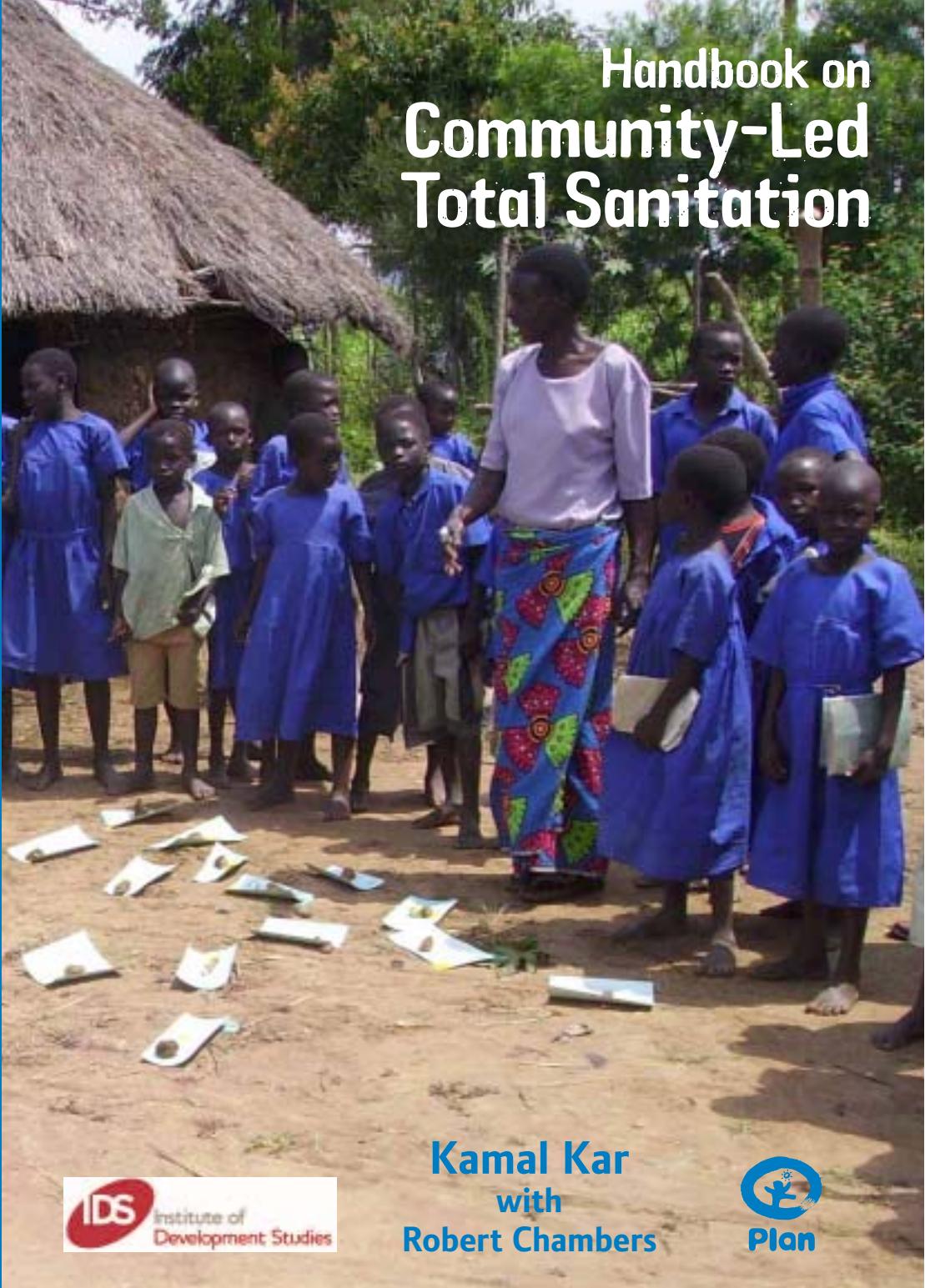


# Handbook on Community-Led Total Sanitation



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**Plan UK** is a child-centred community development organisation with no religious or political affiliations. We make long-term commitments to children in poverty and assist as many children as possible, by working in partnerships and alliances with them, their families, communities, civil society and government, building productive relationships and enabling their voices to be heard and recognised in issues that affect them.



ABOVE ODF celebrations on World Toilet Day in Kilifi, Kenya.  
Photo: Jonathan Mativo, Plan Kenya.

FRONT COVER Children mapping open defecation areas in Tororo, Uganda. Photo: Philip Otieno, Plan Kenya.

RIGHT Locally available low-cost materials in combination with externally procured sanitation hardware used in designing second generation toilets in ODF villages of Bangladesh.

## About the authors

**Dr. Kamal Kar** is a specialist in livestock production, agriculture and natural resources by training, with special interest in Social and Participatory Development. He has worked as an independent consultant in South and South East Asia, Africa and Latin America for bilateral, multilateral and international agencies, including the World Bank, WSP, the Asian Development Bank, DFID, UNICEF, UNDP, Ireland Aid, GTZ, and a number of International NGOs, including CARE, Plan International and WaterAid. Dr Kar has pioneered a number of innovative approaches in natural resources management and low cost appropriate technologies in farming. He has also been a leading figure in the field of collective management of pasture and natural resources (Nukhurluls) in the Gobi region in Mongolia and Community-Led Total Sanitation in Bangladesh, India, Pakistan, Indonesia, Cambodia, Nepal, Ethiopia, Kenya, Zambia, Uganda and Tanzania. Other areas of work include urban poverty, slum improvement, and local governance in India, Mongolia, Bangladesh and Cambodia. Dr. Kar is a visiting Fellow with the Knowledge, Technology and Society Team of IDS, University of Sussex. He is also a founder member of the International Federation for Women in Agriculture (New Delhi).



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# Handbook on Community-Led Total Sanitation



**Kamal Kar with Robert Chambers**

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This handbook has been developed from experiences with Community-Led Total Sanitation (CLTS) since December 1999. These have been in Bangladesh, India, Cambodia, Indonesia, Mongolia, Nepal, China and Pakistan in Asia; in Uganda, Zambia, Ethiopia, Tanzania, Kenya and Sierra Leone in Africa; in Bolivia in South America; in Yemen in the Middle East; and in other countries. Users of this handbook must feel free to use its guidelines the way they find best. The methods described are not the only ways of implementing CLTS. Users are encouraged to use their own best judgments at all times and innovate locally appropriate approaches and tools to achieve and enhance community participation and empowerment leading to total sanitation and beyond .

**Kamal Kar**

March 2008

All photographs by Kamal Kar except where specified.

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# Definitions

**Certification** is the official confirmation and recognition of ODF status.

**CLTS** refers to Community-Led Total Sanitation. This is an integrated approach to achieving and sustaining open defecation free (ODF) status. CLTS entails the facilitation of the community's analysis of their sanitation profile, their practices of defecation and the consequences, leading to collective action to become ODF. Approaches in which outsiders "teach" community members are not CLTS in the sense of this handbook.

CLTS processes can precede and lead on to, or occur simultaneously with, improvement of latrine design; the adoption and improvement of hygienic practices; solid waste management; waste water disposal; care; protection and maintenance of drinking water sources; and other environmental measures. In many cases CLTS initiates a series of new collective local development actions by the ODF communities.

**Latrine and toilet:** A latrine is typically a direct pit, and a toilet is typically an arrangement with a water seal. In this handbook latrine is sometimes used to include both.

Toilet is used where a water seal is likely to be more common than a direct pit.

**Natural Leaders (NLs)** (also known as Spontaneous Leaders in Bengali) are activists and enthusiasts who emerge and take the lead during CLTS processes. Men, women, youths and children can all be natural leaders. Some natural leaders become community consultants, and trigger and provide encouragement and support to communities other than their own.

**OD** means open defecation – defecating in the open and leaving the stuff exposed. **ODF** means open defecation free, that is, when no faeces are openly exposed to the air. A direct pit latrine with no lid is a form of open defecation (fixed point open defecation), but with a fly-proof lid (with or without the use of ash to cover the faeces after defecation) qualifies as ODF. Defecating into a trench and covering the faeces can be part of the transition from OD to ODF.

**Verification** refers to inspection to assess whether a community is ODF (compare certification).

# Abbreviations

<b>CLTS</b>	Community-Led Total Sanitation
<b>IRSP</b>	Integrated Rural Support Programme, Mardan, Pakistan
<b>NGO</b>	Non-Governmental Organisation
<b>NEWA</b>	Nepal Water for Health
<b>NL</b>	Natural Leader
<b>NWFP</b>	North West Frontier Province, Pakistan
<b>OD</b>	Open Defecation
<b>ODF</b>	Open Defecation Free
<b>PRA</b>	Participatory Rural Appraisal
<b>RESA</b>	Regional Eastern and Southern Africa office of Plan International
<b>RTI</b>	Refugee Trust International, Irish NGO working in Ethiopia
<b>SDU</b>	Social Development Unit
<b>SFD</b>	Social Fund for Development, Yemen
<b>SNNPR</b>	Southern Nations Nationalities and Peoples' Region, Ethiopia
<b>SOUHARDO</b>	Strengthening Household Abilities to Respond to Development Opportunities
<b>UNICEF</b>	United Nations Children's Fund
<b>VERC</b>	Village Education Resource Centre, Bangladesh
<b>WSLIC</b>	Water and Sanitation for Low Income Communities
<b>WSP-EAP</b>	Water and Sanitation Programme-East Asia and Pacific
<b>WSP-SA</b>	Water and Sanitation Programme-South Asia



Digging for dignity, Homa Bay, Kenya.  
Photo: Philip Otieno, Plan Kenya



## Chapter 1.

# INTRODUCTION AND BACKGROUND

### ***The Genesis, Spread and Scaling-Up of CLTS***

The CLTS approach originates from Kamal Kar's evaluation of WaterAid Bangladesh and their local partner organisation – VERC's (Village Education Resource Centre is a local NGO) traditional water and sanitation programme and his subsequent work in Bangladesh in late 1999 and into 2000. This led to the discovery of the CLTS approach in which use of PRA methods enables local communities to analyse their sanitation conditions and collectively internalise the terrible impact of OD on public health and on the entire neighbourhood environment. (See APPENDIX A Page 76) for details. When triggered systematically and combined with 'no-hardware subsidy' policy and a hands-off approach by the facilitator, CLTS could provoke urgent collective local action to become totally ODF. A new style of facilitation has evolved. In its classic form, this uses the crude local word for "shit" and encourages local communities to visit the dirtiest and filthiest areas in the neighbourhood. Appraising and analysing their practices shocks, disgusts and shames people. This style is provocative and fun, and is hands-off in leaving decisions and action to the community.

***'Who shits where?' Community members in Tororo, Uganda, map places used for open defecation.***  
***Photo: Philip Otieno, Plan Kenya.***

Since 2000, through hands-on training by Kamal Kar, and through the support of many agencies and assisted by cross-country visits, CLTS has spread to other organisations in Bangladesh and to other countries in South and South East Asia, Africa, Latin America and the Middle East. Committed champions in organisations have played a crucial part. To date, CLTS has gone to scale most in Bangladesh, India, Cambodia, Indonesia and Pakistan. It has also been introduced through these trainings with varying degrees of take up in China, Mongolia, and Nepal. More recently it has been sparked off with promising starts in Ethiopia, Kenya, Zambia and other countries in Africa, in Bolivia in South America, and Yemen in the Middle East. The agencies sponsoring these trainings by Kamal Kar include amongst others, the WSP-World Bank, CARE, Concern, WSLIC II (Water and Sanitation for Low Income Communities in Indonesia), the Bill and Melinda Gates Foundation-supported Total Sanitation and Sanitation Marketing project in East Java, the Social Fund for Development in Yemen, the Irish NGO Vita Refugee Trust International working in Ethiopia, Plan International and UNICEF.

## Why this handbook?

Initially the focus of CLTS was on the triggering or igniting event. Kamal Kar's Practical Guide to Triggering Community-Led Total Sanitation (CLTS) published by the Institute of Development Studies, in November 2005, is about "How to ignite CLTS". It has been in wide demand and has been translated into Amharic, Arabic, Bahasa Indonesia, Chinese, Bengali, Hindi, Khmer, Marathi, Nepali, Spanish, Swahili and Urdu and other languages. There is, though, much more to effective CLTS practice than just the triggering, dramatic and central to much good practice though that is. There has been mounting need and demand for a source to bring together experience and advice to cover pre-triggering, the crucial activities of post-triggering and scaling up, and going beyond CLTS. At the same time, triggering methodology has been sharpened and enriched. This handbook is an attempt to bring together experience, diversified practice and local innovations from different countries and many sources, and to meet some of that need. It supersedes the earlier guidelines, but not those produced nationally or locally by trainers and practitioners who have adapted and evolved them for their local conditions. In updating and revising those, however, there may be material here that could be drawn on.

This handbook has been compiled as a source of ideas and experiences that can be used for CLTS orientation

workshops, advocacy to stakeholders, training facilitators and natural leaders and implementing CLTS activities. It is a resource book especially for field staff, facilitators and trainers for planning, implementation and follow-up for CLTS.

Users of this handbook must feel free to use its guidelines in the way they find best. The methods described are not the only ones for implementing CLTS. Users are encouraged to explore different ways of preparing for CLTS, for triggering, for post-triggering follow-up, and for supporting and spreading CLTS that fit with local conditions, cultures and opportunities. Facilitators must feel free to be inventive and adaptive, and to use their own best judgment in deciding what to do. The ideas and advice that follow have been tried and tested, but it is for facilitators themselves to decide what works for them. The basic principle is the empowerment of local communities to do their own analysis and take their own action to become open defecation free.

## Community-Led Total Sanitation

Community-Led Total Sanitation (CLTS) focuses on igniting a change in sanitation behaviour rather than constructing toilets. It does this through a process of social awakening that is stimulated by facilitators from within or outside the community.

It concentrates on the whole community rather than on individual behaviours. Collective benefit from stopping open defecation (OD) can encourage a more cooperative approach. People decide together how they will create a clean and hygienic environment that benefits everyone. It is fundamental that CLTS involves no individual household hardware subsidy and does not prescribe latrine models. Social solidarity, help and cooperation among the households in the community are a common and vital element in CLTS. Other important characteristics are the spontaneous emergence of Natural Leaders (NLs) as a community proceeds towards ODF status; local innovations of low cost toilet models using locally available materials, and community-innovated systems of reward, penalty, spread and scaling-up. CLTS encourages the community to take responsibility and to take its own action.

In its fullest sense, total sanitation includes a range of behaviours such as: stopping all open defecation; ensuring that everyone uses a hygienic toilet; washing hands with soap before preparing food and eating, after using the toilet, and after contact with babies' faeces, or



**Procession of children shouting slogans against open defecation in a village in Ibb Governorate, Yemen.**

community cooperation and creates new examples of social solidarity and cooperation between rich and the poor in achieving ODF status

- ▶ Engages men, women, youth and children in a time-bound campaign and local action to end OD followed by general cleaning up
- ▶ Often through the collective drive of communities attracts local leaders, elected people's representatives, the local government and NGOs to help, support, encourage and spread ideas
- ▶ ODF communities gradually move up along the sanitation ladder and improve structure and design of their toilets through better linkages with the local businessmen and traders/dealers of sanitation hardware
- ▶ Often ODF communities don't stop at achieving ODF status but move on to achieving other collective common goals like 'no hunger or starvation in the village', 'no children without school enrolment and all going to school' 'equal wages for all labours and reduced inequality of men's and women's labour' etc.

As with the spread of PRA in the 1990s, the name and label have increasingly been adopted without the substance. A major hope for this handbook is that it will inspire trainers, practitioners, managers and policy-makers to ensure high standards of preparation, facilitation and follow up support; and that it will discourage target-oriented approaches which degenerate into counting latrines and meeting targets for their construction, instead of assessing with rigorous standards the numbers of communities that truly achieve ODF status.

## When it occurs well, CLTS

- ▶ Is total, meaning that it affects all in the community and visitors as well
- ▶ Is based on collective community decision-making and action by all
- ▶ Is driven by sense of collective achievement and motivations that are internal to communities, not by external subsidies or pressures
- ▶ Leads to the emergence of new Natural Leaders and/or highly encourages new commitment of the existing leaders who do not need or follow a blue print, but do things their own way
- ▶ Generates diverse local actions and innovations
- ▶ Revives traditional social practices of self-help and

## Two conditions are crucial:

### 1. The attitudes and behaviour of facilitators

Not everyone can be a good facilitator. Facilitating CLTS is an aptitude. It can be learnt, but it will come more naturally to some than to others. It is different from facilitating conventional participatory processes like PRA. Behaviour and attitudes are crucial. What works best for triggering CLTS is a combination of boldness, empathy, humour and fun. It demands a hands-off approach, not teaching or lecturing, but facilitating to enable people to confront their unpalatable realities.

### 2. The sensitive support of institutions.

Not every organisation is suitable for promoting CLTS. Institutional support needs to be consistent and flexible.

