (MRD, MOH) and CARD. <i>[Refer Action Plan A7: Focal Points can provide up-to-date evidence about the rationale for funding.]</i>	Champions within CARD, MRD and MOH	<ul style="list-style-type: none"> • Advocacy activities
Years 4–5		
B8. Roll out/scale up integrated interventions to all provinces.	Key donors (USAID, World Bank)	<ul style="list-style-type: none"> • Interventions that integrate WASH and

	Bank, GiZ, ADB, UNICEF) Implementing agencies	nutrition implemented in all provinces
B9. Advocate to Ministry of Interior. Advocate for increased budget allocation to subnational governments (e.g. Commune Councils) for work that supports WASH-nutrition integration. <i>[Refer Action Plan A7: Focal Points can provide technical guidance about what subnational governments can do to support WASH-nutrition integration.]</i>	Champions within MOH, MRD	<ul style="list-style-type: none"> • Budget allocation increased
B10. Advocate to Ministry of Economy and Finance. Advocate for increased funding allocation to line ministries (MRD, MOH) and CARD on an ongoing, annual basis. <i>[Refer Action Plan A7: Focal Points can provide up-to-date evidence about the rationale for increased funding.]</i>	Champions within CARD, MRD and MOH	<ul style="list-style-type: none"> • Budget allocation increased

Action Plan C: to develop a policy framework for WASH-nutrition integration

Stakeholders drafted an Action Plan to address top priority recommendations relating to policy:

- Develop a cross-sectoral strategy that outlines how existing WASH and nutrition policies contribute to integrated efforts to improve nutrition outcomes; and
- Leverage existing policies to allocate responsibilities relating to integrated work between different sectors.

Action	People responsible	Output(s)
Year 1		
C1. Establish Task Group to work on strategy development. The Task Group will include stakeholders from relevant line ministries and agencies. The Task Group may be a sub-group of the Sub-working Group on WASH and Nutrition.	Sub-working Group on WASH and Nutrition	<ul style="list-style-type: none"> Task Group formed and Terms of Reference agreed
C2. Map existing WASH policies and nutrition policies.	Task Group	<ul style="list-style-type: none"> Map of policies
C3. Conduct stakeholder consultation to develop key recommendations for strategy development. Key recommendations will outline: what are the strengths of existing policies, what are opportunities to integrate across different policies, and what are the gaps in current policies? <i>[Refer Action Plan A3: Focal Points can participate in this consultation.]</i>	CARD	<ul style="list-style-type: none"> Consultation report including recommendations
C4. Develop cross-sectoral strategy.	Task Group	<ul style="list-style-type: none"> Strategy
Years 2–3		
C5. High-level endorsement of the WASH-nutrition strategy. Endorsement by all ministries that have policies relevant to WASH and nutrition.	CARD and all relevant ministries	<ul style="list-style-type: none"> Official endorsement
C6. High-level launch of the WASH-nutrition strategy.	CARD and all relevant ministries	<ul style="list-style-type: none"> Launch event
C7. Public dissemination of the strategy at national and subnational levels.	Relevant ministries and agencies	<ul style="list-style-type: none"> Dissemination events

C8. Develop operational plan to implement the strategy. The operational plan should be a joint National Action Plan. The operational plan should include guidance on coordination at national and subnational level. The operational plan should also include actions to develop human resources to support implementation of the plan.	Task Group	<ul style="list-style-type: none"> • Operational plan
C9. Begin implementation of the strategy. Implement according to the operational plan. <i>[Refer Action Plan A7 and B6: Focal Points, and Champions within CARD, MRD and MOH, can support implementation.]</i>	Relevant ministries	<ul style="list-style-type: none"> • <i>Output to be determined once the operational plan has been developed</i>
C10. Conduct mid-term review. A mid-term review should be conducted in Year 3. Following the findings of the mid-term review, adjust the strategy and operational plan as required.	Task Group CARD and all relevant ministries	<ul style="list-style-type: none"> • Mid-term review report • Official endorsement of revised strategy • Revised operational plan
C11. Disseminate the revised strategy and operational plan at national and subnational levels.	Relevant ministries and agencies	<ul style="list-style-type: none"> • Dissemination events
Years 4–5		
C12. Conduct impact evaluation of the strategy.	Task Group	<ul style="list-style-type: none"> • Evaluation report
C13. Assess nutrition status among children <5. Report on any changes that can be identified.	National Institute of Statistics in the Ministry of Planning	<ul style="list-style-type: none"> • Report
C14. Public dissemination of evidence for WASH and nutrition integration. <i>[Refer Action Plan A7 and B6: Focal Points, and Champions within CARD, MRD and MOH, can be involved in dissemination.]</i>	Task Force	<ul style="list-style-type: none"> • Dissemination events

