



Accelerating access to safe water and sanitation in India and Indonesia

Evaluation brief

From September 2019-March 2023, Water.org aimed to enable women in low-income households in India and Indonesia to gain access to safe water and sanitation through financing. Thanks to support from Reckitt, a global health and hygiene company, the program mobilized **\$123M** for small loans that financed **435K improvements**, reaching **more than 1.9M people**. Alongside improving access to safe water and sanitation, the program empowered women in their financial decision-making, improved their well-being, and led to better privacy, safety, and health.

Impact solutions group, Athena Infonomics, conducted an evaluation of the program in February 2024. This report highlights key findings from the evaluation and offers recommendations for future programs.

Context

Challenges and Opportunities for Achieving SDG 6 in India and Indonesia

The United Nations' Sustainable Development Goal 6 (SDG 6) sets an ambitious target: universal access to safe water and sanitation by 2030, recognizing that water is key to breaking cycles of poverty and advancing sustainable development. Gender inequalities pose a major barrier to reaching SDG targets, as women and girls continue to bear the primary responsibility for water collection in seven out of ten households.

In India, 35 million people remain without safe water, and 678 million lack access to safe sanitation; in Indonesia, 192 million are without safe water, and 14 million lack safe sanitation facilities.¹ The situation is even more pronounced in rural areas, where only 66% of India's and just 24% of Indonesia's rural populations have access to safely managed water. As of 2022, open defecation is still practiced by 11% of India's and 4% of Indonesia's populations, with the problem especially acute in rural communities, leading to severe health risks and environmental contamination.²

With one-fifth of the global population living in these countries, India and Indonesia represent a significant opportunity to contribute to the global achievement of SDG 6 by improving access to water and sanitation for low-income households.



¹ World Health Organization. (2023). Progress on household drinking water, sanitation and hygiene 2000-2022: special focus on gender. World Health Organization.

² <https://washdata.org/data/household>

Program Goals and Overview

Through its WaterCredit solution, Water.org provides financial and technical assistance to local institutions, particularly microfinance institutions (MFIs), enabling them to offer affordable WSS loans to their clients. Under a 4-year program supported by Reckitt, Water.org sought to expand WaterCredit activities in both countries, with a goal of reaching 989,000 people with safe water and sanitation, improving the utilization of water and sanitation facilities, and positively impacting health, gender-equity and economic outcomes.

The program targeted diverse communities and regions across both countries – in 19 of India's 28 states and 21 of Indonesia's 38 provinces. Water.org worked with 10 partners in these regions to design and scale WaterCredit. In India, partners included banks, microfinance institutions (MFIs), self-help promoting institutions and self-regulatory organizations, while the two primary partners in Indonesia were a state-sponsored capital provider and a cooperative institution. In Indonesia, Water.org also worked closely with local governments and sanitation providers to create an enabling environment for water and sanitation financing.

Water.org's support under the program consisted of partnership selection, financial support, technical support, and community education.

Evaluation Methods

The evaluation assesses the program's success and benefits to low-income households, and pilots incorporating the WASH Benefit Accounting Framework into the assessment process.

The Framework, developed by WASH4Work, estimates and values the benefits of corporate investments in water, sanitation, and hygiene (WASH), including economic, health, safety, and gender equity improvements. WASH4Work is a multi-stakeholder initiative that aims to improve WASH access in workplaces, communities, and supply chains.³ Using this method, Athena linked Water.org's efforts under the Reckitt grant to specific impacts in these areas. This provided insights into the program's broader benefits, including women's decision-making roles, mental well-being, open defecation rates, and perceived safety levels in accessing facilities.

The evaluation analyzed survey data from Program Monitoring Visits (PMV), grant documents and loan data, and incorporated 64 indicators from the WASH Benefits Accounting Framework. Qualitative insights were gathered through Focus Group Discussions (FGDs) and Key Informant Interviews (KIIs).