## BASICS: THE KEY ATTITUDES AND BEHAVIOUR

DO	DON'T
Facilitate their own appraisal and analysis of local sanitation profile	<b>Educate, lecture or tell people what to do.</b>
Let people realise for themselves through their own analysis	<b>Tell people what is good and bad.</b>
Facilitate to trigger self-mobilisation	<b>Push for, or demand action</b>
Stand back, leave it to local leaders	<b>Be in charge</b>
Be cool and allow conversation between insiders– approaching the triggering moment	<b>Interrupt when charged up community members start shaming their own people for open defecation practices or other hygiene behaviour</b>
Take a neutral stand and allow heated discussion for and against OD between them. Remember these are right indications and symptoms of approaching triggering moment.	<b>Discourage members of the community from arguing amongst themselves or shaming each other, or quickly conclude that the 'shaming' element between community members should be avoided as culturally insensitive</b>
Appreciate those who take a lead and engage themselves	<b>Overlook natural emerging natural leaders</b>
Always encourage women and the poorer sections of the community to participate	<b>Overlook women, children and others who often get left out</b>
Appreciate community members' offers to help poorer members	<b>Overlook people who come forward to help</b>
Let people innovate simple latrines	<b>Promote particular latrine designs.</b>
Trigger local action, encourage self-help	<b>Offer hardware subsidy</b>
Be bold yet cautious	<b>Be too humble or too polite. Don't try to convince too politely</b>
Listen attentively to everything	<b>Interrupt</b>

Any top-down target and disbursement-driven approach is liable to undermine CLTS, though general sanitation campaigns can be effective provided they are used in a 'community empowerment' mode rather than a 'prescriptive' and 'target achievement' mode. Two big dangers are too much money, because CLTS needs relatively little, and rapid recruitment and inadequate orientation, training and socialising of staff. This demands a form of restraint that is difficult in many bureaucracies. (See box left: Basics the key attitude and behaviour).

### The sequence of steps

The following is a rough outline of sequence of steps which could be followed, and tools that could be applied in triggering CLTS in villages. This is definitely not the only way of doing it but some essential elements will be emphasised. Please feel free to modify and change in

accordance with the situation, but the DOs and DON'Ts are important.

#### Pre-triggering

Selecting a community  
Introduction and building rapport

#### Triggering

Participatory sanitation profile analysis  
Ignition moment

#### Post-triggering

Action planning by the community  
Follow up

#### Scaling up and going beyond CLTS



Scaling up

Post-Triggering

Triggering

Pre-Triggering



## Chapter 2

### Pre-Triggering

#### SELECTING A COMMUNITY

##### **This is a crucial stage.**

Communities respond to CLTS triggering in different ways. Some are inspired to make changes immediately while others are reluctant or undecided at first but come round after seeing or hearing how other communities have changed. In general, the more successful villages have enthusiastic leadership. This is sometimes a traditional leader, but often new leaders emerge. These Natural Leaders may be many sorts of people – poor, wealthy, women, men, youth, respected people with skills who provide services like village midwives, religious leaders, teachers and so on.

Besides leadership, many other local social, physical and institutional conditions affect the prospects for triggering. Responses vary widely (See Pages 38-39) from the explosive “Match box in a gas station” to the dismal “Damp matchbox”. To help choose where to start, many sources and people have contributed to the following list of favourable and more challenging conditions. Triggering has been successful in conditions that were thought unpromising. However, you may be wise to start in more favourable places first, establish some success stories, gain experience and confidence, and then use these and their Natural Leaders to spread the movement to more difficult places. This list may help you in your choices. As ever, use your own judgement.

Remnants of demolished floating latrines by ODF communities. Sambas, Western Indonesia.



### A three-day process with meeting and rapport through a survey – the Panipat approach

In Panipat District in Haryana, India, teams of 6 to 7 full-time CLTS facilitators start in a village with a day of survey. They visit, meet and chat with every household, and record their details on a short proforma. This provides baseline information, but more importantly helps the team learn about the community and establishes rapport. A good feeling is also generated at the end of the survey interview by giving a long handled plastic ladle for hygienically drawing water from a pitcher. This protects the drinking water from being contaminated by dipping unclean hands. The ladle is given to each family as a token of thanks for their time and cooperation. Community members are then invited to a meeting usually on the next day, when triggering takes place. On the third day a Village Water and Sanitation Committee is convened and has a planning and action meeting

Source: Dr Amit Agrawal I.A.S.

## A. More favourable

- small settlement (hamlet rather than big village)
- remoter rather than closer to towns and big roads
- socially and culturally homogeneous
- lack of cover in the surrounding area
- wet/moist conditions which wash excreta around and keep it smelly and nasty
- unprotected vulnerable and currently polluted water supplies, as in some mountainous areas
- no current, previous, nearby or national programme of hardware subsidies to households
- visibly filthy conditions
- high incidence of diarrhoeal diseases and child mortality
- young and progressive local leadership
- existence of active groups within the community

## Programme policy environment

- where there is no programme of hardware subsidies to households and none is proposed.
- where CLTS triggering facilitators are strongly motivated, well trained, have appropriate attitudes

and behaviours, and are flexibly supported by their organisations

- where there is provision for follow up encouragement and support after triggering
- supportive political leadership and conducive local government machinery

## Current conditions and practices

- visibly filthy and disgusting conditions where faecal contamination is offensive
- where defecation is constrained by lack of privacy
- where there are no or few private, accessible or convenient places to defecate
- where faeces have no or little economic value
- where conditions and practices present good opportunities for triggering questions and processes, e.g. people can analyse how they eat their own shit, and bathe in the shit of others . . .
- where during rains or the night, people shit nearby

## Physical conditions

- soil is stable and easy to dig

**Slums in the outskirts of Ulaanbaatar in Mongolia – Locations where sources of water get contaminated with human excreta are important points to stop during a defecation area transect and discuss with the community.**

- fairly low water table and no periodic inundation/ flooding
- settlement patterns provide adequate space
- nearby wells will not be polluted
- water supplies are unprotected and vulnerable to contamination

## Social and cultural conditions

- much sickness, especially diarrhoea, and child mortality
- small size of settlement and community (hamlet rather than bigger village)
- socially homogeneous community with high cohesion
- serious restriction on women's movement and 'purdah' where women have to shit in buckets in their homes and empty them in the dark
- a strong tradition of joint action

- women have a voice
- progressive local leadership

## B. More challenging

Conditions may be more challenging where there is/are some of the following, especially when they combine. The question to ask is whether combinations of these make a community or area less suitable for early triggering, which should then come later.

- large settlement
- close to towns and main roads
- socially and culturally diverse
- with much surrounding cover
- desert conditions in which excreta dry and disintegrate
- well protected sources for pure water
- a current, previous or nearby or national programme of hardware subsidy to households
- apparently clean conditions
- low incidence of diarrhoeal diseases and infant mortality

- ▶ old and reactionary local leadership
- ▶ lack of active groups in the community

#### Programme policy environment

- ▶ where there has been a recent or is a current programme for hardware subsidies to households, or one is thought or known to be proposed
- ▶ organisations with big budgets for subsidies, and targets and reporting based on latrines constructed
- ▶ opposition from the staff of such organisations
- ▶ lack of scope for follow up encouragement and support after triggering
- ▶ CLTS triggering organisations and staff with top-down teaching cultures and practices
- ▶ large programmes with big money to spend on hardware trying to adopt CLTS without changing the pattern and sequence of funding flow more flexibly

#### Current conditions and practices

- ▶ protected water supplies which would not benefit from going ODF
- ▶ existing use of nearby water that carries faeces away (stream, high or low tide of river or the sea)
- ▶ economic use of faeces for fish farming, application of raw shit in crops and vegetables
- ▶ private, accessible and convenient places to defecate (e.g. hanging latrines with running water)
- ▶ plenty of cover of bushes, trees and/or topography in surrounding area

#### Physical conditions

- ▶ hard rock in which it is difficult to dig
- ▶ highly collapsible soil
- ▶ settlement patterns where it is difficult to find space, and storage may fill up
- ▶ dangers of latrines polluting nearby wells
- ▶ dry area where excreta dry quickly and become inoffensive and harmless e.g. sandy deserts
- ▶ where there are regular opportunities to defecate unseen, as going distances for water, herding animals, fishing, or walking to school
- ▶ where farms are a long distance from the settlement

#### Social conditions

- ▶ where people are very healthy with little diarrhoea
- ▶ socially divided community with low cohesion
- ▶ where there is a weak tradition of joint action
- ▶ where women have little voice

Defecating in the river or canal is common in Indonesia. The same water is used for bathing and washing clothes.

- ▶ where taboos deter use of the same latrine by all family members
- ▶ where there is floating seasonal population in the settlement e.g. seasonal labourers, nomadic tribal people, poor marginal farmers who migrate to sell labour some times during the year
- ▶ where there is large proportion of tenants and lack of ownership

#### C. Depending on conditions, either more favourable or more challenging

- ▶ nucleated dense settlement
- ▶ cultural and religious values and beliefs

Where there is a choice, it can make sense at the start of a programme to initiate CLTS triggering in villages with some combination of favourable conditions. There are, though, innumerable examples of successful triggering in contexts with combinations of challenging conditions, including often where there has been an earlier programme of household hardware subsidy. Challenging conditions are simply what they are called – challenging. The challenges can be confronted and overcome. Many of



the means come later in the section on triggering, but to inform and encourage the reader, some of the key tips are brought together here in the (see box on Page 18/19).

#### Introduction and building rapport before the triggering appraisal

There is a wide range of approaches and experiences with preparation for triggering, but not enough has been recorded. This is an area which deserves more review and reflection. There are commonsense considerations like choosing suitable days, seasons, and times for meeting. Where a sponsoring NGO is already working with a community, less time may be needed for introduction

and building rapport. If there is no NGO, more time may be needed for explaining why you are there.

Careful preparations are always useful to help ensure that the participants in the 'triggering' meeting are truly representative of the wider community. It might so happen that the only people that come to these sorts of meetings are poor or only women and children or people from one particular pocket of the neighbourhood. For different reasons men, middle/upper class and more influential members of community may not be present in the triggering. Absence of people from all categories might weaken the collective power of the 'triggering' decision.

#### An indicative time frame for different stages of CLTS

(Urgency and early action in follow up are vital everywhere. Much depends on local conditions, and there will be much variation in what is appropriate)

Stage	Indicative Time-frame	Staff and other requirements	Additional remarks
Pre triggering preparations	Anything between half a day to one week In villages where there are programme interventions of NGOs /institutions, a couple of visits should be enough	Normally, at least one or two field staff visiting village/ community 1-2 times in advance to fix up time of visit, place of meeting, explaining objectives etc.	Meet local leaders, village chief, visit all hamlets/sub-hamlets, get an idea of the size of the village, population, locate most dirty and filthy areas, and know about history of subsidy if any. See if favourable or challenging village for CLTS triggering. Must avoid overlapping of triggering session with village market day, marriage in the village, condolence meeting etc
Triggering	All within a day (often between 3 and 5 hours)	A team of at least 3-4 facilitators, at the most 5, but can be more in a hands-on CLTS training workshop	Facilitate with an open mind and don't go with a pre conceived mind-set of definite & positive triggering outcome. Leave happily even if triggering doesn't result into collective local action for some reasons.
Post- Triggering	ODF status is achieved any time between 3 weeks and three months. Six months or one year are too long. The bottom line is 'we are not going to eat each other's shit'. Everyone would make all out efforts to get out of that situation.	Depending on local situation 1-2 staff visiting the CLTS triggered community 1-2 times in the first week, and then perhaps at wider intervals, enough to encourage and support, but not too frequent. Remember it is a community-led and not outside institution-led approach.	Be supportive and encourage and don't dominate. If required arrange visit for the Natural Leaders/community members to successful CLTS villages, or local sanitary marts etc. Invite NLs from ODF villages as resource persons for demonstration of low-cost latrines.

## How to deal with challenging situations – a few tips

'Unfavourable' or 'Challenging' doesn't mean that one shouldn't even try to implement CLTS in such villages. In fact most of the Plan villages in Bangladesh, Nepal, Tanzania, Ethiopia and Bolivia where CLTS was triggered for the first time or during early 'hands-on' staff training workshops belonged to the 'More Challenging' category. In other words, in most of those villages hardware sanitation subsidy at household level had been provided by Plan under the traditional sanitation approach. However open defecation was rampant in many of these villages and many toilets were not used. Interestingly most of those villages emerged as ODF after triggering of CLTS. Skillful facilitation during triggering and use of local judgement are necessary.

Some tips for triggering in such villages are as follows:

- Introduce yourself and the team members as a learning team (studying hygiene behaviour and reasons for open defecation practice) and not as sanitation agents promoting toilet construction with or without subsidy
- Make it absolutely clear to the community that you are not there to ask anyone to stop OD or change their present hygiene behaviour practices. Make it very clear that you are no way associated with providing subsidy or prescription of toilets.
- During the process of triggering (especially when people ask for household subsidy to construct toilets) humbly request them not to misunderstand you as sanitation agents trying to sell toilets or convince them to change their age old habits. They must feel free to continue open defecation if they like to. In extreme cases you could show them some of the unused latrines provided freely by other agencies in the past. Remind them that you understand that they decisively discarded use of latrines and wanted to continue open defecation and you didn't want to intervene in their local decision at all. They were free to continue OD. You just wanted to understand the reasons for the community decision to continue OD. That's all you wanted to learn from them.
- At the end of triggering exercise if you still don't notice any growing tempo amongst the community to fight OD collectively, ask them if you could take a picture of them or report in your study the name of their village where people are decisively eating each others shit and are willing to continue that. That's fine and unique. Why should they change their age old practice? They might say that they would stop OD soon. Tell them to feel free to continue OD and not to misunderstand you or get influenced.
- Encourage and empower them to decide for themselves what was good or bad rather than get influenced by outsiders even if they provide free cash or materials. Local people are the best judges for their village context.
- In most cases you will find immediate resistance from the community. Ask them to raise hands who would defecate in the open the next morning. If none raise hands, ask what they would do instead. Some might say that they would need time to construct simple pit latrines. Some might say that they would carry a shovel when they went out and would dig a small hole on the ground and would cover it with soil after defecation. Ask if every one would do that? What would be the immediate impact if all did that from tomorrow? Encourage and clap on their explanation.
- Ask everyone to clap every time anyone mentions any initiative to stop OD. Clap heavily and encourage others. It might so happen that some more people join the early initiators and raise hands. Clap them all. Ask if anyone else would do anything differently.
- Most likely someone would emerge from the crowd and declare that he/she would see the construction of a simple pit latrine. Ask when he or she would construct that. Ask if anyone would be interested to come and see the construction of simple pit latrine. Clap thunderously and encourage.
- Invite all those who took courageous decisions to initiate early action to come forward. Now ask them if you could take a group photo of the small group who wanted to stop OD and start immediate action? Request them to raise their hands and take a snap. After that seek their permission for another picture/photograph of the entire community covering the larger group who wanted to continue OD and a small group (who were separated from the large group) who wanted to stop it. A big tension and confusion might begin at this stage. Don't intervene; let them settle it themselves.
- At this stage you might find some one from the local community who was close to a local political party or power or associated with Govt./NGO subsidy/ material distribution programme acting as 'gate keeper' and trying to block/stop community from being self-mobilised. Such persons generally have vested interest who might control local community and allure them with free materials and goodies. Handle them carefully. Take them away and keep them busy with serious discussions. Tell them how knowledgeable he/she was and how much his/her information would help you understanding the sanitation profile and the local practice deeply. Offer him/her tea, cigarettes at place away from the triggering venue and listen and take note of whatever the person says.
- One of the easiest ways could be to locate a community very close to such 'challenging' villages which was not contaminated with subsidy and trigger CLTS there first. Once that one becomes ODF, it would be easier to trigger in the more challenging village then.
- Please feel free to innovate many other ways using your own best judgements. This is not very difficult.



## Chapter 3

# TRIGGERING

However, hundreds of CLTS triggerings have been in new villages in many countries without much difficulty. It can be good to initiate CLTS triggering in villages where there have been no earlier attempts for sanitation improvement. Experienced CLTS facilitators can do a good job of triggering in virgin villages.

### Facilitating community appraisal and analysis Background and basics for igniting CLTS

Triggering is based on stimulating a collective sense of disgust and shame among community members as they confront the crude facts about mass open defecation and its negative impacts on the entire community. The basic assumption is that no human being can stay unmoved once they have learned that they are ingesting other people's shit. The goal of the facilitator is purely to help community members see for themselves that open defecation has disgusting consequences and creates an unpleasant environment. It is then up to community members to decide how to deal with the problem and to take action.

Philip Otieno of Plan Kenya contaminating drinking water with shit before offering it to community members to drink during a hands-on CLTS training in Tanzania.  
Photo: Samuel Musyoki, Plan Kenya.

## Background and basics for igniting CLTS

Certain sections of the community will have reasons to want to change the status quo. For example:

- ▶ Families who do own toilets discover that they are just as prone to faecal-oral contamination due to the actions of those who don't.
- ▶ Landless people are often criticised and abused for defecating in other people's land.
- ▶ Women and young girls suffer the most from the lack of privacy in open defecation, often having to do it only before dawn or after dark
- ▶ Religious leaders realise the meaninglessness of wearing clean clothes as they are dirtied by flies that have been on human excreta.

The strong feelings of these different sections of the community are powerful drives to action to change a village to become ODF. They can be encouraged to form their own pressure groups to encourage others to change.



### Tip

**The key is the attitude and approach of the facilitator. It is also the skillfulness of the facilitator to clearly explain that this exercise is not an outsiders attempt to stop open defecation but for the insiders to analyse and take their own decisions. The decision to continue with open defecation and ingesting each other's shit by the insiders is also fine with the facilitators, but the name of the village would be added to the report about their new learning, if the insiders agree.**

**Feel free to innovate and try out new methods apart from those described below.**

Though the sequence of methods is not important, starting with a transect walk often works well.



ABOVE AND LEFT Woman facilitator from Social Fund for Development (SFD) Sana'a, triggering CLTS with village women in Ibb Governorate in Yemen.