<p>C15. Promote functional coordination mechanisms for integration between WASH and nutrition at national level and subnational level. Coordination mechanisms are to be outlined in the operational plan. However, additional support may be needed in Years 4-5 to promote these mechanisms.</p>	<p>CARD (national) Provincial governments, district governments, commune councils (subnational)</p>	<ul style="list-style-type: none"> • <i>Output to be determined once the operational plan has been developed</i>
<p>C16. Request increased funding for programs that integrate WASH and nutrition. Sector ministries to include integrated work in their budgets. <i>[Refer Action Plan B10: Champions within CARD, MRD and MOH will also be advocating for increased funding.]</i></p>	<p>Relevant ministries</p>	<ul style="list-style-type: none"> • Budget submissions to MEF

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ANNEX 1: A PRIORI ANALYTICAL FRAMEWORK

The codes and sub-codes below were developed following the literature review completed in Phase 1. These *a priori* codes and sub-codes were used to assist in mapping findings from the key informant interviews in order to support deeper analysis and interpretation, followed by identification of emergent themes.

The analytical framework was revised and modified during data analysis to ensure that findings from primary research were adequately captured.

Code	Example sub-codes	
	Barriers to integration	Opportunities for integration
Knowledge	<ul style="list-style-type: none"> • Siloed or sectoral knowledge • Understanding scope of WASH-nutrition linkages • Knowledge of effects of integration • Knowledge of how to integrate 	<ul style="list-style-type: none"> • Strategy for integration that is based on awareness of WASH-nutrition linkages • Improvements seen from integrated programs • Evidence for effectiveness of integration • Examples of what integration looks like
Policy	<ul style="list-style-type: none"> • Sectoral policies that do not support integration • Policy framework that does not support integration 	<ul style="list-style-type: none"> • Sectoral policies that support integration • Coherent policy framework that supports integration • Cross-sectoral policies
Leadership	<ul style="list-style-type: none"> • Competing priorities • Unclear leadership responsibilities 	<ul style="list-style-type: none"> • Leadership approval for collaboration • Champions for integration and/or innovation • Advocacy to leadership
Governance	<ul style="list-style-type: none"> • Challenges in implementing coordination mechanisms or bodies • Stakeholder involvement lacking • Challenges in coordinating multiple stakeholders • Challenges in replicating coordination mechanisms at sub-national level 	<ul style="list-style-type: none"> • Coordination mechanisms or bodies • Cross-sectoral coordination – at national level • Cross-sectoral coordination – at sub-national level • Strategies for integration
Financing	<ul style="list-style-type: none"> • Cost of pursuing integration • Siloed funding • Mismatched funding cycles • Concerns about sustainability of funding 	<ul style="list-style-type: none"> • Investment in pursuing integration • Recommendation from funding bodies to pursue integration • Integrated funding streams or shared budget

		<ul style="list-style-type: none"> • Discretion in allocating funds to pursue integration
Personnel	<ul style="list-style-type: none"> • Technical expertise • Time constraints and/or routines • Focus by staff on single sector 	<ul style="list-style-type: none"> • Capacity development (formal and/or informal) • Time availability • Interest among staff in other sectors and/or staff commitment to integration • Relationships between personnel across sectors
Design	<ul style="list-style-type: none"> • Siloed design process • Replication of pre-existing design 	<ul style="list-style-type: none"> • Multi-sectoral involvement in design process • Situational analysis identifies need for WASH-nutrition integration • Co-location of nutrition and WASH efforts
Implementation	<ul style="list-style-type: none"> • Time • Delivery platform and/or cadre • Stakeholder involvement in planning • Differences in work plans • Resourcing, including sourcing supplies from different sectors 	<ul style="list-style-type: none"> • Single implementing partner or contract • Delivery platform and/or cadre • Stakeholder involvement in planning • Coherent work plans • Beneficiary-centred implementation • Coordination at operational level
Monitoring & evaluation and reporting	<ul style="list-style-type: none"> • Process for developing M&E framework • Indicators • Attribution • Accountability and incentives 	<ul style="list-style-type: none"> • M&E framework that considers both WASH and nutrition • Common indicators • Consolidated reporting • Joint monitoring activities
Sector-specific issues	<ul style="list-style-type: none"> • Sector-specific priorities 	<ul style="list-style-type: none"> • WASH-nutrition linkages where integration is more intuitive or easier

ANNEX 2: PARTICIPANT INFORMATION SHEET

Study title: Study on WASH-nutrition barriers and potential solutions

Dear Sir/Madam,

You are being contacted on behalf of the Council for Agricultural and Rural Development (CARD) regarding a research study. The study is designed to explore the barriers that can prevent integration of water, sanitation and hygiene (WASH) and nutrition in Cambodia, and assist in identifying potential solutions to these barriers.