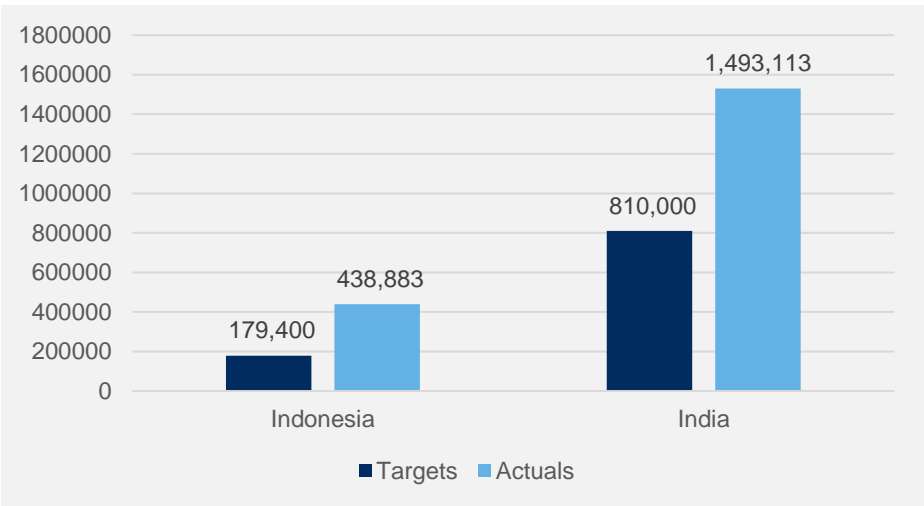
³ <https://wash4work.org/>

Results

Program achievements significantly exceed goals

Through Reckitt’s support and along with its partners, Water.org empowered **1,931,996** individuals in India and Indonesia with access to safe water and sanitation, more than doubling the initial goal of 989,000.

Figure 1: Planned reached vs Actual beneficiaries reached – India and Indonesia



The WaterCredit approach was successful in helping partners scale WSS loan portfolios across more branches than expected

More than 449,000 loans were disbursed over the course of the program, mobilizing more than 138 million USD in capital. As of January 2024, partners had disbursed **435K loans** with an average loan size of **USD 309** and a repayment rate of **96%**.

1.9M

people reached

123M

capital mobilized (USD)

435K

loans disbursed

100%

female borrowers

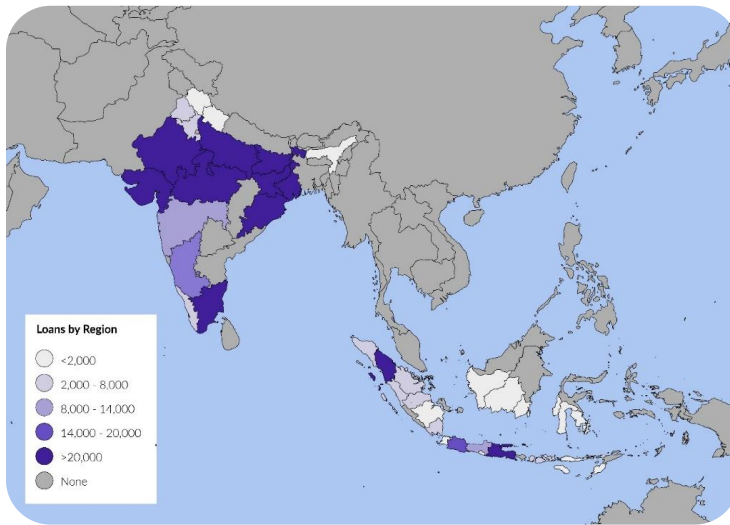
96%

repayment rate

87%

rural borrowers

Figure 2: Geographic coverage of loans disbursed



About 82% (213,000+) of the loans in India were distributed across five states: Bihar, Jharkhand, Odisha, Madhya Pradesh, and Uttar Pradesh. Historically, these states have been characterized by substantial rural population and relatively elevated poverty statistics.⁴

In Indonesia, about 70% of the loans were disbursed across three provinces: Jawa Barat, Jawa Timur, and Sumatera Utara. At least 4,000 other clients

were spread across Aceh, Jambi, Jawa Tengah, and Lampung.