RIGHT Participation of women facilitators in each CLTS triggering team is essential in Yemen, Pakistan and other Muslim countries. If conducive environment is ensured and triggering meetings are arranged indoors or in places where no men could see them, women participate spontaneously, express their views and initiate collective actions against OD.



## KEY DO'S

- DO TAKE
  - Flip chart
  - Coloured cards
  - Scissors
  - Masking tape
  - Marker pens
  - H2S bottles for testing water purity (faecal contamination and presence of salmonella and coliforms)
  - Camera
  - Coloured powders with adequate amount of yellow powder (for marking defecation areas) if not locally available
  - In case of non-availability of some of these items locally available materials like ash, saw dust, rice husk, chaff straw, leaves, grass etc can be used.

### DO HAVE WOMEN IN THE TEAM

The team must include women facilitators. Where women are confined and cannot participate with men (as in Yemen and NWFP in Pakistan) two women facilitators are a bare minimum.

### DO HAVE ROLES FOR THE TEAM. These may include:

- Lead facilitator
- Co-facilitator. There could be two co-facilitators where the lead facilitator does not speak the local language
- Content and process recorders
- One or more environment setters responsible for ensuring a conducive environment, including a suitable mapping place, assuring no chaos, no mobile phones, controlling gatekeepers, assuring that there is no lecturing, arranging women's, men's and children's groups, having energisers if needed . . .
- All the team are to watch for emergent natural leaders and encourage them to speak up and take a lead.

## Approach

DO FACILITATE ANALYSIS that ignites a sense of disgust and shame. The most important elements that ignite CLTS are disgust, embarrassment, a sense of un-cleanliness, the impurity that is bad in many religions, and (especially for women) inconvenience due to lack of privacy. These often impel people to end OD and practice hygienic fixed-point defecation.

DO ASK QUESTIONS. There are many ways of helping to trigger disgust among community members without

teaching or telling them anything. Be creative in the questions you ask. (For sample questions please see APPENDIX-D)

DO INVOLVE CHILDREN in the discussion and ask them do they like to defecate in the open? Do they think of that as a good or bad practice? If not good, what they will do to stop open defecation? Often children start processions shouting loud slogans against OD. Encourage these activities. They find it great fun.

DO NOT LECTURE or try to educate the community about the diseases caused by open defecation, flies as agents of contamination, or the need for hand-washing at this stage.

DO NOT ever talk of any subsidy. Tell people clearly that you are not there to provide any subsidy or to suggest latrine models. (Please see box above 'Tips for dealing with challenging situations')

### Getting Started

The usual advice for village work applies. Do not dress ostentatiously. Be friendly. Be relaxed. Don't rush. Be open and build rapport with those you meet. Be observant. Listen. Appreciate good things of the community – praising good things first makes it more acceptable to raise issues later that disgust and make people ashamed, and to ask the direct questions of CLTS triggering.

When you arrive at the village introduce yourself. Explain the purpose of your visit. If questioned, you may find it useful to tell the community that you and your team are studying the sanitation profile of villages in the district. You are trying to find out the number of villages where people are practising open defecation and know the effects of this practice.

There are many different ways of initiating a discussion on open defecation and village sanitation. You can often start discussion with a few community members during an informal walk through the village. You can start with just a few people who you meet on the way and ask them to walk with you behind the houses, in the bushes, near the river or other open places where people generally defecate. A small gathering in such odd places will soon attract others.

You can start to ask questions like: 'Is this the place where most people of your village shit? Where else? Whose shit is this?' Ask them to raise their hands if

they have defecated in the open today and then suggest they go back to the spot where they defecated this morning and see if the shit is still there. Many will say that it is not there any more. If you ask them what could have happened, some will say that dogs and pigs have eaten them. Ask whose dogs? Ask when the dogs come back home, how do they smell and do they lick members of the family or play with the children? Once their interest is aroused you can encourage them to call other members of the community together. You will also need to find a place where a large number of people can stand or sit and work.

Make sure that most people gather at the CLTS triggering site and most hamlets of the village are well represented. The following could be done:

- Ringing bell (was found effective in Kenema district of Sierra Leone)
- Announcement through the microphone of Gurduara and Temples (was found effective in Punjab and Haryana states in India)
- Inviting people through the public address system/ microphone of the Mosque is common in many countries
- Send children to different directions of the village to announce the start
- Transect walk before mapping is sometimes useful to attract people. As you walk along the village roads, lanes and by lanes, invite everyone you meet on the way. Talk to people who join you during the walk. Others will be interested to join as they see stranger talking and walking with their friends and relatives.

### DO convene and facilitate

DO ask people what the local words for 'shit' and 'shitting' are, and then always use those terms.<sup>1</sup>

DO NOT use the nice, polite words but use people's own crude terms throughout.

### DO NOT hesitate to use the raw terminology.

Once you have met and gained the interest of at least a good part of the community, the next stage is to convene a meeting. Ideally those who come will be women, men and children, and people from all groups within the community. The aim is to facilitate their comprehensive appraisal and analysis of habits and effects of defecation and sanitation practises in their community, using PRA (Participatory Rural Appraisal) tools and methods.

To get started, ask for a show of hands for questions like: 'Who has defecated in the open today?' and 'Have you seen or smelt human shit in your village today?'



The suitable places for open defecation are identified by the local communities during a defecation area transect. Members of local community of a village in Ibb Governorate in Yemen leading a OD transect team to show potential places frequented by people in the morning and evening.



Within a short time the community took the team to a place far down the hill which was literally filthy and full of garbage, shit and plastics. This was also the main water collection point for the village. The place was right below the village Mosque which had no toilet or wash place. People visited the mosque a number of times each day and many defecated and washed themselves before going to pray. Discussion on the spot acted as a very powerful trigger.



ABOVE Walking through the bush to find the stuff! Rural community near Awassa, Ethiopia leading a OD transect team.



LEFT Children know all the locations of OD very well. Village children in Ibb Governorate, Yemen on a defecation area transect walk.

In one triggering, in a village in Himachal Pradesh, people wanted to conceal their practices and said there was no OD. When asked to raise their hands if they practised OD, no hands were raised. They were then asked to close their eyes and think about their children. They were also asked to reflect if anyone thought OD harmed their children. They were asked again whether they thought there was OD in their village. If so they were told to raise their hands. 30 out of 50 did so.

Source: Shashi Bhushan Pandey, Knowledge Links

Drivers and their helpers can help triggering. In a village in Himachal Pradesh, the community claimed that they were ODF, although OD was a common practice. The driver's young helper was briefed by a facilitator to say that he urgently needed to relieve himself. He then asked a villager for an open place where he could defecate. One villager quietly indicated a spot and asked the helper to go there. He urged the driver not to disclose it to anyone. The helper went, saw the place full of shit, and tipped off the facilitator. The facilitator led the transect walk to the area. Only a young woman agreed to accompany him while others declined. She was newly wed and had come to the village a week before. She was horrified at what she saw – heaps of accumulated shit in a vertical-sided gully, and vomited with disgust. Water flowing close to the shit was being pumped up to a tank for gravity distribution. She said she would ask all girls marrying into the village to insist on a toilet, and challenged the community over trying to hide this from outsiders.

Source: J.P. Shukla, Knowledge Links

## Defecation area transect

Transect walks are the single most important motivating tool. The embarrassment experienced during this 'walk of disgust' can result in an immediate desire to stop open defecation and get rid of these areas. Even though everyone sees the dirt and shit every day, they only seem to awaken to the problem when forced by outsiders to look at and analyse the situation in detail.

A transect walk involves walking with community members through the village from one side to the other, observing, asking questions, and listening. During a transect walk for CLTS you could locate the areas of open defecation and visit the different types of latrines along the way. Try to understand with the community what constitutes an 'unhygienic' latrine. Visit latrines which are not covered or where the faeces are draining out in the open. Flash a torch through the hole of open

### Tips

#### On the transect walk:

- Ask questions like about which families use which areas for defecation, where women go, and what happens during emergency defecation at night or during high incidence of diarrhoea. Sometimes people point out whose shit it is
- Do not avoid the defecation areas, but rather spend as much time there as possible in them, asking questions, while people inhale the smell of their shit and feel uncomfortable at having brought an outsider there. This will help to trigger the sense of disgust and shame that will make them want to do something to change. If no shit is visible, this may be because of so much diarrhoea which simply soaks in or in rains washes away
- Draw attention to the flies on the shit, and the chickens pecking and eating the shit. Ask how often there are flies on their, or their children's, food, and whether they like to eat this kind of local chicken
- Look out for solid and liquid shit, and ask why not all the shit has shape and form. Often the liquid is closer to the dwellings, where children and adults are more likely to be infected.

pit latrines and ask some people to look inside and say what they see. Ask if flies were being produced inside the pit and if it was safe to leave the pit open.

The key is standing in the OD area, inhaling the unpleasant smell and taking in the unpleasant sight of shit lying all over the place. If people try to move you on, insist on staying there despite their embarrassment. Experiencing the disgusting sight and smell in this new collective way, accompanied by a visitor to the community, is a key trigger for mobilisation.

In a village in Mardan, NWFP Pakistan, a defecation area transect group discovered plenty of semi solid and liquid shit scattered very close to the dwelling houses. One of the members of the community who was walking the transect concluded that the incidence of diarrhoea was very high and that as a result the children and men could not go to a distance to defecate and had squatted near the houses as an emergency. This clearly indicated that more than half the population was suffering from clinical and sub-clinical levels of diarrhoeal disease.



Rural Community in Hetauda, Nepal used coloured cards to indicate locations of better off, medium and poor households. Notice the yellow cards indicating poor households are clustered around the fringes and outer margins of the village. Better-off families visit these areas every morning to defecate in the open. For the first time the poor/ lower cast realised why their neighbourhood was dirty and filthy. They also realised why people of higher cast visit areas where many households raise pigs in free range. The poor warned the better off to stop OD in their neighbourhood from the next morning or else face consequences . . .



ABOVE An exclusive mapping exercise with the children is in progress in Shebadino village near Awassa in SSNP Region in Ethiopia. This triggered CLTS that was primarily led by children and very powerful Child Natural Leaders emerged from the exercise.

LEFT In a well facilitated CLTS triggering process, many people work on the map together and indicate their households, areas of open defecation and calculate amount of shit produced by the respective households. Mapping in progress in a village in Ibb Governorate in Yemen.



### Mapping of defecation areas transect walk

Facilitate the community to make a simple map on the ground showing households, resources, defecation areas, water points and problems, to stimulate discussion. Ask them to choose a suitable large open area for this. The mapping gets all community members involved in a practical and visual analysis of the community sanitation situation.

In the mapping exercise, all households should be invited to locate their dwellings on the map, for example by marking the ground, or locating a leaf or stone, and to show whether they have a latrine or not. The areas of open defecation can be shown with a coloured powder, and lines drawn to connect them to the households that visit them. The map can be used to highlight many things. Draw attention to how far some people have to walk to defecate and at what times of day. Are there any safety issues? Ask people to trace the flow of shit from places of open defecation to ponds and other water bodies, resulting in their contamination.



ABOVE AND LEFT Women in villages in Ethiopia and Tanzania engaged in defecation area mapping including the places of emergency defecation. The amount of medical expenses for treatment of diarrhoea, dysentery etc is also written on the cards against each household.



BELLOW As the CLTS facilitators asked about areas of emergency defecation and defecation at work, the size of the village map extended far beyond the boundary which was made initially. This revealed new realities of defecation in Samba (agricultural farm).





ABOVE Women in an Andean village in Bolivia mapping their defecation areas; 'Who shits where?'

RIGHT Women in a Bolivian village using woollen thread to draw a village map on the ground and show areas of OD.



ABOVE AND RIGHT Yellow powder on the map shows defecation areas. As the CLTS triggering process moves on and community indicate areas of emergency defecation, yellow patches on the map spread and increase. Anxious members of community looks on in a village in Bolivia. Be alert for capturing spontaneous comments of disgust and individuals wanting to stop all these.



## Facilitating mapping to be focussed, fast and fun

Sometimes an ideal mapping exercise takes a long time. When people get involved in mapping their village, they tend to go into finer details for each household, like the number of men, women and children in the family, each lane and by-lane and so on. Often detailed information related to demography, socio-political aspects, infrastructure and institutions may not be necessary for triggering CLTS. One should be careful about time management. Time spent at the early stage eliciting unnecessary information might create a serious time crisis at the most crucial stage of ignition.

In order to trigger CLTS in a fairly reasonable time (within 3-4 hours) I have tried out a much quicker methodology for participatory mapping of defecation areas. This could be accomplished in half an hour to an hour's time depending upon the number of households in the village.

### Quicker Methodology:

- ▶ Ask villagers to come and stand around a large open space (preferably the space should be clean and dry with no rubbles, stones or grass)
- ▶ Few volunteers are invited to draw a quick outline boundary of the village using sticks, branches, coloured powder etc. In some Bolivian villages up on the Andes, women quickly used woollen thread from knitting ball (which they generally carry on them) to demarcate the boundary of the village on grass (See picture opposite)
- ▶ Ask someone to indicate only a couple of important landmarks (such as school, main road crossing, places of worship etc inside the boundary)
- ▶ Now ask someone to step inside the map and indicate the place where they were all standing (today's gathering)
- ▶ Identify a young boy or girl and ask him or her to step in and indicate his or her house
- ▶ Ask the gathering if he/she did it correctly. If correct, ask everyone to give him/her a thunderous clap. All these help everyone to get orientated with the map
- ▶ Very clearly explain the following to everyone:

a. only one member from each family should pick up a card (heaps of card should be kept outside the map) and walk inside the map and stand exactly on the spot where his/her house is located.

b. Allow some time for the people to settle down on the map properly

c. Now ask them to write down the name of the head of the family on that card and place it on the location of the house (near his/her feet where he/she was standing)

d. Tell them that these cards represent their houses. Now ask them to draw a line from their respective houses to the place where they go to defecate. Tell

them to use chalks to draw lines on the ground connecting their houses to OD places. At this point there will be lots of laughter and fun. Allow the same to happen. Remember you should not hand out cards or chalks one by one to the community. Keep these materials in a corner of the map and ask them to go and collect it. Encourage a lot of movement and fun creativity.

e. Indicating the plastic/paper bag containing the yellow powder tell them to pick up and show the respective places of open defecation indicating their shit. Tell them to spread more yellow powder where there is more shit and less vice versa. There will be much more laughter at this stage. Remember not to bring the bag of yellow powder from person to person. Let them do it all. You will notice a big rush to pick up a handful of the yellow powder. At this point children will pour yellow powder in places henceforth unknown to many parents.

f. Allow time for this to be completed

g. Now ask every one to come back and stand on their house positions again. Ask them where do they go for emergency defecation? Meaning during rains, in the middle of the night, at times of severe diarrhoea or when sick and so on. Ask them to pick up yellow powder and put some on these spots of emergency defecation. You will find another round of laughter and people additional heaps of yellow powder around their home-stead. People might say that during emergency they go behind the house of their neighbour and similarly his neighbour comes to shit behind his kitchen garden. Everyone will notice that the map is gradually turning yellow. You can ask them whether the entire village seemed to be full of shit.

h. You can also do the calculation of shit by households on the same map and identify the family that contributes maximum amount of shit to the village environment everyday. Ask everyone to give a big clap to congratulate him/her.

i. Ask them to step outside the map without disturbing the cards. Thus a household map is created.

**Option:** Put coloured cards on the ground. The colours can represent wellbeing or wealth categories, usually rich, middle and poor and sometimes very poor. Ask people to pick up their colour, add their household name, and put on the map. This often shows the poorer living on edge of community near the defecation areas, and indicates that the better off defecate near houses of the poor.

**Do not** commit the mistake of dominating in a subtle manner e.g. distributing cards or markers one by one to the members of the community instead of keeping them somewhere in the middle and asking them to pick the cards or markers up.

## Tips

- A map made on the ground can be transferred onto paper, illustrating households who have latrines and those who do not, and then used for monitoring (see below)
- You don't need many resources to make a map. Encourage participants to use leaves, seeds, sticks or other easily available materials to represent different things. Be sparing not sparing in your instructions. Encourage creativity and make it fun
- Colour coding if used should be very quick. Do not allow it to drag on
- If you have yellow powder that represents OD areas, smear some on your hand, and ask people to shake hands with you. Then ask them what is transferred to their hands
- "Interview the map". This means asking questions and probing the meaning and implications of what has been shown. The map is a means to better community understanding of the sanitation situation, not an end in itself.

## Identifying the dirtiest neighbourhoods

During the mapping exercise, ask the community to stand in small groups according to their respective neighbourhoods. Ask them to discuss among themselves which is the dirtiest neighbourhood of their village, the second dirtiest and so on, and to note these on a piece of paper. Collect and read out the papers. In most cases you will find that all groups identify the same one or two neighbourhoods as the dirtiest.

Then ask the groups to note down where they go to defecate. Through this exercise people of the dirtiest neighbourhood realise, maybe for the first time, that others are defecating in their areas and are also labelling them as the dirtiest neighbourhood. This discovery usually triggers immediate action to stop strangers from coming into their areas to defecate. After this realisation, the poorer and lower status people in many villages prove to be the most active and fastest initiators of CLTS. They also benefit most from saving money spent on treatment of diarrhoea and other diseases.

**Analysing the defecation area map along with the calculation of shit per household and faecal-oral transmission routes together with the community is extremely crucial. Calculation of household shit production is in progress, in a village in Yemen.**



## Calculations of shit and medical expenses

Calculating the amount of faeces produced can help to illustrate the magnitude of the sanitation problem. How much human excreta is being generated by each individual or household per day? Households can use their own methods and local measures for calculating how much they are adding to the problem. The sum of the households then can be added up to produce a figure for the whole community. A daily figure can be multiplied to know how much shit is produced per week, per month or per year. The quantities can add up to a matter of tonnes which may surprise the community.