You are being invited to take part in this research. Participation is entirely voluntary. This information sheet explains the aims and procedures of the study, so that you can make an informed decision about whether or not you would like to participate.

Purpose of the study

CARD is planning to hold a high-level conference to discuss and highlight the links between WASH and nutrition and advocate for more integrated actions. This conference will build on the first National Nutrition Conference held in March 2015. As a critical input to the workshop, CARD plans to hold a briefing on the current barriers to integrated WASH and nutrition interventions, and the potential solutions to these barriers. This study is designed to identify the current barriers to WASH and nutrition integration in Cambodia and the potential solutions to these barriers, as well as highlight current good practice. The initial application of this information is to inform WASH and nutrition integration discussions at the CARD national workshop.

What participation in the study involves

You do not have to participate in the study. If you choose to participate, a time will be scheduled for a face-to-face interview with an independent international consultant. You will also be asked to sign an informed consent form and return this form either by email or in person during your interview.

At the face-to-face interview, you will be asked to respond to a series of questions read out by the independent consultant. Your conversation will be private and what you say will remain confidential. The interview will take between 1 hour and 1.5 hours, however a shorter interview can be scheduled if you are only available for a brief period of time.

Right to refuse or withdraw

Your participation in this study is entirely voluntary. If at any time you do not want to answer a question during the interview you may skip that question. You are free to withdraw from the study at any time, and if you withdraw from the study then any information you have provided to the consultant will be destroyed. If you decide to not answer some questions, or to pull out of the study, you do not have to provide a reason.

You are free to ask any questions before agreeing to participate. You may discuss your questions with the person who has sent you this information sheet.

Alternatively, you may raise your questions directly with the independent consultant who is undertaking this work. Her contact details are:

Liz Comrie-Thomson

Burnet Institute, Melbourne, Australia

Phone: +61 3 9282 2238

Email: icomriethomson@burnet.edu.au

Thank you.

ANNEX 3: INFORMED CONSENT FORM

STUDY TITLE: STUDY ON WASH-NUTRITION BARRIERS AND POTENTIAL SOLUTIONS

Dear Sir/Madam,

This form is for you to review after you have read the Participant Information Sheet.

Please carefully read the following six statements:

1. I have received the Participant Information Sheet explaining this study, and I understand its contents. I understand why the study is being conducted and what my role in the study will be.
2. I was provided the opportunity to ask questions and given adequate time to think about the study.
3. I understand that participation in this study is completely voluntary and that I may withdraw from it at any time and without supplying a reason.
4. I understand that my answers during the face-to-face interview will be audio-recorded, and that written notes will be taken.
5. I understand that all data collected will remain confidential, and that identifying information will not be shared with any other organisation or any other person. The only person who will have access to identifying information about me is the researcher who will conduct the interview, and a translator if present. I understand that all data collected, including identifying information, will be destroyed after the final research report has been submitted and accepted.
6. I am fully aware that the results of this study will be used for scientific, evaluation and educational purposes, and will be disseminated within Cambodia and internationally. I also understand that the results of this study may be published. I agree to this, provided that my privacy is protected.

If you agree to the six items listed above, and agree to participate in this study, please sign and date below.

..... / /
Participant signature Date

Please return the signed form either by email or in person during your face-to-face interview.

ANNEX 4: INTERVIEW GUIDE

INTERVIEW GUIDE *Interviewer use only*: Participant ID:

Study title: Study on WASH-nutrition barriers and potential solutions

Interviewer to complete:

- ☐ Participant has received Participant Information Sheet
- ☐ Participant has provided written informed consent

Read the following text: Thank you for participating in this study. You have provided signed informed consent. Do you consent to me recording this interview? Recordings will not be shared with any other person. All recordings will be destroyed after the final report has been submitted and accepted.