Access to WSS loans benefits female loan recipients and their households

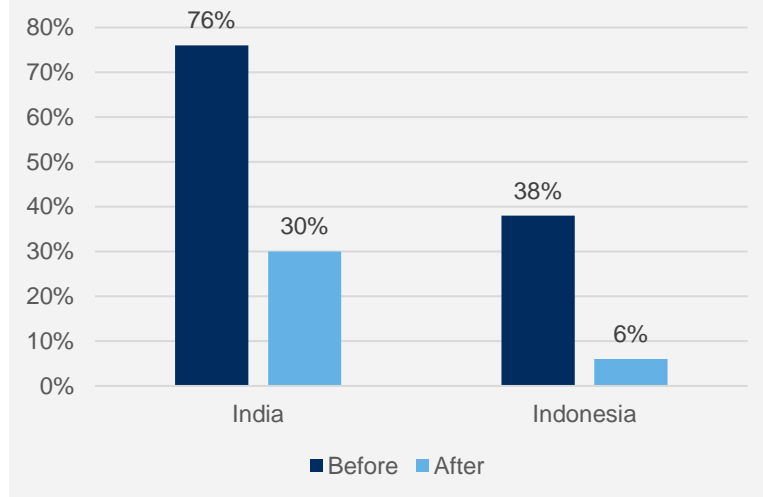
Through household survey results and FGDs, the evaluation determined that improvements in water and sanitation through loans contributed to creating income opportunities, improving safety and well-being, and reducing the time spent on water and sanitation activities for female borrowers and their households.



⁴ Handbook of Statistics on Indian States, Reserve Bank of India.

Open defecation practices were reduced. The program resulted in a significant reduction in household members practicing open defecation after the construction of new/improved sanitation facilities in both countries, reducing 46% in India and 32% in Indonesia. For many women, the shift away from open defecation has had a profound effect on their daily routines as they no longer have to plan their day around the availability, safety, and location of open sites.

Figure 3: Open defecation practices pre- and post-implementation



Water and sanitation loans increase women's independence and decision-making.

Partners designed the WSS loans with female clients in mind and marketed the loans as a means to help women gain economic independence and access water for work-related purposes. According to PMV data, 93% in India and 87% in Indonesia were involved in the decision-making process of taking out the loan. More women also reported more autonomy to use toilets after sanitation facilities were constructed or improved, where the percentage of women who required a companion to access the toilet reduced from 76% to 30% in India and 38% to 6% in Indonesia.

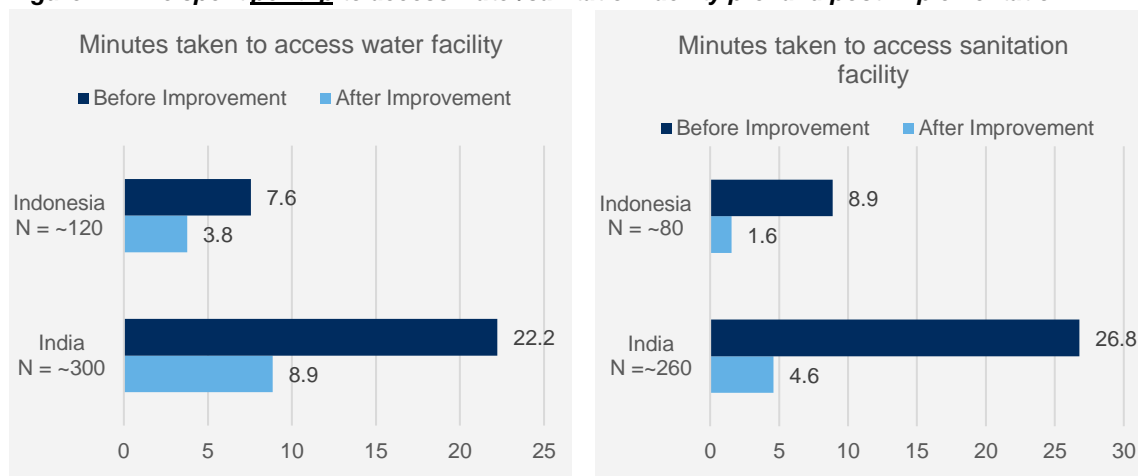
Women report improved sense of safety and access. After their WSS improvements, women report feeling safer and having better access to facilities — 75% in India and 54% in Indonesia. These WSS upgrades addressed key concerns raised by focus groups — such as environmental hazards, fear of harassment, and challenges with open defecation.



Women experience time savings. The evaluation revealed notable time savings in accessing sanitation and water facilities (**Figure 4**). In India, beneficiaries saved an average of 22 minutes per trip to sanitation facilities, while those in Indonesia saved over 7 minutes. However, the impact of these improvements goes beyond just the minutes saved. Time savings from improved

WASH services can create opportunities for other important activities, such as attending school or work.