Ask which household produces most, and ask everyone to clap and congratulate the family for contributing the most shit to the village. Similarly identify the second, third and so on and appreciate their contributions. Identify the family that produces the least. Ask them why they produce so little shit? Ask them to eat more and shit more. All this generates a lot of fun but silently the fact emerges clearly.

**In a well facilitated CLTS triggering, villagers in Tanzania calculating household shit, the ignition point is often reached while they are doing this.**

Ask people how much they spend on health treatment. Stand around the map. Environment setters make the crowd quiet. Point out the cards and ask them how much they spend for treatment and medicine for diarrhoea, dysentery, cholera and other OD-related diseases they identified. Ask whether they wish to calculate by month or each year, and then to write the amount on their household card only using markers.

As with calculation of faeces, ask which family spends most. Point it out if they live close to the defecation area or in the dirtiest neighbourhood. Are they poor or rich? Who suffers most – rich medium or poor?

Put up flip chart and ask them to calculate how much the whole community spends in a month, a year, and then over ten years. Put this chart next to the calculation of amounts of shit by month, year and ten years.

Tell them they are really well off to be able to spend so much. Ask if any poor families had to borrow money for emergency treatment of diarrhoea for any family member? If so, what was the amount? From whom and where? Was it easy to borrow money and repay it? Who lends money for emergency treatment and at what rate of interest? NGOs, middle men? Never suggest to stop open defecation or to construct toilets. You are not supposed to suggest or prescribe.

## How to trigger disgust pathways of faecal contamination

### From open shit to open mouth

Ask where all that shit goes. As people answer that it is washed away in rain, or enters the soil, draw a picture of a lump of shit and put it on the ground. Put cards and markers near it. Ask people to pick up the cards and draw or write the different agents or pathways which bring shit into the home. For example:

- Flies
- Rainwater
- Wind
- Hoofs of domestic animals
- Chickens that eat shit and have it on their feet and wings

- Dogs that eat shit or have it on their paws or bodies
- Shit smeared ropes (for example, used for tethering animals)
- Bicycle tires
- Shoes
- Children's toys, footballs etc
- Wind blown waste plastic
- Contaminated water

### Then ask how the shit then gets into the mouth. For example:

- Hands, fingernails
- Flies on food
- Fruit and vegetables that have fallen on or been in contact with shit and not been washed (e.g. in China)
- Utensils washed in contaminated water
- Dogs licking people

You should never suggest the pathway of contamination. Let people discuss, identify, draw/write.

### The Glass of Water!

Then ask for a glass of drinking water. When the glass of water is brought, offer it to someone and ask if they could drink it. If they say yes, then ask others until everyone agrees that they could drink the water. Next, pull a hair from your head and ask what is in your hand. Ask if they can see it. Then touch it on some shit on the



ground so that all can see. Now dip the hair in the glass of water and ask if they can see any thing in the glass of water. Next, offer the glass of water to anyone standing near to you and ask them to drink it. (See also page 20) Immediately they will refuse. Pass the glass on to others and ask if they could drink. No one will want to drink that water. Ask why they refuse it. They will answer that it contains shit. Now ask how many legs a fly has. They might tell you the correct answer. If not, inform them it has six legs and they are all serrated. Ask if flies could pick up more or less shit than your hair could. The answer should be 'more'. Now ask them what happens when flies sit on their or their children's food and plate: what are they bringing with them from places where open defecation is practised? Finally ask them what they are eating with their food.

### When someone says that they are eating one another's shit, bring them to the front to tell everyone.

The bottom line is: everyone in the village is ingesting each others' shit. Once one of the communities has said this publicly, you can repeat it from time to time. Do not say it before they do. It has to be what they have said as a result of their analysis, not what you have come to tell them.

**The ignition moment!** Miguel Pimentel, an experienced facilitator of PLAN Bolivia offering a glass of shit contaminated water to a woman who is seen covering her mouth and nose in disgust. The horrific realisation of the fact that everyone has been eating each others shit is the bottomline. These are very critical moments which hasten the triggering process.

Ask them to try to calculate the amount of shit ingested every day. Ask how they feel about ingesting each others' shit because of open defecation? Don't suggest anything at this point. Just leave the thought with them for now, and remind them of it when you summarise at the end of the community analysis.

### Ignition moment

Be very alert for the ignition moment. It is the moment of collective realisation that due to open defecation all are ingesting each others' faeces and that this will continue as long as open defecation goes on. When this happens there is no need to continue with other activities.

Often at this stage the spirit goes high and violent arguments begin as to how to stop open defecation. Don't interrupt or advise. Quietly listen to the discussion.



RIGHT A community in a village in Mardan, NWFP, Pakistan raised their hands in total agreement to stop OD.

BELOW The 'shit, bread and flies' demonstration, Tororo Uganda. Photo: Philip Otieno, Plan Kenya.



## Some tips and ideas

➤ **Lift a child.** Look for and lift up a small child playing on the ground or eating something with flies on the face. Ask whose child it is. Is it the child's fault that it is ingesting dirt and shit? Whose fault is it then that the child has to live in a filthy environment? Is it right that the children in this village should grow up like this? Parents who do not want your children to live like this please raise your hands.

➤ **Cover up fly-infested shit.** If there is shit with flies on it, cover it with soil. The flies should then go away.

➤ **Mirror.** After realising that they are eating one another's shit, and sharing their feelings with others, the faces of women and men change radically to show disgust and unhappiness. When this happens present a mirror to some of the better dressed women to look at their faces. Many will refuse.

➤ **Shit, food and flies.** During a defecation area transect in Solan District of Himachal Pradesh in India in May 2006, a daring woman participant, Smt. Nina Gupta, picked up raw human shit on a thin stone slab and brought it to the meeting place around the map. The people accompanying her on the transect walk were stunned to see this and followed her to the map. She then asked someone to bring a plate of rice which she placed near the shit. Within no time many flies gathered on the shit and the rice and moved between them. People watched with struck silence and two women started vomiting. A stray dog came, attracted by the smell of the shit. No further explanation or comment was required. People said that because of OD they were eating one another's shit. Since then this has become a common practice in triggering.

➤ **Be humorous in a fun and teasing way, for example:**

➤ **Apologise several times during the process.** Stand with folded hands. Beg not to be misunderstood as a sales agent of toilets or someone from the government of an NGO trying to persuade them . . . "We are not here to tell you to stop open defecation or to construct latrines. You must feel free to continue OD as you have for generations."

➤ **If people then ask why you are there, say "We are here to learn".** After a few exercises, say "We have learnt a lot . . ." and summarise the learning – volume of shit, medical expenses etc. After each participatory analysis it is important to document the main findings (e.g. amount of shit deposited in the open in a day, month, year, total amount of money going out of the village per year etc) on a large chart paper in front of the gathering. Best if these are written by a member of the community and read out to all. Ask, whose analysis and findings were these?

➤ **After shit, food and flies, when the flies are hovering between the shit and food, say "Don't worry. There are two sorts of flies."** The kind of fly that sits on human shit does not come on food or water. People might refuse to accept that.

➤ **When people have realised what they are doing, say "Never mind. By all means continue to eat one another's' shit"**

➤ **Tell a humorous story.** A Hindi example is about a pig that does good deeds on earth, goes to heaven, is fed very good food, but asks to be able to go back to its normal and preferred diet of shit. The poor pig is bitterly disappointed. Shit is not available in heaven.

➤ **Invent and share your own ideas, experiences, jokes and stories**

If questions are thrown to you, tell them that, as an outsider, you have little local knowledge and that they know much better than you what is best to do in their local situation.

➤ Tell them that they are free to choose anything including continuation of open defecation.

➤ Tell them you have understood how the local community is practising open defecation and are ingesting each other's shit knowing well the terrible implication of the faecal-oral transmission routes

➤ Tell them not to misunderstand you as a promoter of latrines suggesting to stop open defecation. Tell them to feel free to continue their old practice of OD if they wish.

➤ At that point some might say they do not want to continue. Ask why? The usual reply is that latrines are too costly to build. Ask what a normal latrine should cost, and what would be the minimum cost. Common answers are \$100 – \$250 or more. Tell them about low cost latrines constructed elsewhere, and that one can be constructed for only \$3-\$4. Most will not believe this. Ask them if really interested to raise their hands.

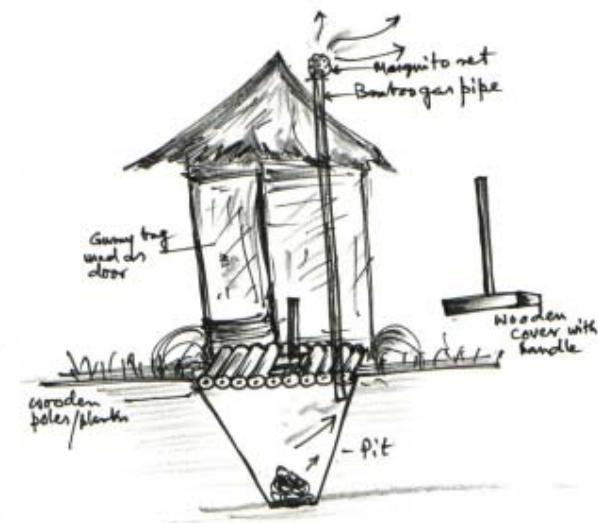
➤ If they do so, explain with detail on chart paper on a wall. Quickly draw a simple pit latrine. (Do not take a

drawing with you, but draw it on the spot). Ask how much that would cost and how difficult it would be to construct a similar direct pit latrine? Let them know that this was not your design, but one developed by poor people in one of the poorest countries of the world. You could also share experiences of other communities who have taken up total sanitation and have achieved success. (Please see drawing below)

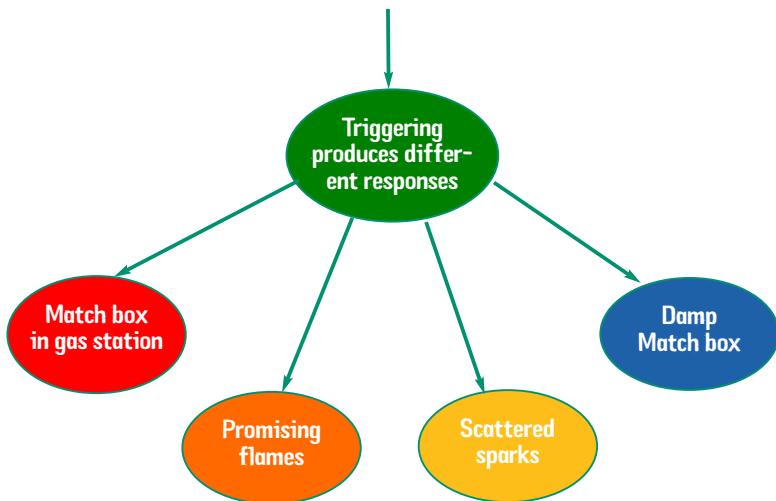
➤ Ask them the cost. They may say even less than you said, and that they will go ahead and do it. Ask them to raise hands, and then record their names on a sheet.

**DO NOT** prescribe models of latrines. Remember that the central idea of CLTS is not to prescribe the best and most durable model of latrine to the community at first, but to initiate local action for communities to look for their own alternatives to open defecation.

**DO NOT** worry if no one talks about starting any local action then and there. In that case thank them again and tell them that you will record them as a village where people are willing to continue open defecation and eating one another's shit (see Damp matchbox below). Do not feel that you have somehow failed. You have probably started a process.



Drawing of a simple pit latrine



## Dealing with different responses

The above is a common pattern. But community responses differ widely. There are actions you can take to fit different responses. These can be divided into four categories according to intensity, as above:

### Suggested responses

Your appropriate response also differs. Here are some suggestions.

### Actions on the same day after the triggering process:

Note that some actions are taken in two or more situations, and some are elaborated in the section on post-triggering. Remember when Natural Leaders are in action as 'Community Consultants' and triggering CLTS in villages other than their own, actions might vary greatly from what we generally do. In many cases the NL- Community Consultants come and stay in OD villages for a week or so until the village is declared ODF or made a considerable progress towards ODF status. There are examples where Consultant NLs (Men and Women after seeing huge accumulation of shit) visiting new villages declared that they wouldn't eat until they construct one simple pit latrine for his/her own use and demonstrate to all villagers. In

such cases a lot can happen spontaneously because the NLs stay in villages sharing accommodation with the insiders.

### Matchbox in a gas station

Where the entire community is fully ignited and all are prepared to start local action immediately to stop open defecation

- ▶ Share and explain about low and moderate cost toilet options including the sources of their availability (as above)
- ▶ Facilitate an action plan with dates for completion and formation of community committee
- ▶ Facilitate the drawing up of a list of people willing to construct toilets mentioning the date and week when they will complete
- ▶ Decide a mutually agreed date for a follow-up visit
- ▶ Facilitate the start of community monitoring using the social map drawn by the community (ground map needs to be redrawn on a big chart and displayed where all can see)
- ▶ Find someone from the community to be the link person with suppliers of pans and sanitary hardware. In very remote locations, ask community's suggestions on developing market links and how they could access low-cost and improved hardware?
- ▶ Leave behind vials for testing water contamination (see below)

- ▶ Aim for local self-reliance with local linkages and leadership so that you can soon withdraw. Do not let your presence induce dependence or inhibit local innovation and action.

### Promising flames

Where a majority has agreed but a good number are still not decided.

- ▶ Thank them all for the detailed analysis of the sanitary profile of the village and seek their permission to leave
- ▶ If someone from the community agrees to initiate local action, bring the person up front and encourage him or her to share their thoughts with the rest of the community as to how he or she is going to initiate the construction of latrines
- ▶ Ask everyone if they are interested to know how other communities have built low cost latrines
- ▶ If all agree by raising hands, draw and explain a simple direct pit latrine using locally available low cost materials (as above)
- ▶ Facilitate action planning, with a weekly list of commitments for toilet construction and dates for completion
- ▶ Decide mutually agreed dates for follow up visit
- ▶ Facilitate the start of community monitoring using the social map drawn by the community
- ▶ Find someone from the community to be the link person with suppliers of pans and sanitary hardware. In very remote locations, ask community's suggestions on developing market links and how they could access low-cost and improved hardware?
- ▶ Leave behind vials for testing water contamination

- ▶ Tell them that you are leaving the village knowing that there are people there who decisively want to continue to eat each others' shit
- ▶ Seek their permission to take a photograph of the group with all with hands raised to say that they will continue open defaecation. At this moment people usually vehemently object to the photograph. If anyone disagrees, allow time for confusion and discussion. Generally, within a short time, those willing to stop open defecation can be asked to raise their hands. This then influences the rest to raise their hands as well. Then ask again if you can take a photograph of all those willing to stop, with their hands raised

- ▶ At this stage identify any who have decided to initiate local action and stop open defecation. Bring them in front of the gathering and ask all to applaud them.

- ▶ Fix an early date to return when others who may not be present can be there, for a further round of ignition
- ▶ Leave behind vials for testing water contamination (see below).

### Damp matchbox

Where the entire community is not at all interested to do anything to stop open defecation

- ▶ Thank them all and leave. Do not pressure
- ▶ Tell them that you are surprised to know that they are knowingly ingesting one another's shit and are willing to continue to do so
- ▶ Judge whether to ask if you can take a photograph of the community
- ▶ Leave with them vials to test for water contamination (see below)
- ▶ Just before leaving ask if they would be interested to visit a nearby community or village where OD has been made history by the community themselves
- ▶ Last, and with prior apologies, you can tell them a culturally appropriate shocking but funny story if you know one.

### Scattered sparks

Where the majority of the people are not decided on collective action, and there are many fence-sitters, and only a few have started thinking about going ahead.

- ▶ Thank them for the detailed analysis and tell them not to misunderstand you as a promoter or salesperson of latrines or toilets. Tell them to continue their age-old practice
- ▶ Ask how many of them by raising hands are going to defecate in the open tomorrow morning

### Testing for contamination

Whatever the response, leave the community with some of the small glass vials of hydrogen sulphide (H<sub>2</sub>S) that are available in markets. In some places in India it is known as Aquacheck, available for 50c US\$ equivalent. There could be different commercial names for such H<sub>2</sub>S vials available in different countries. Regarding availability of such vials enquired may be made at the Water Testing



**LEFT AND RIGHT** Young adolescent girls are those affected the worst by the effects of open defecation. If facilitated properly they often take urgent action in stopping OD. School girls in a Tanzanian village in action during a CLTS triggering session. Senior school girls in Bangladesh said that they were not late to school any more because they had latrines. Before CLTS they had to wait around the bush for an opportune moment when no men were around. They couldn't wake up before sunrise as their mothers did.

laboratories or with the chemists and drugstores. At the end of the triggering, ask the community to fill vials with water from their drinking water sources, following the instructions on the bottle, including prompt closure and wrapping with adhesive tape sticker with time of collection and source. Tell them to keep the bottle away from sunlight and at room temperature – 25-35 degrees Celsius for 24-48 hours, or in colder places in a clothing pocket. If not fit for drinking the water will turn black, indicating faecal contamination. The community can keep the bottles themselves. After use, the bottles should be broken and buried.

### Facilitating the community's plan of action (on the day of triggering)

The process of planning should concentrate on immediate positive action plans. Activities might include:

- Put up a flip chart and encourage early action-takers to come and sign up
- As they come, give them a big clap, and say that they are leaders for a clean future
- Find out their wellbeing status, and praise them especially if they are poor
- Keep them standing in front of the crowd
- The same with any who come forward as donors
- Take a photograph of the group as those who are going to transform the community's environment. Facilitate formation of a sanitation committee. Write up the names of the committee.