- ☐ Participant has provided verbal consent for interview to be audio-recorded
- ☐ Interviewer to sign and date verbal consent:
.....
...../...../2016

If the interview is being audio-recorded, interviewer to note against each question below the point during the audio transcript at which the question is asked (using the format hour:minute:second).

Current role

- Q1 (.....:.....:.....) In your current position, what is your role in contributing to programs?
- Q2 (.....:.....:.....) What is your role in contributing to policy?
- Q3 (.....:.....:.....) *[Ask participant about the sector that does not relate directly to their current position]* How is [WASH/nutrition] relevant to your work?
- Q4 (.....:.....:.....) *[Ask participant about the sector that does not relate directly to their current position]* What working relationships do you have with organisations working in [WASH/nutrition]?

Integration activities and successes

- Q5 (.....:.....:.....) What WASH and nutrition activities have been integrated [in this location/at your organisation]?
- ☐ Type of activity? (e.g. community-based health promotion, service delivery, policy development, etc.)
 - ☐ How were activities integrated – what did integration look like? Consider:
 - Technical approach/strategy?

- Leadership? Governance mechanisms?
 - Personnel?
 - Delivery platforms?
 - Design, implementation, M&E?
 - Financing?
 - Policy environment?
- ☐ When did integration happen? Planned/opportunistic/responsive? At which stage(s) of planning/implementation?
- ☐ Who was involved in integrating the activities?
- ☐ Why were these activities integrated, when previous [similar] activities had not been?

Q6 (.....:.....:.....) How does your organisation define 'success' in your [WASH/nutrition] programs/policies?

- ☐ How is success measured?
- ☐ What are the accountability mechanisms? Who does your organisation report success to?

Q7 (.....:.....:.....) What integration activities have been successful?

- ☐ Why were they successful?

Q8 (.....:.....:.....) How are integrated activities decided upon?

- ☐ Who is involved in these decisions?
- ☐ At what level are these decisions made?
- ☐ How are these decisions translated to the field?

Challenges in integration

Q9 (.....:.....:.....) What barriers or challenges have your [programs/policies/coordination mechanisms] encountered in integration?

- ☐ Unexpected challenges in integrating the programs?
- ☐ Additional challenges? Consider:
- Technical approach?
 - Policy environment?
 - Leadership/governance?
 - Financing?
 - Personnel?
 - Challenges at particular stages (e.g. design, implementation, M&E)?
- ☐ Why and how did these barriers/challenges affect integration?

Q10 (.....:.....:.....) What did your organisation do to overcome these barriers/challenges?

- ☐ Did your organisation make changes to its processes, activities, etc. to prevent future barriers/challenges?
- ☐ What changes were made?
- ☐ How were these changes made? Who was involved in deciding to change?
- ☐ Has your organisation seen success after these changes were made?

Opportunities for integration

Q11 (.....) What would be the ideal conditions that would support integration of WASH and nutrition?

☐ Consider:

- Technical approach?
- Personnel?
- Design process?
- M&E, reporting?
- Leadership?
- Governance mechanisms?
- Financing?
- Policy environment?

Q12 (.....) Based on your experiences, what are your recommendations for practical steps to reach these ideal conditions?

☐ First steps?

☐ Contingencies?

☐ Steps at different levels (e.g. national, sub-national, field operations)?

Q13 (.....) What should WASH-nutrition integration look like?

☐ What should integration look like to policymakers?

☐ To program managers?

☐ To beneficiaries?

☐ To you, in your current role?

Q14 (.....) Based on your experiences, what are your recommendations for how to integrate WASH and nutrition?

ANNEX 5: TERMS OF REFERENCE FOR CONSULTATIVE WORKSHOP

Consultative Workshop on draft report of WASH and Nutrition Study

Date: 3 August 2016

Time: 8.00am – 15.30pm

Venue: Cambodiana Hotel, Phnom Penh

Background:

The Council for Agricultural and Rural Development (CARD) is mandated to facilitate coordination, policy guidance, monitoring and information management relating to nutrition. CARD has commissioned a study to identify current barriers to WASH and nutrition integration in Cambodia, and identify opportunities to address or overcome these barriers.

As part of this study, in May 2016 a stakeholder consultation was conducted with key informants whose work relates to nutrition and/or WASH. Forty representatives from government agencies and development partners were interviewed, including national, provincial and district level staff. Draft findings from this consultation were submitted in June 2016 and are attached as Annex A. These findings are intended to consolidate the opinions of stakeholders currently working in areas related to WASH and/or nutrition, in order to provide a basis for future discussions about integration in Cambodia.