Figure 4: Time spent per trip to access water/sanitation facility pre- and post-implementation



Women report improved quality of life, with enhanced well-being, pride, dignity, and social status, leading to reduced stress for many. In India, 89% of respondents and 63% in Indonesia report feeling better overall, with 78% in India and 56% in Indonesia experiencing less stress due to reduced wait times or improved water access.

Table 1: Changes in Self Worth Themes

Observed Changes	Percentage of Female Respondents Who Observed Improvement	
	India (N=1185)	Indonesia (N=385)
Well- Being	89.36%	63.38%
Pride/Dignity	87.69%	53.51%
Social Status	90.42%	37.40%

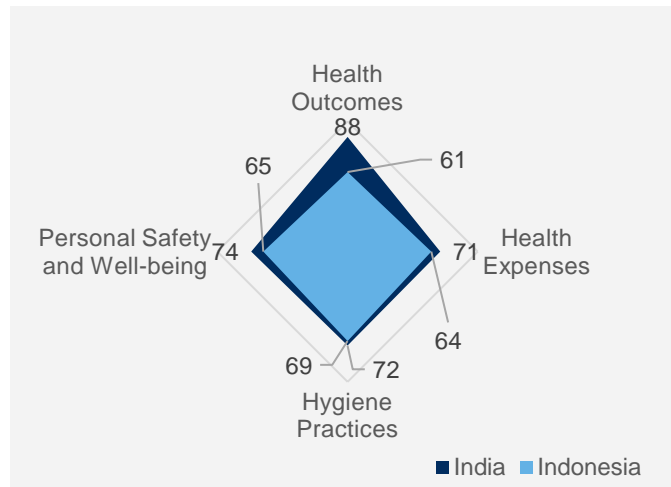
The evaluation shows some positive impacts of WSS loans on perceived economic welfare, with 62% of respondents attributing increased income to improved health and fewer absences from work. Additionally, about 80% of respondents in India reported reduced costs for water-related illnesses, and a small percentage in both countries (21% in India, 9% in Indonesia) used the improvements for income-generating activities like agriculture, small businesses, and laundry services.

Women report notable changes in the health of their households. The evaluation assessed health improvements across four dimensions: frequency of illnesses, reduced healthcare expenses, improved hygiene practices, and overall personal safety and well-being. The radar chart (**Figure 5**) illustrates these findings, revealing that borrowers in India reported fewer

illnesses, lower healthcare costs, and better hygiene and safety. While Indonesia also showed positive outcomes, the improvements were less pronounced.

Figure 5: Health, Safety, and Well-being impact overview: India and Indonesia

The radar chart is scored on a scale of 0 – 100, where 0 aligns with the lowest performance of the dimension, and 100 being the best possible outcome of the dimension, where all respondents have the most positive responses.



Participation in educational activities leads to improved hand-washing behavior. PMV data reveals borrowers participated in educational and awareness activities related to WASH facilities in both India and Indonesia, 53% and 46% respectively. There was improved handwashing behavior overall, with 61% of water-related loan borrowers who joined WASH education activities reporting increased handwashing practices.



Conclusion

Thanks to support from Reckitt, the program significantly overachieved its goals in both India and Indonesia, underscoring the critical role of the private sector in driving scalable impact by closing the WASH financing gap. The evaluation also highlights the program's transformative impact on beneficiaries, improving not only access to water and sanitation but also their sense of safety, health, and overall well-being. By aligning these co-benefits to the WASH Benefits Accounting Framework, the evaluation also identified areas for improvement, offering valuable insights to guide future programs.

Key recommendations

The evaluation identified key areas for improvement to strengthen future programming:

- **Programmatic gaps:** Only ~30% of all respondents have participated in Financial Education trainings. Involving beneficiaries in MFI-led awareness initiatives would help address this gap.
- **Social impact gaps:** Some women in India report lacking autonomy in using toilet facilities. Future surveys could explore the reasons behind this and investigate barriers such as the need for permission or accompaniment.

Additionally, as this evaluation pilots the WASH Benefits Accounting Framework, the following recommendations may help enhance this standardized framework for future programs:

- **Improved usability:** Make the Framework more accessible by creating a template for developing a Theory of Change, and mapping output and outcome indicators in spreadsheet form.
- **Revised indicators:** Revise core indicators, like health outcomes, so they can be easily quantified in economic terms.
- **Decision guides:** Develop guides to help tailor evaluation methods based on the feasibility and availability of relevant indicators.