Ask how long before they will stop OD totally. If the answer is more than 2-3 months, ask if 60-90 days of ingesting each others shit is acceptable. The response may be to share toilets and dig pits to cover shit almost at once.

Identify 2-4 potential natural leaders from this process.

Inform if there is to be a follow-up sharing workshop, and what to prepare for it – transferring the ground map onto paper, listing the community members who want to start immediately, a sketch of their own low cost design using local materials, progress since triggering. Invite women, children and men NLs to the sharing workshop.

Before leaving ask the NLs to rehearse slogans against OD to be chanted by children. Initiate action by children at once, accompanying the outsiders as they leave.

Tell people about other actions by nearby communities and what they are doing. If the community is the first in an area, stress the recognition they will receive, and the chance of a special celebration if they become ODF.

Caution: Don't make any commitment of benefits

### Community mapping for monitoring

When triggering leads to matchbox in a gas station or promising flames, leave behind large sheets of paper,



### Triggering in Schools and Student Activists

In Panipat District in Haryana, India, CLTS triggering in schools began in September 2007, forming Chhatra Jagruk Dal –“students' awakened group”. In the first seven weeks, teams of full-time facilitators covered about 125 schools, more than half those in the District. Students did mapping and other triggering activities. When they went on transects, adults were curious and followed them. Sometimes shit calculations were made standing in the OD area, looking at the faeces to estimate weight. Disgusted students at once became activists. Those most keen were formed into groups of natural leaders and given caps, whistles and written materials. They are to be rewarded with marks for Social and Environmental Productive Work. Teachers are engaged in support.

One boy aged about 12 led other students to go out and blow whistles at those doing OD. He was three times assaulted but not even his parents could stop him. He said “Why should I stop? I am not doing anything wrong”. After the third assault, a special village meeting decided that enough was enough. Rapid action began to become ODF. 300 of the most active students were invited to a rally. About 50 of them spoke, and the Assistant District Commissioner presented all the students with wrist watches.

A Government Project Officer involved in the Total Sanitation Campaign said: “It is amazing. Students are so enthusiastic. They are proving great natural leaders. I never thought they could be so keen. Sometimes we wonder why this idea never struck us earlier. “

Source: Rajesh Kaushik, APO, District Rural Development Agency, Panipat, Haryana, India

tape and coloured markers for transferring the ground map, writing the names of newly formed committee, community plan for achieving ODF status and names of those decided to start digging pits immediately or next day/week. Encourage redrawing by community members of the map from the ground onto the sheets of paper taped together to be large enough to be seen by a small crowd. The map should be in a public place and protected from the elements of spoilage. It can be marked with the sanitation status of every household and kept up to date to show progress.

### TRIGGERING IN SCHOOLS

Experience of triggering in schools has been gained in India and Zambia. It has probably also taken place elsewhere. All the methods can be used. School children are quick to learn and often become active agents of change. Triggering in schools is in the early stages of spread. Early indications are that it could become a major and powerful driver for CLTS, in parallel with and complementing triggering in communities. Triggering in schools can generate a synergy between pupils, parents and teachers. Pupils are quick to learn and act. Not least, the involvement of students as the coming generation in doing their own appraisal and analysis may prove a strong factor in assuring sustainability of the transition to ODF status. This may be a major wave of the future.

### Triggering in school, then with pupils, parents and teachers in villages

In October 2007, in Choma District, Zambia, a hands-on training workshop was held for UNICEF staff, their partner organisations and resource agencies in Eastern and Southern Africa, together with Government staff. The triggering process was started in a secondary school, with mapping and other exercises. Pupils and parents from three villages took part, together with teachers. The children discovered that OD was rampant in their three villages. Triggering then continued simultaneously in all three. Differences of age and authority dissolved, with children, parents and teachers all participating, and much disgust, animation and laughter, leading to the children parading in processions and shouting slogans. The next day, the headmaster declared in a meeting at the District headquarters that his would be the first school in Zambia with all pupils having a latrine at home and coming from ODF villages.



## Chapter 4

### POST-TRIGGERING GUIDELINES

The triggering point is the stage at which members of a community either decide to act together to stop open defecation, or express doubts, hesitations, reservations or disagreement. The post-triggering phase is very important. Community dynamics can change rapidly and go in different directions. Sensitive external encouragement and support can be crucial.

Facilitators and others in a support role need to be alert to what is happening. Timely interventions can make a big difference.

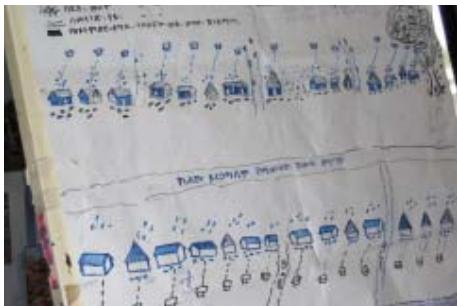
Triggering that is part of a training workshop has occurred without follow-up, and nothing has resulted. Triggering without follow-up is bad practice and should be avoided through forward planning and involving and linking with an organisation and/or individuals who can and will follow up.

**A village woman in the Andean mountain region of Llallagua, Bolivia, proudly presents her newly constructed latrine made of mud, bricks and stone. Photo: Meghan Myles, UNICEF Bolivia**





**LEFT** One ODF community in Bangladesh showing all their households and the kinds of latrines they have built as well as households that didn't build latrines in the para or in the adjoining paras/hamlets of the village. This generated a sense of competition between the paras/hamlets.



**ABOVE** Map used for monitoring of progress by a CLTS triggered community in Ethiopia.

the Scattered Sparks, and also Damp Matchboxes if they are there.

Video documentation of commitments made by individuals in the early stages can be very effective in persuading others later. Videoing the construction details of low cost latrines can help others to see what they could do.

#### Participatory monitoring and indicators

The map made on the ground, when redrawn on paper, can show households who have latrines and those who do not. Displayed publicly in a meeting place where all can see it, it can serve as a reminder of commitment to take action. As households gain access to a latrine (whether their own or shared) and stop open defecation, the maps can be updated. This can be done regularly by



**ABOVE** Villagers in Ogoo Farm Community, Sierra Leone, show the sign that declares their village to be 100% ODF.

natural leaders. Some have used different colours for different weeks of completion, and for shared latrines. The map thus serves as a monitoring tool and creates competition among the community members to build their own latrines. The map should remain vibrant until all households are marked as using a latrine and the whole village has declared itself ODF.

Ask communities and natural leaders what other indicators they wish to use to monitor progress. Encourage them to use these and make them public in the community.

#### Monitoring of process and progress

Indicators of process and progress to watch for are:

- ▶ Number and range of natural leaders who emerge, from women, men, youth, and others

**RIGHT** Portable and retractable model of low-cost latrine innovated by a NL cum Community Consultant in Ahmednagar district of Maharashtra state in India. The NL carries his own innovative portable model in his bag wherever he goes. He utilises all opportunities to tell people about CLTS and describes this simple model. Notice the local materials like plastic containers of coconut hair oil, sticks, dried coconut leaves, plastic sheet, soil and plastic box used in making the model.



**LEFT** The very first two Natural Leaders, (Left) Md. Zafir Uddin Shah, and (Right) Md. Mansur Rahaman, Mosmoil, Baghmara, Rajshahi, Bangladesh, seen here with the author. They became very popular Community Consultants of CLTS for their contribution to total sanitation in Rajshahi and adjoining districts.

- ▶ Households constructing latrines jointly
- ▶ Sharing latrines between neighbours or relatives or traditional or other groupings
- ▶ Formation of new groups
- ▶ Better off people coming forward to help those who are weaker and poorer
- ▶ Revival of traditional communal cooperation groups (such as gotong royong in Java and debo in Ethiopia)
- ▶ Volunteers, traditional midwives, and others becoming active
- ▶ New slogans, songs and poems
- ▶ Increased sales of sanitary hardware in markets
- ▶ The emergence of different models of latrines
- ▶ Use of non-conventional materials for latrines
- ▶ The emergence of community sanctions against OD
- ▶ Communities providing collective help to those with difficulties
- ▶ Sanitary hardware given as gifts (e.g. to newly married couples)
- ▶ Reduction in diarrhoeal diseases and in sales of medicines for these
- ▶ Decreasing health expenditure and income of village quacks
- ▶ Fewer flies

#### Potential natural leaders

Natural leaders start emerging right from the triggering process. They may be women, men, youth, school children, elderly people and/or people with special roles such as midwives, village headmen, and others. Natural leaders are active through the processes of construction, innovation, monitoring, developing and implementing community norms and rules, spreading construction and practices within the community and spreading beyond



**LEFT** Some women Natural Leaders who are well known in their respective Unions and Upazillas (sub districts) in Bangladesh. **LEFT** Women NLs from Gaibandha district. Photo: SDU Care Bangladesh  
**ABOVE AND BELOW** NLs from Rajshahi district of Bangladesh.

the community. Their role is crucial at all stages. Continuous identification, recognition and encouragement of natural leaders should be part of every visit. This includes giving them voice in public gatherings. In Indonesia, natural leaders have been provided with a hat and t-shirt as distinct symbols of recognition. Honour them through invitations to meetings, and as speakers and facilitators for triggering processes in other communities, and induct them selectively as trainers and facilitators.

### Look for, encourage and support women natural leaders

Women natural leaders tend to be less visible than their male counterparts in latrine construction but more active and responsible in their maintenance, establishing usage norms, and sustaining hygienic behaviour change. This can entail innovative forms of savings, material loans, repayments and forms of reciprocity. Women usually take over the latrines as soon as they are constructed. They train children to use the toilets hygienically.

### Recognise and encourage the role of religion and religious leaders

Often the support of religious leaders is very effective and powerful in speeding up local collective action towards achieving ODF status. Campuses of Churches, Pagodas or Mosques could be included in Transect Walks or could be used for mapping in consultation with the



local community. It helps the community to see conditions and environments of places of worship and that their religious leaders are exposed to environments of places of worship and that their religious leaders are exposed to filth. Is it acceptable for the monks to be eating the community's shit, or accepting people to come to pray wearing clothes which got smeared with shit by flies or chicken while drying in the sun etc? Often such involvement motivates the religious leaders themselves.

In one triggering exercise in SNNPR near Awassa, in Ethiopia, the defecation area transect team found lumps of shit under the grass in the campus of a church. While some tried to quickly cover it up before others could see it, many already seen it and shouted that their religious campus was also not spared from open defecation. Many women accompanying the transect walk were terribly upset to see that and cried. This helped to speed up the process and brought the triggering moment closer.

Imams in many villages of Bangladesh regularly urged the local community to stop open defecation through the public address system of mosques. Quoting Islam and the holy Quran, religious leaders explained the need of cleanliness and wearing clean clothes during prayer.

In South Sumatra, Indonesia, issues related to stopping open defecation and washing hands with soap after defecation and before food were regularly discussed in weekly Quran reading competition in CLTS triggered villages. These discussions expedited the process of achieving ODF status.

In many communities, significant amounts of disposable income are directed towards the physical construction and upkeep of Churches, Mosques, Pagodas and Temples and other religious facilities. Large sums of money are collected from all members of the community in different forms regularly. These are strong examples of community cooperation and solidarity. If triggered well people managing these informal religious systems get their acts together and support collective local actions and through helping the poor achieve ODF status quickly.

**RIGHT** Natural Leaders and Community Consultants have their own unique style of spreading messages and triggering of CLTS. A Natural Leader, Md. Shahid Ullah, in action in a village in Haidgaon union in Chittagong district of Bangladesh. The pace of scaling up of CLTS largely depends on Governments' and NGOs' faith in the ability of NLs and their support and utilisation of NLs.



### Encourage help for weaker and poorer members of the community

Often as a result of good and powerful triggering of CLTS, better-off members of the community offer direct help and support to poorer members. Such offers of help could range from allowing construction of latrines on the margins of land or providing a few bamboo poles, wooden planks or purchasing toilet pans for the poor or even providing interest free loans to fellow community members.

Be alert for and promote emerging donors in the community. Facilitate the identification of those who are weaker, poorer, landless or otherwise unable to construct their own toilets. These may be old people, widows, single mothers, the disabled, those who are chronically sick or others. Ask the gathered community how they will solve their problems. Do not make suggestions. Proposals for action can be expected in communities where total sanitation has been fully understood. Your role is to facilitate the linkages between the weaker and poorer and those who are better off and willing to help them,



LEFT Children play a very important role in every CLTS triggering. When facilitated well, new realities are always learnt by the parents and adults from children's analysis. In a Tanzanian village children indicating bushes where they defecate on their way to school.



ABOVE Children in a village near Llallagua in Northern Bolivia presenting their diagram of faecal-oral contamination routes in front of a large defecation area map.



ABOVE In a village in the Andean mountains of Bolivia, where there had for years been an ineffective programme of free supply of hardware, children shouting slogans against open defecation arrived at the venue where CLTS was being triggered with the adults. Hesitant parents were astonished and motivated, by their own children trying to convince them to stop OD. Their mindsets changed abruptly. In fact, a 'hope of flame' turned in to 'fire in gas station' where children were the catalysts.

whether through labour for digging and construction, materials, money, or loans.

Often the spirit and enthusiasm of many poor families to abandon open defecation, encourages those who are better off to come forward spontaneously to extend their help and support.

### Involve children in the campaign

During every triggering process, many children gather and watch the fun. Some in the facilitation team should take the children away from the adults' mapping area and engage them in separate mapping. At this stage they can quickly get the idea of stopping OD. Help them develop appropriate slogans which they can shout together walking in a procession through the village. Encourage adults to come and see the children's map and listen to their commitments. This can continue well after triggering until ODF, and during visits from other villages.

► Schools and teachers together with children can play a big part. Children have been asked in school to raise their hands whether they have access to a latrine and whether they use one. The children apply pressure at home. They sing at home some of the CLTS songs they have learnt. Schools also teach and reinforce hygienic behaviour.

RIGHT Children's role in triggering CLTS is paramount. One young analyst explaining findings on a map in a village in SNNPR in Ethiopia.

BELOW Procession of children shouting slogans against open defecation in a village in Ibb Governorate of Yemen.



### Children as powerful forces for change:

In districts in NW Bangladesh, children were known as bichhu bahini - the army of scorpions. They were given whistles, and went out looking for people doing OD. One youth said that during the campaign for ODF he had blown his whistle at least 60 times. In a few cases they carried out goo jhanda, flagging piles of shit with the name of the person responsible.

In Sijunjung District in West Sumatra, children likewise looked for miscreants, but in that case, in a very musical culture, sang the CLTS campaign song at the offending person.

In Homa Bay in Kenya, children played a major part and drew up their own action plan and presented it to their elders.

## Children's campaign activities, East Java

In Purworejo village of Lumajang District in East Java, school children played an important role in transforming the village into ODF. Students in the village's four elementary and one junior school were involved in the following activities:

- ▶ Regular processions with slogans against OD until the entire village became ODF.
- ▶ Transect walks to different places and neighbourhoods, to spot filthy dirty areas including those for defecation.
- ▶ Information collection from each household on their type of latrine and hygiene behaviour. Each student was given the responsibility of collecting data from 10 households, and reporting back.
- ▶ Checking water points, for example types of drinking water containers used for storing drinking water, and checking for mosquito larvae and other contaminants in larger water pots.



LEFT Children presenting action plan to elders, Homa Bay, Kenya. Photo: Philip Oteino, Plan Kenya.



ABOVE Children's presentation of faecal-oral contamination route. La Paz, Bolivia Children's perception of spread of shit and their entry into homes.



LEFT School children singing chorus songs against OD in Muara Enim, South Sumatra, Indonesia.



ABOVE Girl writing action plan, Homa Bay, Kenya.  
Photo: Philip Oteino, Plan Kenya.

RIGHT Procession of children chanting slogans against open defecation in a village in Kenema district of Sierra Leone. The procession would stop for a while in front of those houses who still continued OD.



## Facilitate access to sanitary hardware (see also marketing in the next section)

Facilitators should help in establishing linkages with local markets.

In most cases where CLTS has been triggered on any scale, demand for sanitary hardware has exceeded supply. Lack of low-cost hardware can impede progress with CLTS and movement up the sanitation ladder. Conventional hardware is also often quite expensive, fragile, heavy, standardized with little or no choice and not available in remote areas. Not all will wish to opt for the cheapest. Try to assure a good range of choice of hardware.

As CLTS progresses, demand for better sanitation hardware materials goes up, and with the shift in hygiene behaviour people tend to improve the design and quality of their latrines. It is important to be aware of the different stages of CLTS process and extend help and support accordingly. Very soon after triggering or after achieving ODF status, those better off in communities tend to move to better quality latrines and improve existing ones. Some may decide to move directly to higher-end latrines and skip 'direct pit' low-cost models regardless of cost.

### Immediate actions that can be taken include:

- ▶ identify what is needed (for example pans, rings. In Tanzania and Ethiopia, a cover with handle for pit

latrines, and plastic gas pipes have been urgent needs)

- ▶ encourage local innovation and production
- ▶ invite local traders to village CLTS meetings to interact face-to-face with the community and understand their requirements, and appreciate the potential market
- ▶ explore sources of locally available materials in nearby markets and inform, explain to and motivate traders encouraging them to provide what is needed.
- ▶ encourage and arrange a community exhibition and mart of sanitary hardware
- ▶ encourage NLs to bring hardware to their villages
- ▶ train NLs and others in communities to manufacture hardware
- ▶ find out about low cost appropriate technologies (such as steeply sloping fibreglass coated scratch-free unbreakable and light plastic pans) and put dealers in touch with suppliers.

