For all of the questions/items below, consider whether your answer depends on whether we’re talking about rural versus urban communities, and whether we’re focused on water supply versus sanitation.

What do we expect from a W&S service provider? For what functions and/or conduct do we expect the service to be accountable? (And what is accountability anyway?)

What kinds of institutional arrangements do we tend to see for W&S service delivery in (a) urban areas and (b) rural areas?

Among the various institutional options, do we have a priori expectations about which are more likely to result in the kind of service delivery we’re looking for? Why?

One theme that appears repeatedly in the W&S literature for developing countries is the close ties that service providers have with elected leaders. What effects does this feature of the W&S sector have on service delivery in the developing world and why (i.e., what are the particular mechanisms by which this influence is exerted)? Are there effective and feasible strategies for dealing with this challenge?

There have been several different policy/planning responses to the existence of small-scale independent providers in developing countries, ranging from outright prohibition to efforts to coordinate and support them. What is your opinion about the appropriate role for these providers in the W&S sector of developing countries? (If your answer is “it depends,” what situational features would determine your recommendation in a particular case?) Are small-scale providers ever a “first best” long-term solution for W&S service provision in developing country communities?

Why might we consider private-sector participation instead of, say, institutional restructuring wholly within the public sphere as a strategy to improve W&S service delivery?