This stakeholder workshop has been arranged to provide an opportunity for direct feedback on the draft findings and recommendations.

Workshop objectives:

1. To ensure that the findings of this study are meaningful and acceptable;
2. To ensure that recommendations are feasible and provide clear direction to future actions to support WASH and nutrition integration.

Anticipated outputs:

- Document that collates stakeholders' feedback on draft findings and recommendations;
- Recommendation document that outlines short-term, medium-term and long-term recommendations to promote WASH and nutrition integration, and identifies who has the authority to act on each recommendation.

Invited participants:

H.E. Dr. Chea Samnang, CARD, NC of WSSCC in Cambodia

H.E. Sok Silo, Deputy Secretary-General for CARD, Chief of FSN

Dr. Prak Sophonneary, Dpt Director, NMCHC/MoH

Ms. Inna Sacci, Save the Children

Mr. Hou Kroeun, HKI

Ms. Francesca Erdelmann, WFP

Mr. Arnaud Laillou, Nutrition Specialist, UNICEF

Mr. Virak Chan, WSP/WB

Mr. Rafael Catalla, CRSHIP Manager/Plan International-Cambodia

Ms. Channa Sam Ol, WaterAid Cambodia

Mr. Charanay Chim, WSSCC
Mr. Chreay Pom, Director, DRHC/MRD
Dr. Mao Saray, Director, DRWS/MRD
Mr. Ky Sophal, Deputy Director of DRHC/MRD
Mr. Sam Treglown, UNICEF WASH Program
Ms. Phan Sophary, WHO
Ms. Gabrielle Halcrow, SNV
Ms. Liz Comrie-Thomson, Burnet Institute, Consultant

Agenda:

Time	Session	Presenter(s)
8.00–8.30	Registration	–
8.30–9.00	Welcome and introduction <ul style="list-style-type: none"> Welcome remarks Overview of how the WASH and Nutrition Study relates to current efforts to support WASH and nutrition integration in Cambodia 	H.E. Dr. Chea Samnang
9.00–10.00	Overview of current evidence <ul style="list-style-type: none"> Current evidence relating to barriers and enablers for WASH and nutrition integration How draft findings from this study relate to the evidence 	Ms. Liz Comrie-Thomson
10.00–10.15	Coffee break	
10.15–12.00	Review of draft findings <ul style="list-style-type: none"> Participants share feedback on the draft findings Nominated participant(s) share feedback on draft findings collated from stakeholders who are not present at the workshop Participants discuss applicability of draft findings to the intended use of this study 	Facilitated discussion and group-work
12.00–13.00	Lunch break at Cambodiana Hotel	
13.00–14.00	Review of draft recommendations <ul style="list-style-type: none"> Participants share feedback on the draft recommendations Nominated participant(s) share feedback on draft recommendations collated from stakeholders who are not present at the workshop 	Facilitated discussion
14.00–14.15	Coffee break	
14.15–15.15	Making recommendations actionable <ul style="list-style-type: none"> Participants phase recommendations into short-term, medium-term and long-term recommendations Participants determine who has the authority to act on each recommendation 	Group-work
15.15–15.30	What next? Wrap-up, next steps and closing	Dr. Samnang and Ms. Liz
15.30	Close	

ANNEX 6: ATTENDANCE LIST FOR CONSULTATIVE WORKSHOP

Name	Position	Workplace
Chan Virak	WSS Specialist	WB
Chea Samnang	ND, WSSCC	CARD
Chim Charanay	Advisor to NC	WSSCC
Chreay Pom	Director	MRD
Elizabeth Comrie-Thomson	Consultant	Burnet Institute
Heng Somtepheap	WASH Specialist	UNICEF
Hou Kroeun	DCD	HKI
Inna Sacci	COP, NOURISH	Save the Children
James Wicken	Country Director	WaterAid
Lempho Suthavaridh	SPC	Plan International
Mao Saray	Director	DRWS/MRD
Phan Sophary	Technical Officer	WHO
Prak Sophonneary	Deputy Director	NMCHC
Rafael Catalla	PM CRSHIP	Plan International
San Jeunsafy	Communications & Knowledge Management Specialist	Save the Children
Sok Silo	DSG	CARD

www.wateraid.org/cambodia

S.I. Building 3rd Floor, #93, Preah Sihanouk Blvd,
Sangkat Chaktomuk, Phnom Penh, Cambodia

Tel: +855 17 935 083

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