Local dealers of hardware and owners of general shops find in CLTS an opportunity for business and for helping communities. They may respond to opportunity and demand by bringing sanitary materials from the nearby towns and cities for retail sale to members of the community. Often they extend support by supplying pans and other materials on interest-free credit. Credit has tended to be returned promptly, for example through harvest income. Friends and relatives of some of the traders living in the town help developing stronger functional linkage with the existing urban market.

Demand for better and more durable latrines comes when pit latrines collapse after heavy rain or flooding. Typically, families, especially the women do not wish to revert back to OD. This is a time when the community members look for alternatives especially the better option toilets and latrine models. It is important to be vigilant if such situations are arising in ODF villages within few months of achieving that status. By encouraging/developing local entrepreneurs and building functional linkages with the market, growing requirements for sanitary hardware could be met with a greater community involvement.

## Verification and certifying ODF status

Verifying ODF status is a key activity. Verification entails inspection to assess whether a community is ODF. Certification is the confirmation of the status and its official recognition. Especially where there are rewards for ODF status, communities and officials may have incentives to seek certification before ODF status has been fully achieved. Where certification leads to community rewards, cases are known of deception and corruption. To guard against this, and to assure sustained ODF standards, many different approaches have been used. Inspections can be and have been carried out by combinations of:

- People from neighbouring communities (especially when there is competition)
- Natural leaders and others from ODF communities
- A government committee
- Staff of government departments,
- Staff of NGOs
- Teachers
- Members of the general public. For example, many may be invited to come from neighbouring villages

Some useful principles and practices:

- Revolving membership of verification and certification committees (to reduce dangers of corruption where there are rewards)
- NLs from ODF villages as members of inspection teams
- Have women members to specifically investigate women's sanitary arrangements
- More than one check up visit
- A surprise visit
- All members of the committee to sign any verification or certification

- No official certification, unless it has been sustained for 6 months
- When there has been thorough and stringent verification, a board can be put up at the entrance to a village, declaring it to be ODF
- Where a whole administrative area is to be verified, many members of organizations and of the public can be informed and invited to take part, as with sub-districts in NW Bangladesh (where in one case the "inspectors" numbered some 500).

A test of the standard of declarations and certifications may be the frequency with which they are withheld or withdrawn. Natural leaders are the inspectors most likely to be perceptive and rigorous. Where they took part in Cambodia, 7 out of 11 communities failed.

### Verification activities can or have included:

- Visits to former OD sites
- Checking up before dawn or after dusk
- Inspections of latrines
- Noting whether paths to latrines have been used
- Conversations with old people and children
- Asking how a community itself monitors hygiene behaviour change?
- Distinct and visible marks indicating hygiene behaviour change, e.g. soap for washing hands, water containers near latrines etc.
- Inquiring about infringements and what was done
- Following animals that eat shit (see box)
- Checking if all the hanging and floating latrines have been demolished
- When included as member of evaluation team people from ODF communities often use many innovative tricks to check ODF status. e.g. Cutting Mango, Jackfruit or such other fruits (with strong aroma that attracts flies) in the open and wait to check if there was any reduction of fly population due to ODF.

### Community evaluators and animal droppings

**A false trail.** In Majher Char Union in Kishorganj District, Bangladesh, one member of the group, a villager from a neighbouring village disappeared. Others waited for him. When he eventually turned up, he said he had been doing his duty. He had been following a chicken which he believed had shit on its legs. However, it took him not to human shit but cow dung.

The serious problems faced by verification and certification when going to scale can be illustrated by the example of the Nirmal Gram Puruskar in India (see box). The key to going to scale with rigour probably lies in decentralised systems with local ownership

## Celebrate achieving ODF status

Work to build a healthy relationship between CLTS communities and local government. Guard against

### Going to Scale with Verification and Certification

**Going to scale with verification and certification presents problems, especially when there are rewards.** In India, the Nirmal Gram Puruskar (NGP) scheme gives awards to communities that achieve ODF status and are environmentally clean. Leaders of successful communities have been honoured by the President, and the communities receive a substantial financial reward. At first, verification and certification were stringent. A community in Mandi District in Himachal Pradesh which had made a great effort was failed because TOILET had by mistake been painted on the doors of two store rooms (and this in spite of the fact that the rooms had no pans). More recently as the number of applicants has reached thousands (reportedly likely to be some 15,000 in 2007), verification and certification have been contracted out to NGOs which have in turn subcontracted to others who have in some cases subcontracted again, sometimes to unqualified individuals for a fraction of the original remuneration. One well-informed source said that when this happened the result could be "a joke"; and when a successful outcome leads to prestige and a substantial reward, the scope for abuse is obvious. This contrasts with the relative rigour of much other verification carried out locally and when there is no reward apart from recognition, pride, self-respect and the other inherent benefits of ODF conditions.

the media, and heads of other communities or administrative units of the same level. Try to ensure that the VIPs who speak are well informed. Encourage them to invite others to make public statements about progress and plans. Once total sanitation is achieved, encourage the community members to put up a board or sign saying so. This will increase their sense of pride and also serve to awaken interest among visitors to the village who may be interested in doing the same back home.

## Monitoring and Sustaining ODF status

Sustainability is also indicated when the general trend in a community is to go up the sanitation ladder. Behaviour change as the key to sustainability of ODF can best be monitored by the community itself.

If sanctions are made against a few individuals for OD, this may indicate social sustainability. Latrines may have a short life, especially the first locally made low-cost ones: within a year or so they may have filled up, or the pit walls collapsed, or the shelter may have fallen down. Sustainability is indicated when a household spontaneously constructs another, especially when it is better and more durable. Sustainability is also indicated when the general trend in a community is up the sanitation ladder.

Monitoring will indicate where further facilitation may be needed. Sometimes light follow-up is required, for example to encourage community members to follow through with the commitments they have made or to encourage the sharing of latrines in order to achieve ODF status. Usually, the natural leaders will take care of this.

misguided support on the part of government staff if they seek to introduce hardware subsidies. Take advantage of informed and enthusiastic support where this is shown.

A good way to do this is to involve local government in celebrating the achievement of ODF. Whenever a community or larger unit achieves ODF status, organize a celebration designed as a reward and also to generate enthusiasm and commitment among others. Invite senior officials, politicians, journalists and others from

## Stories from Ethiopia

CLTS was first introduced to Plan Ethiopia and seven other Plan countries of Central, Eastern and Southern Africa in February-March 2007. During the training workshop, participants triggered CLTS in twelve villages around Awassa in the Southern Nations, Nationalities and Peoples' (SNNP) Region in Southwest Ethiopia. Within three months of the training workshop more than fifty villages declared themselves ODF under the follow-up of Plan Ethiopia. The following incidents are bright examples of the local empowerment that has emerged through triggering of CLTS.

### Open-air defecators pick up their own punishment

They have a new way of doing things in Fura Kebele (village) in Ethiopia. They call it community-led total sanitation (CLTS), but part of it is much simpler than that. No defecation in the open, not ever. Some people in this Ethiopian village thought that the new rule did not apply to them and carried on as they had before. But men caught with their trousers around their ankles soon wished that they had obeyed community wishes. They found themselves carrying their own shit to the nearest latrine.

Weizero (Mrs.) Belayinash Worku is one of the natural community leaders who promised to make her village ODF when CLTS was introduced in February 2007. And she showed she meant it by confronting offenders in the act. In her words as recorded:

"After the CLTS approach was introduced, each household in our village dug a latrine of its own. For passers-by, we constructed seven communal latrines along the main road to the market place. After all these efforts, I found four men at different times defecating in open fields in our village. I ordered them to shovel it with their hands and take it into the nearby toilet. As I caught them with their trousers down, they didn't resist; they only begged me to allow them to handle their shit with leaves. I allowed them and they shoveled it with leaves into the toilet."

Another villager Jemal Worku said "I found passers-by preparing to defecate in open fields. I shouted loudly and stopped them before they defecated. I

am always on the watch-out to keep our village clean and free from open defecation"

In Fura Kebele, Belayinash and Jemal have become two guardians of sanitation and hygiene and have called on all villagers to join them. Ato Argachew Boa, Chairperson of Fura Kebele has promised to continue to improve the quality of sanitation facilities. In their efforts, the community has received support from Plan Ethiopia, Water Action, and the local Wereda Health and Water Offices. Health Extension Worker, Assefash Dichtu, is in no doubt of the importance of the changes. "In our village, open defecation is becoming history."

**No subsidies, no compulsion** – but community initiative sends sanitation figures soaring The first eight villages in Shebedino Woreda, Ethiopia, adopted community-led total sanitation (CLTS) in February 2007. Less than three months later it had been extended into 57 villages and 1,436 more households had constructed pit latrines on their own initiative. Ato Getinet Kassa who is head of the Health Office in Shebedino Woreda notes that all 1,265 households in Fura Kebele now have latrines, and that 465 of these were constructed after CLTS was introduced.

### Negligible cost

Plan Ethiopia has supported this initiative at negligible cost, around US\$ 2,000 to train community natural leaders, Village Health Agents, Health Extension Workers and staff from partner institutions. In the past, Plan used to spend about US\$ 25 per household for the sanitary platform alone. To support the introduction of 1,436 latrines would therefore have cost more than US\$ 35,000. Today there are no subsidies! No compulsion! Communities are doing it on their own initiative at their own cost. They look determined and enthusiastic to make their villages free from open defecation. There is also a good relationship between the different actors: Plan Ethiopia, Water Action, Shebedino Woreda Health and Water Offices, Community Natural Leaders and communities. The evidence suggests that CLTS makes a difference in sanitation and hygiene and helps to bring an end to open defecation. However, proper facilitation and continuous follow up focused on quality and usage are important.

## Fear of evil spirit – the Charm,

Charm is the local terminology used by the 'Poro secret society' of southern, eastern and parts of Northern provinces of Sierra Leone. Charm meaning a physical structure like a tripod made of sticks and bamboos with leaves wrapped around the sticks in a special manner. This is a sign used to scare people against evil spirits. The evil spirit enters the body and causes sickness which might result in to death. Wherever the sign of Charm is put up, people avoid those places in the fear of being attacked by evil spirit. However whenever people visit such places with bad intentions, they are believed to be attacked by the spirit. These are generally placed in plantation areas, farms, secret bushes (where only the members of secret society are permitted to visit) even on construction sites.

In Kpai village of 'Small Bo' Chiefdom in Kenema district of Sierra Leone the local community used the sign of Charm in order to scare people away from certain open defecation areas.

Joseph A. Bangura, Programme Engineer, Christian Aid to Under Assisted Societies Everywhere (CAUSE), Sierra Leone



## Chapter 5

### SCALING UP AND GOING BEYOND CLTS

Since the innovation of CLTS in late 1999, experience with scaling up has been gained fast. CLTS has been introduced successfully in at least 15 countries. This has been mainly through hands-on training by the principal author who from 2000 to 2007 conducted at least 65 hands-on training workshops of regional, national and international levels in at least 15 countries. This hands-on training has been for over 1400 trainers, practitioners, WATSAN advisers, senior officers of Government, staff of NGOs and funding organisations, and field extension staff from at least 50 different agencies. This has been possible through the initiatives and support of a number of national and international development organisations. These have been active in supporting introduction to new countries and scaling up and spread within countries. (For details of agencies, countries and trainings see [www.livelihoods.org/hot\\_topics/CLTS.html](http://www.livelihoods.org/hot_topics/CLTS.html))

Many of those trained have in turn given hands-on training in triggering to people within their organisations. In at least India, Bangladesh, Indonesia and Pakistan, this training has been extended to others outside their organisations including people in government. Some of these trainings have been very good. There has been a trend, though, towards quite a number of these being of not very high quality.

**Mass gathering and function organised by ODF communities to celebrate the success of community-led initiatives in Rangpur, Bangladesh. Chairmen and Members of Union Councils from within and from neighbouring districts are invited to participate actively in such gatherings and celebrations. Emerging champions from amongst the elected people's representatives contribute directly in the spread and scaling up of CLTS by encouraging others.**

## Do's and Don'ts for Training and Spread

What follows will surely need to be changed and added to. Conditions vary and strategies will differ, but enough is known to be able to make suggestions, both common-sense and based on experience. These include elements that are essential and others that should be avoided.

### Dos

➤ **Identify hands-on trainers** among those already trained who have a good track record of triggering and who have ignited CLTS in communities that are doing well.

➤ **Select, train and support good hands-on facilitators** in organisations committed to CLTS.

➤ **Insist that all training is hands-on** involving the practical experience of triggering in communities. All training must include the experiential learning of triggering and immediate follow up.

➤ **Strive for full-time commitment of key trainers and facilitators.**

➤ **Organise facilitators to work in teams** through pre-triggering, triggering and post-triggering.

➤ **Start in more favourable conditions** and spread outwards to conditions that are more challenging (see Chapter 2 Pre-Triggering).

➤ **Seek and network with champions** who are committed to CLTS and who can provide sustained support.

➤ **Mount campaigns.**

➤ **Encourage competition. Celebrate success**

➤ **Foster innovation and learning.** Use ODF communities as learning laboratories.

➤ **Identify and support community facilitators** from among natural leaders in CLTS triggered communities and give them any needed training, encouragement and support to trigger and follow up with other communities.

➤ **Check progress after triggering.** If progress is poor, stop triggering and review the whole process to find out what is wrong.

➤ **Seek to make the CLTS movement self-spreading.**

➤ **Consider using CLTS as an entry point strategy** for other community-led development initiatives.

### Perhaps most important of all

➤ **Ensure that all training is hands-on and includes triggering in communities.**

To guard against and prevent serious dangers and

errors, remember the large-scale abuse of PRA with classroom training, neglect of behaviour and attitudes, and one-off activities in communities without follow up or outcome, spreading the tools without the empowerment. This has already happened with CLTS and is to be avoided at all costs. This means:

### Don'ts

- Don't sacrifice quality for speed in seeking to go to scale.
- Don't allow or support any training of trainers or facilitators with classroom lectures without hands-on triggering and follow-up.
- Don't engage with training agencies or institutions that do not work on the ground with sanitation but are ready to offer CLTS training.
- Don't engage with or support NGOs or other agencies that misuse the term CLTS to describe other practices such as teaching and instructing and do this for their own interests, exploiting communities in the process.

## Strategic actions by and for Agency Staff and Influential People

Strategic actions can be taken with international and national agencies, including donors and lenders, Governments, INGOs, NGOs, and political leaders involved in policy-making and influence, advocacy and disseminating ideas. These can also apply to those working in the media.

For all or any of such people and their organisations:

- Convene workshops and meetings for sharing lessons and experience, including successful cases to show what can be achieved
- Organise cross-country and in-country (states, provinces, districts) visits with face-to-face interaction with ODF communities, natural leaders and champions of CLTS
- Hold follow-up meetings and discussions for policy change where it is needed

And in support

- Identify organisations keen to adopt CLTS, link them with others with good practice, and arrange hands-on training
- Document, publish and disseminate regional, country or organisational stories of success and failure, training and learning materials, guidelines, videos and the like. And guard against misleading materials which might disseminate bad practices

Most importantly, explain and demonstrate to policy-makers, managers and finance officers, whether in governments, donor or lender agencies, or NGOs, that an essential precondition for CLTS is a consistent policy of no upfront individual household hardware subsidy. Where this entails conversion from subsidised hardware to support for training and facilitation, previous budgets are likely to be under spent at first. (See box right) If CLTS scales up, this will be a case of spending less at first, rising later. Once introduced and once a few ODF villages emerge, the expenses on training, capacity building, arranging visits to ODF villages and using the Natural Leaders as community consultants will rise and will require adequate but not excessive budget allocations.

It is very important that spending on subsidised household sanitation hardware should not be called CLTS. Any such practices should be identified and seriously discouraged.

Implementing agencies that find it difficult to adopt CLTS because its low cost limits their rate of disbursement have to be flexible and prepared to spend less initially in order to spend more later.

Strategies for changing policies when there are pressures to disburse substantial budgets include:

- Diversion to support for urban, market and school sanitation
- Funding a new NGO dedicated to CLTS (as with Dishari in Bangladesh)
- Rewarding communities which achieve total sanitation (as in India) (There are a range of views about how effective this can be and has been)
- Piloting and then systematically spreading the new approach (as with WSLIC2 see box), spending more as scaling up proceeds
- Research and action learning

## Training Facilitator Teams for Village Triggering

CLTS training workshops have been generally of 4 to 5 days duration. The days and times of the village visits are decided in consultation with the communities. A structure and sequence for a five day workshop can be:

**Day 1** Orientation and preparation. Background and evolution of CLTS approach from the traditional subsidised approach to sanitation. Failures of the past. Orientation and dry runs for the methods. Form groups, allocate roles (lead facilitator, co-facilitator, content and process recorder, environment setter, plus at least two for the

## Overcoming the problem of under-spending

Latrine construction was popular with Plan Bangladesh because funds could be spent directly on the poor families whose children had been sponsored, with a unit cost of \$30-\$50 for materials. But Plan also knew that many of these latrines were not used and subsidies could not reach all the families. After training by Kamal Kar in 2003, Plan staff saw how a whole community would pledge to stop open defecation and construct their own latrines. While Plan had projected construction of 600 latrines, adoption of CLTS in the same villages led to their declaring ODF and constructing over 6,000 latrines. Staff were ecstatic about the results, but as Country Director I soon noticed a problem. Because we were no longer paying for materials and technical staff, we were only going to spend \$12,000, mostly for training and promotion materials, out of our budget of \$60,000 for that year. We were achieving much, much more, but for only a fifth of the cost. Seen from Head Office, underspending could indicate poor planning and weak capacity to execute programmes as approved, and the money from sponsors would not be seen as directly benefiting the communities where Plan works.

With further experience, we found good uses for the funds, most importantly joining others to create a new NGO, Dishari, dedicated to the promotion of CLTS throughout Bangladesh. And the benefits to poor people from the funds disbursed were immeasurably greater.

Source: Edward Abbey, former Country Director, Plan Bangladesh

children's facilitation). Women trainees form groups for working with women. Groups decide strategies.

Village and or sub village chief, local community leaders or selected members from those communities where CLTS would be triggered are generally invited in the workshop to participate. After the day one's sessions these invited people (one or two from each selected village) return to their respective communities to arrange large meetings in a convenient place. The next day when the triggering team arrives the community is then ready for the meeting and everybody knows about the venue of meeting.

**Day 2** Triggering in communities, and sharing the experiences

**Day 3** Brief sharing and second triggering. Sharing first day's field experience briefly and reviewing video clips on facilitation by group members especially attitude and behaviours and discussing how these need to change, and then second triggerings, in new communities

**Day 4** Sharing group experiences of village triggering and distillation of learning especially comparing the first and second day's CLTS triggering experience. Generally the second day's facilitation improves radically if learning has been well facilitated from the first day. Planning and presenting plans for action in participants' organizations. Deciding roles of the participants in the post triggering follow-up are crucial. Fixing dates for joint evaluation, declaration and celebrations is also important.

**Day 5** Feedback and follow up workshop with feedback from communities on action and plans for action. This can also build competition between communities and between natural leaders.

Key people should be invited to day 5. Depending on context these may be politicians, people from Government, NGOs, bilaterals, multilaterals and other agencies involved in sanitation. This will give them an opportunity to observe and listen to the community representatives and hear about their action plans for achieving ODF status



### Points to check:

- Language. The lead facilitator if at all possible to be fluent in the local language. Trained interpreters for others as necessary.
- Groups' findings – those of women, those of children, etc – to be presented to the others at the end of the triggering
- Village head and local government officials to be informed well in advance that there is no hardware subsidy with CLTS. This is so that they do not suddenly show up and start talking about subsidy in the middle of the triggering process. If possible the history of subsidised sanitation programmes of the past (in the district/state/country) may be discussed and reviewed with them. Issues/questions like, who received subsidy? How were they selected? Did subsidy lead to ODF status? Could government afford subsidies for all? To be discussed.
- Members of the community to be informed about the time and venue. Remember the more people from the community participate the better are the chances of successful triggering.

It is important to meet again with those who have been trained after they have gained further practical hands-on experience. This is an opportunity to review, reinforce and consolidate skills and approaches, and to deal with any questions or issues that have arisen. To any such meeting, newly emerged champions can be invited to share their experiences and work out strategies for further improvement.

### Quality assurance for CLTS training

Deterioration of training quality due to fast scaling up, spread and growing demand for training has already started in some places. Government and international funding agencies have been engaging training agencies from the open market through open tender and selection. Some of these agencies have conducted a large number of trainings. These have been hands-on, involving the triggering of CLTS in communities, but have been followed by large gaps between the number of triggers and number of communities becoming ODF. This ratio, and other indicators of progress towards ODF status, should be closely monitored. Where these are disappointing, it may reflect poor quality of training,

**Proud ODF community in Chencha Woreda in Ethiopia showing their ODF status to outside visitors who included Kabale (village) and Woreda Council Chairmen from the neighbouring areas.**

### Changing in midstream – CLTS in the Water and Sanitation for Low Income Communities 2 Project, Indonesia

When the Water and Sanitation for Low Income Communities project (WSLIC 2) started in 2001, it gave grants (US\$ 3890 equivalent) to communities to use as revolving funds for construction of household latrines. Results were not encouraging. Benefits went mostly to better off households. No community repaid the fund after using it for the purpose for which it had been given. Problems were that the project paid more attention to water supply than sanitation and hygiene activities, communities did not know how to generate demand for latrines and the costly technology options often promoted excluded the poor.

In May 2005, four target districts (and two districts from an ADB supported sanitation project) began CLTS field trials with no hardware subsidy. When these succeeded, CLTS was extended in early 2006 to six more districts. At the start of 2007, the revolving fund strategy was abandoned in favour of CLTS for all new project villages. By August 2007, 34 villages and two sub districts were 100% open defecation free compared with none in the first three years of project implementation with the revolving fund approach.

This switch to CLTS mid-way through project implementation was made possible through the commitment of senior health department staff, support from the Water and Sanitation Program (WSP-EAP), practical demonstration and advocacy of how CLTS could deliver results quickly without any subsidies for hardware and the subsequent declaration from the Minister for Health that CLTS would be the new sanitation approach for her Department. Phasing-in CLTS gave the project the opportunity to 'learn by doing', to develop a group of experienced trainers, facilitators and natural leaders and to stimulate a demand for CLTS from other districts who feared being left behind as they saw the approach taking off and producing results. Most importantly, by making this change mid way through the project, WSLIC 2 has also stimulated change for rural sanitation policy for the whole of Indonesia.

**Source: Nina Shatifan, Participatory Development and Capacity Building Adviser, WSLIC II, Jakarta, Indonesia**

### Scaling-up CLTS through Community Activists in Pakistan

Pakistani officials from provincial and local governments, NGOs and donors had an exposure visit to Bangladesh in 2007. The overwhelming success of the Community Led Total Sanitation (CLTS) approach in Bangladesh left a deep impression on the Pakistan delegates that poverty was not an inhibiting factor in eliminating open defecation. While the central role of NGOs in spearheading this movement in Bangladesh was greatly appreciated, it was felt that the 'scale-up' through NGOs would present a 'bottleneck' in the Pakistani context.

On the basis of this learning, the Rural Support Programme Network (RSPN) determined that it would target village activists as the primary resource for community mobilization. The approach adopted was essentially an enterprise development approach to the triggering of a collective self awareness of the need to eradicate open defecation.

To initiate this process, the RSPN provided 'seed' training on CLTS to local community activists. All community activists that received this training were issued with a 'typology-of-contract' that enabled them to solicit payment from NGOs, local governments and philanthropists for each identified village that they triggered to eradicate 'open defecation'.

In facilitating the 'scale-up' through this approach, the RSPN is facilitating 'conclaves' for those community activists who have successfully triggered a village to eradicate open defecation. At these conclaves, the activists that are most successful in triggering behaviour change are invited to share their experiences with their colleagues. In supporting this, the RSPN is maintaining a database of all community activists who have successfully triggered villages to become open defecation free (as potential consultants for NGOs / governments/philanthropists).

**Source: Tanya Khan, RSPN and Mark Ellery, WSP, Islamabad**

or a lack of follow up. Actions can be suggested to assure quality:

1. Appraise all trainers carefully. Remember that not all facilitators are good trainers, and not all who participate in a training workshop are good facilitators either.

2. Ask short-listed agencies to send their potential trainers to hands-on training of known quality.

3. Identify and select good trainers based on their aptitudes, behaviour, attitudes and performance in the training.

4. Once well selected, trainers should be free to be flexible over selection of villages and sequence and timing of activities. This includes shifting fieldwork days, if necessary. For example, where the first day's triggering fails for some reason out of the trainers' control, or there are serious gaps in participants' understanding, a second triggering may be delayed. Training designs should not be imposed from outside without consultation. Lectures by visiting dignitaries in the middle of training should be prevented.

5. Carry out random and surprise checks of training in progress.

6. Make sure that the training agencies are responsible not just for training but for pre-triggering, triggering and post-triggering, and for these activities in a defined area such as a district. (In some cases CLTS has come to mean only triggering, for example of 25-30 villages without follow up!). This includes choosing the right participants for any training so that triggering and post-triggering can be effective, for example, village chiefs and local formal and informal leaders, so that they understand the approach and do not sabotage it.

7. Assess performance over the longer term on the basis of outcomes not outputs. This means assessing post-triggering performance and the achievements of ODF status not the numbers of trainings or triggerings conducted. Audits should be regular, and at least six-monthly. These should be in the terms of reference of agencies hired for training. Indicators of good training, facilitation and follow up include:

- rapid progress with household latrine construction
- a high ratio of ODF villages to villages triggered
- the emergence of Natural Leaders
- improved latrines, moving up the sanitation ladder
- collective local actions moving on to solid waste

management, drainage, cleaning the village environment etc

- marketing developments.

### Campaigns

Intensive campaigns have proved effective in parts of Bangladesh, India, Indonesia and elsewhere. In India some of these have been led at the District level, as in Jalna District in Maharashtra, Mandi District in Himachal Pradesh, and Panipat District in Haryana. More generally, there has been a focus on achieving ODF status at a sub-district level, for example in a Union or Upazilla (Bangladesh), a Taluka, Block, Panchayat Samity or Gram Panchayat (India), or a Kecamatan (Indonesia). Such campaigns require support at the policy level and the support and leadership of local government.

#### Key elements in these local campaigns have been combinations of

- Committed local leadership, both political and administrative
- Dedicated task forces at different levels
- A team approach within organisations and across departments and organisations (Government, NGO etc)
- Staff, whether NGO or Government able to devote themselves full-time to the campaign
- Orientation and training for religious leaders, politicians, village engineers and others
- Children as active agents for change
- The use of meetings – both regular and special – to stress the campaign, to get reports of progress, to give public recognition to champions and communities, and to foster competition between communities, between local leaders, and between staff
- Regular systems of reporting
- Strict verification of every community claiming to have achieved ODF status
- Celebrating ODF status (see next section)
- The use of media – theatre, video, radio, newspapers, television.

Campaigns are vulnerable to exaggerated reporting and false claims, especially when there are targets and recognition or rewards for meeting them. The most effective measure to prevent or minimise this is probably stringent verification and certification (see above), with a prominent role to natural leaders from other recognised and accepted ODF communities. The best test of verification is the number of communities failed. If none fail, something is likely to be wrong.

**ODF community of Vidyasagar colony in Kalyani Municipality in West Bengal, India proudly declared the sanitation status of their neighbourhood. This influenced many other slum communities in the town to become ODF.**



#### A campaign with many organisations and actors

**Hatibandha Upazilla was the first Subdistrict to be declared ODF in Bangladesh. This was after an intensive campaign led by the administrative head supported by all political parties. Other key factors were the commitment of NGO staff – Plan Bangladesh and Dishari, an NGO dedicated to CLTS – working closely with local government; the training of imams and their preaching in mosques; task forces at all levels; days when staff in different organisations would go to villages together; progress reporting through regular meetings (at which lagging communities might hear "so you are still eating shit!"); children's forums and active involvement; large inspection teams ("even people not invited could come") for verification of ODF status; and certification by the District Magistrate. Some 10,000 people came to the celebration of the Upazilla's ODF status in January 2006. People look back on the ODF campaign with nostalgia as a good time. But that was not the end. The campaign switched to promoting improvements to latrines, with steady progress up the sanitation ladder, and a programme called SSHHE – School Sanitation and Household Hygiene Education.**

#### Fostering pride and competition

Pride and competition can be fostered between communities, wards, other administrative units, sub districts and even districts.

This can be like a second triggering. Some ways to do this are:

- Encourage visits to very successful communities. Use them as training and learning laboratories for outsiders. Neighbouring villages may also notice visitors coming and then come to see for themselves.
- Identify strong and committed natural leaders who can trigger and support CLTS in other communities. Find Government or NGO organisations that can enable them to do this, providing whatever support for travel, subsistence and honorarium may be needed. Take care in doing this not to undermine spontaneous spread between communities.
- Use regular meetings for reporting progress by communities and administrative units, encouraging competition, and asking representatives their plans and targets.
- At such meetings, ask the worse performers if they would like assistance from those who are doing better. Often for reasons of pride they will decline,

## Champions make the difference

Dr. Purnama Augustine, the head of the health centre in Lembak subdistrict of Muara Enim in South Sumatra spearheaded a local effort to get the entire sub-district free from open defecation. Dr Augustine, a dentist herself, set up a core CLTS team and trained all of her staff including the drivers. This team then provided training and 'trouble-shooting' support to village CLTS teams set up by the communities themselves. She got all the village mid-wives involved in the process of triggering and post-triggering follow-up. Thanks to these efforts, 16 of the 18 villages in her sub district were 100% ODF by August 2007 and the other two were very close to achieving that status. Dr Augustine received national recognition for her efforts and received from the President of Indonesia an award as the best head of Puskesmas (Sub district level health centre).



Plan Bangladesh involved the local dealers of sanitary hardware in CLTS post-triggering follow-up meetings. After triggering of CLTS, as the demand for sanitary hardware grows, it is important to establish link between the users and the sources of availability.

## Promote supply of hardware and access (see also section Facilitate access to sanitary hardware in chapter 4)

CLTS quickly creates a demand for sanitary hardware. Many people may dig simple pit latrines and improvise plastic, tin and other materials for the chute. Others will want a higher standard and more durable solution. Also, those who start simply often want to improve and move up the sanitation ladder. When this happens, especially when CLTS goes to scale fast, supply of materials often lags behind demand.

Many actions can be taken to promote supply and access. Some of the more obvious are:

- ▶ Encourage entrepreneurs to find out sources of bulk supply, to make bulk purchases, and to sell locally and encourage entrepreneurs to sell locally
- ▶ Invite traders to community meetings
- ▶ Support groups who buy in bulk and supply communities cheaply (as with the Panipat rural sanitary marts (see box))
- ▶ Encourage and arrange training for local entrepreneurs, community-based organisations, youth groups, natural leaders and others to manufacture sanitary hardware such as rings and slabs (if appropriate)

## Competing for a goat

The Village Chief of Sumbercanting village of Bondowoso district of East Java declared a reward and started a vigorous competition between the hamlets of the village for achieving ODF status. He declared a prize of a goat for the first ODF hamlet. This was his token of appreciation. The declaration of the goat reward enlivened competition between the hamlets.

Source: Wano Iwantoro, WSP-EAP, Indonesia

## Rural Sanitary Marts. Innovations in Panipat District, Haryana

CLTS went to scale fast in this relatively prosperous District, creating a huge demand for sanitary hardware and for masons. Five self-help groups of 10-20 persons were provided with interest free seed money and a rent-free shop (called a Rural Sanitary Mart) to procure pans and other materials in bulk from the manufacturers. Village Water and Sanitation Committees collect orders which are then delivered to the villages in bulk. This has brought down the price substantially, and the Marts are able to take a modest profit. Working together with masons, the Marts have also built toilets on contract, with several low cost options.

Source: Dr Amit Agrawal, ADC Panipat

- ▶ Train masons and village engineers, and link them in with suppliers of the Total Sanitation and Marketing Project (see box)

## Learn lessons

**The idea here is continuous learning, innovation and change.** Review and reflect on experiences with facilitation and community responses. Do this together with community members, natural leaders and others. **Learn from other initiatives, organisations, regions and countries.** Draw lessons for future practice and sharing. Link this where possible with scaling up and with the spread of CLTS to other communities and areas. Use successful communities as learning grounds. Learn lessons too from places where CLTS has not taken off. If you can, widen the impact of your work by communicating the experiences and lessons to others in the wider world.

## Beyond CLTS

CLTS processes have proved a powerful springboard for other community-based initiatives. ODF is an excellent basis for progress up the sanitation ladder, hygiene and behaviour change, creating a healthy environment, and the generation of livelihoods.

The sanitation ladder is illustrated in the chart. Follow up on ODF status includes handwashing facilities, elevated flood-proof latrines, septic tank models, composting latrines, baths, water storage and encouraging many such improvements.

## The Total Sanitation and Sanitation Marketing Project in Indonesia, India and Tanzania

This project, funded by the Gates Foundation, works in Indonesia, India and Tanzania. CLTS is one of three linked components of the project. The other two are sanitation marketing and an enabling environment. CLTS and sanitation marketing are seen as two essential and mutually reinforcing approaches for sustained changes in sanitation and hygiene behaviour at scale. The sanitation marketing component takes further the local demand created in ODF villages and enhances development of local entrepreneurs and strengthens linkages with those of external ones. It gets into market research, product and business development. The enabling environment component works with sanitation sector institutions to improve local regulatory frameworks, and national policies and strategies, aiming to make possible unhampered growth of demand and supply forces in local sanitation markets, and to share the lessons learned in trying to influence them.

Source: Dr Nilanjana Mukherjee, Consultant, WSP EAP, Jakarta, Indonesia



As the household and collective hygiene behaviour changes after a village achieves ODF, the standard and quality of latrines tend to improve gradually. Households find reasons to invest and improve the quality of toilets from the initial low cost pit latrines they construct after triggering. As a result demand for sanitary hardware is first felt at the local community level. The picture above shows an artisan family in a village in Kampung Sup near Phnom Penh who were making cement rainwater harvesting jars. They only had to diversify their business and make latrine slabs, pans and rings in response to growing demand after ODF status was achieved. The family's income went up five times and they were very happy.

## From CLTS solidarity to building crop protection embankments: a Community-Led initiative

In Keorjor Union, a haor area in Bangladesh, where annual flooding destroyed large areas of rice, a number of communities successfully implemented CLTS. This brought a great deal of social solidarity within communities that had become ODF and also networking between them. The Natural Leaders from at least 17 protection, facilitated by CARE staff. Under pressure from Natural Leaders, the present and former Union Parishad chairmen committed their support to the local communities' collective initiatives. Villagers from ten villages united and formed respective embankment protection committees for repair of the 5k.m. long embankment passing through their villages.

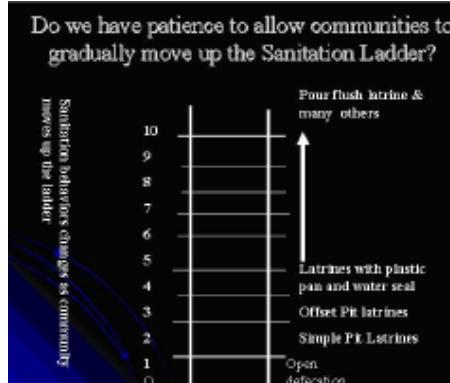
Communities collected money. Those with larger landholdings made donations. US\$ 2379 was collected in two weeks. Committees organised equipment. Animals for slaughter and food were provided. The poor and landless contributed labour. There was a festive mood. The final levelling work was done through a CARE food-for-work programme. According to Md Habibur Rahman, a member of the Union Parishad, this collective community initiative brought everyone very close and developed a strong fellow-feeling amongst the communities which was not there before. The embankment was completed.

Agriculture volunteer M Ashraf said, "We cannot remember if we ever harvested as much rice as we did last year because of protection embankment. This has ended the rivalry between two groups within the Union Parishad leadership, and enhanced overall fraternal bond and reduced exploitation by the rich." A few villagers commented that the ultra-poor laborers would not have to migrate to the city any more in search of work. There has been a great deal of improvement in food security at household level just because of one year's proper harvest

Source: Md. Kamruzzaman, Project Officer, Education program, CARE Bangladesh Dhaka.



Fiberglass coated, scratch free and high slope plastic pans have been designed and produced by private sector entrepreneurs in Pune, India after CLTS was introduced in the state. Samples of such low cost (US\$ 3-4) are being sent to countries like Indonesia and others in Africa.



## From CLTS to food security

CLTS triggering took place in Ulitana Bokole village near Arba Minch in Ethiopia in October 2006. CLTS then spread through daily coffee ceremonies at which families who had cleaned up their area brought other people to show what they had done. The first four households dug their own latrines, but for the remaining 26 they revived the traditional practice of debo, collective community work, which had almost stopped. The village was declared ODF in a couple of months from triggering. Their Enset plantation area became free of 'rrrrrrr' (err is shit in local language). Having achieved this, the village people realized that in a group they could do more.

During a participatory review analysis the women realized that they could use the debo system to stop seasonal hunger in their village. They started working together to collect manure for their Enset plants. Preparing Enset for eating is time-consuming but by using debo they could ensure that no family went hungry during the time of food shortage.

They also proposed to trigger CLTS in a neighbouring village, Afa Hyzo, with 70 households.

This was reported by the community of Ulitana Bokole to Solomon Kebede and Theresa McDonnell Fristrom during the Vita (RTI) Participatory Review in Ethiopia in July 2007.

A community in Chencha Woreda in Ethiopia innovated this simple handwashing device. Plastic cans with perforation were used as water taps to wash hand with soap after defecation.

## Seed and support a lateral spreading movement

The greatest impact can be achieved if CLTS becomes a movement that spreads on its own or with minimal support. An ideal to aim for can be a spreading movement that is in effect a Community Led Scaling-up process. For this, see if you can encourage and enable natural leaders to be in the forefront as facilitators who trigger in other communities and give on-going encouragement and support.

The opportunity here is for CLTS to be scaled up locally and at low cost. Where donor agencies, government departments, and national and international NGOs decide to integrate CLTS into their sanitation programmes without compromising the basic principles of local empowerment, or use it as an entry point for broader livelihoods or health programmes, they must bear in mind that community consultants and facilitators will be a major resource.

The best facilitators tend to be local people who have learned CLTS from first-hand experience in their own communities and who have not developed the habit of



### From elimination of OD to food security

Jalagari, one of the poorest villages in Gaibandha District in Bangladesh, suffered severely from Monga, the annual seasonal food crisis for which the area is notorious. During monga, the poorest families starved, migrated or sought government food distribution. CLTS was triggered in the village in October 2004, shortly before the onset of Monga. With the growing excitement and solidarity of stopping OD, members of the community committed to tackling the problem together through their own efforts. The better off households were more concerned about the poor and landless than before and gave them more help and support than in previous years. A vining potato, 'mach-alu', a traditional crop that had been almost forgotten, was identified as a possible solution. All households decided to plant it in and around their homesteads. Within a week more than 4000 pits had been dug by almost all families and 'mach alu' seeds were planted as a mass movement. Landless families planted 4-5 plants in homesteads, each of which produced 3-4 kgs of potato per plant after eight months. Those with land allowed the landless to interplant the vining potato between the rows of arecanut and other plantation trees on their land. The next Monga season was totally different and large amounts of the potato were harvested, eaten and sold in the market. Today in 2007 Jalagari not only produces more than 25 tones of vine potato but supplies more than 10 metric tones of seed potato to many villages, and the crisis of Monga has been largely eliminated.

ABOVE Immediately after achieving the ODF status local communities in Shibpur and Boali in Majchar union of Bajitpur Upazilla in Bangladesh realised how urgent it was to work together to protect the fragile mounds from severe erosion of floods in Haor. Testing the power of collective local action triggered during CLTS, and the subsequent success, communities living in the environmentally vulnerable mounds in the Haors constructed brick walls using their indigenous knowledge. These unique walls are retractable, that is, they can be moved to extend the size of the eroded mounds. No cement was used in construction of these walls. Engineering marvel! Cost of construction of 1km of such wall is one tenth the cost of guard walls being constructed by CARE Bangladesh.



ABOVE In Korjhar Union of Bajitpur district in Bangladesh many ODF communities joined hands and constructed long crop protection embankment to save their only crop of rice from annual flooding of Haor areas. Photo: Kamru Zaman CARE Bangladesh.



LEFT AND ABOVE Natural Leaders of Jalagari village of Gaibandha district in Bangladesh are seen standing with freshly harvested 'Mach Alu' (Vine Potato) which they cultivated in plenty to fight out 'Monga' seasonal hunger and food insecurity. All initiated from the success of CLTS in the village. Varieties of vine potatoes which grow luxuriantly in the area made a big difference when everyone in the community wanted to eliminate hunger from the village.



ABOVE AND RIGHT Community women of Vidyasagar colony of Kalyani The Municipality in West Bengal, India, decided to pave the base of all the 69 hand pumps in their colony and construct cemented platforms to avoid accumulation of waste water, garbage and filth around the drinking water source. Municipality gave them some unused brick-bats the rest was done by them. All this happened within two months of achieving of ODF status. This was the first slum to attain ODF status. Within a year all the 52 slums in the Municipal town were declared ODF.

## Spread through community-led drama

Nijera, a project of CARE in Northwest Bangladesh, supports ODF paras (hamlets) to spread CLTS to their neighbours through drama. Field facilitators concentrate first on igniting CLTS in one para. When within a few weeks it achieves ODF status, they arrange a gathering with other paras, usually in the evening. Nijera provides logistic support such as a generator and sound system, but the show is organised and run by the para and its natural leaders (most of them from the poorer class), who stand on the stage and share how they achieved ODF status. CARE facilitators do not instruct the process; they rather inspire community people to arrange their own event. This is also helping to strengthen solidarity already created by CLTS and NLs and other people of the para feel proud of their accomplishment and celebrate it.

In almost all communities in rural Bangladesh there is someone who is a natural poet who can compose a song on CLTS and a singer who will perform it on stage. Similarly, there are others who will quickly write a drama on sanitation which natural leaders and adolescent boys and girls perform on stage. Usually, in the drama, different challenges of the CLTS process are introduced through comic presentations. In one community's drama a true story was told of a rich person who was unwilling to install a latrine. In the drama, a 'matchmaker' brought some guests for his daughter's marriage. One guest wanted to use the latrine on an urgent basis, but the rich person did not have one. The embarrassing moment is portrayed through a comic scene that creates huge laughter among audiences. After the embarrassing incident the rich person immediately called NLs to help him to install a latrine.

The fun and celebration of these occasions inspire nearby communities to start the CLTS process for themselves.

Source: Anowarul Haq, Team Leader, SDU, CARE Bangladesh

'teaching'. There are repeated experiences where natural leaders who emerge are energised and inspired to go to nearby communities and trigger them, as in the box. But so far it has ended there.

As the box indicates, spread can occur spontaneously. Experience to date is, however, that support and

## Spontaneous spread in Kilifi District, Kenya

CLTS was successfully triggered in Jaribuni village by a team from Plan International, Kenya. On a follow up visit they were surprised by an announcement by the local chief. He told them that the village CLTS steering team was scaling up CLTS to all the villages in the Sub location and had arranged dates for visits. One motivation was that other villages were polluting Jaribuni's water supply.

Source: Samuel Musyoki, Programme Support Manager, Plan Kenya, Nairobi.



After testing the strength of collective community action through achievement ODF status, the empowered community of Vidyasagar colony of Kalyani Municipality near Calcutta in India cleaned up a drain that had been clogged with garbage for over 12 years. It used to overflow filthy gutter water during rains. Children standing in front could not believe that there was such a strong and long drain underneath the accumulated filth of many years.

encouragement are needed. There appear to be major opportunities for NGOs to spread CLTS by providing this. Options in support of community facilitators include:

- ▶ Verbal encouragement and recognition
- ▶ A short training based on local experience and tips in this handbook.
- ▶ Documentation and sharing of the practices of community facilitators
- ▶ Peer workshops for Natural Leaders to share experiences and plan an extension strategy
- ▶ setting up a website with names, photographs and contacts for prominent Natural Leaders who are available as Community Consultants and Facilitators
- ▶ Providing light support through daily allowances and/or honoraria and/or access to transport and/or covering transport costs. In doing this care will be needed to provide support that encourages and supports and does not undermine the energy and commitment of Natural Leaders

More formally, but still in a decentralised and self-organising mode, a variant of spontaneous spread is being followed in Pakistan where 70 NLs have been trained (See Page 63 Scaling up through the community activists in Pakistan). They are resources that can be tapped by local authorities. A contract proforma has been drawn up to be used for engaging them for triggering and follow up.

In all these cases the aim is to go to scale locally at low cost. It is a very high priority to learn more about how this can be done, and what forms of encouragement and support are effective. Users of this handbook are requested to reflect and share their experiences. A forum and network for information and sharing experience with Natural Leaders has been set up by the Rural Support Programme Network in Pakistan Website: [www.rspn.org.pk](http://www.rspn.org.pk) (email [Tkhan@rspn.org.pk](mailto:Tkhan@rspn.org.pk))

The importance of enabling and catalysing CLTS to become a lateral spreading movement cannot be overemphasised. Many initiatives are needed with different approaches to scaling up CLTS, combined with shared learning about what works and what does not. At present, spread by community facilitators with light and sensitive support appears the most promising way in which very large numbers of people can benefit from total sanitation in a short time.



ABOVE AND RIGHT Clean and nice village roads. ODF communities of a village in Lumajang district in East Java province of Indonesia and village of a Kampung Spu province in Cambodia cleaned and decorated the central village road immediately after ODF status. Such reflection and outcome of overall cleanliness is seen in many ODF villages irrespective of countries or cultures.



## Appendices

## APPENDIX A: Genesis, background, spread and scaling up of CLTS

CLTS was innovated in late 1999 by Dr. Kamal Kar while leading an evaluation mission for WaterAid (a British NGO) working in Bangladesh. The mission was evaluating a WaterAid-supported sanitation project being conducted by WaterAid and a local NGO partner called Village Education Resource Centre (VERC). The project involved household latrine construction, heavily subsidised with externally-supplied hardware.

The mission found that though the number of toilets in the villages did increase, the practice of open defecation continued. The evaluation also revealed that despite varying household poverty levels in different regions of Bangladesh, the amount of sanitation subsidy provided was the same everywhere. One of the mission's recommendations was to carry out a participatory poverty assessment and develop a differential subsidy strategy based on poverty levels.

In a subsequent stage, the mission considered the links between poverty and the practice of open defecation – with a focus on the village of Mosmoil in Rajshahi District of Bangladesh. Dr. Kar and some of the mission team members noted that the provision of an external hardware sanitation subsidy was not the driver that led to the community's decision to stop the practice of open defecation. Rather, the decision was a collective one made by the entire community. The reason for that was community's collective understanding of the fact that no one was safe in the community unless each and everyone stopped open defecation completely and changed their hygiene behaviour practice. An open defecation free environment is a 'public good'. It was not possible to achieve that if a few own and use toilets which are a private good, and others defecate in the open.

Furthermore, it was noted that the external hardware subsidy (and prescriptive toilet designs) actually hindered the collective decision making process. Communities of the very first few villages where CLTS was triggered said that if hardware subsidies were available for the poor, they would all try to classify themselves as "poor". On the other hand, once these community residents realized that they were consuming each others' shit (through their own observations as part of the CLTS triggering process) they said that they decided they could no longer live in such a filthy environment, and thereby made the decision to end open defecation.

Mosmoil's participatory analysis of their sanitation profile, and their collective decision to end open defecation, was news that spread quickly to neighbouring villages. Similar actions began to take place in these communities. Mosmoil and these other 'open-defecation free' or ODF villages then put up sign boards declaring that no one in the village defecated in the open.

The new approach was further applied to four pilot districts of VERC's working areas in the north and south of Bangladesh where the same exciting results were achieved. Very soon hundreds of villages declared themselves "ODF".

With the support of WaterAid, VERC changed their approach of subsidising hardware sanitation at the household level and continued implementing 100% total sanitation without subsidy approach. The results were very encouraging and the money earmarked for subsidy for latrine construction was saved and was utilised to support spread and scaling up of the approach through capacity building of the emerging Natural Leaders, workshops, demonstrations and other extension activities. More than thirty location specific and appropriately designed low-cost models of latrines were innovated by the 'community engineers'. Hundreds of Natural Leaders developed from the process of emergence of ODF villages, who contributed directly to the spread and scaling up of CLTS to new areas. Many of these Natural Leaders were used as Community Consultants by NGOs who adopted CLTS approach in their sanitation programme. For details please see IDS Working Papers 184 and 257 "Subsidy or Self Respect?" (for reference See APPENDIX G).

After the approach was developed, Plan International and CARE introduced it in their Bangladesh country programs. Front line staff and managers alike were trained by Dr Kar in the new approach, and the learning integrated into field programming. Learning from the experience of Bangladesh, Plan has spread the approach and introduced it to over a dozen countries in Asia, Africa and Latin America. World Vision and Bangladeshi NGOs such Dhaka Ahsania Mission (DAM) also integrated the new approach in their ongoing sanitation programmes. With the promising success of the CLTS approach and growing interest amongst communities, a consortium of different Bangladesh-based NGOs promoting CLTS known as DISHARI was formed in 2004.

In 2001/2, CLTS was introduced in the Indian state of Maharashtra by the State Government and was supported by WSP- South Asia with the advisory and consultancy

services of Dr. Kar. Based on the success of the first two pilot districts (Ahmednagar and Nanded), the CLTS approach was expanded to all 32 districts in Maharashtra. Later on, CLTS was introduced in Himachal Pradesh, Haryana, Andhra Pradesh and Madhya Pradesh states. Thousands of Gram Panchayats (more than four thousand G.P. in Maharashtra) and villages in these states have now been declared ODF.

However, household sanitation subsidies continue to be offered by the Government of India under a program known as the "Total Sanitation Campaign" (TSC). Unfortunately, these subsidies do interfere with the scaling-up of CLTS. Maharashtra State coped with this by converting the up-front household subsidy into a collective community "reward" after a particular village achieved ODF status. Himachal Pradesh State underplayed the issue of central government subsidies in its sanitation programs, so as to reduce their interference with the community-led process.

CLTS was introduced in Cambodia in 2002 by Concern Worldwide. Pilots were conducted in four provinces (Pursat, Kampong Cham, Kampong Chhnang, and Siem Reap). Though Concern didn't continue to promote the approach, word of it spread and it was later picked up by the Ministry of Rural Development, Plan Cambodia, and UNICEF. CLTS is now being implemented in at least eight of the 24 provinces of Cambodia, and the Government of Cambodia is considering adopting it as its official rural sanitation approach.

As of 2007, largely through 'hands on training workshops' facilitated by Dr. Kar and organised by WSP, UNICEF, Plan International and a few other international NGOs including some national governments, CLTS has been introduced to over twenty countries globally. These include (in order of year of adoption):

In February and March 2007, two major international training workshops on CLTS were organized by PLAN International RESA, Johannesburg in Dar-es-salaam in Tanzania and in Awassa and Addis Ababa in Ethiopia. More than a hundred participants including WATSAN advisors, Programme Managers, front-line staff from Plan countries of Kenya, Tanzania, Ethiopia, Mozambique, Zimbabwe, Sudan, Egypt and Uganda, government officials, WaterAid staff, WSP and other national and international NGOs were trained by Dr. Kar. During the last three to four months of 2007, more than sixty villages in Ethiopia alone declared themselves as ODF. Trained staff of PLAN Kenya, Uganda and Zimbabwe conducted training of other field staff on their return and triggered CLTS in villages. In October 2007, with the support of UNICEF two regional workshops on CLTS were organised in Nairobi, Kenya and in Lusaka in Zambia. More than 150 participants from government departments, UNICEF regional and country offices of Kenya, Ethiopia, Zambia, five different Regional Training Centres of UNICEF in Africa, IRC, Plan International, WaterAid and national and International NGOs participated in the two workshops.

Country	Year of introduction	Supporting agency
1. India	2003	WSP-SA, Governments of Maharashtra, Himachal Pradesh and Haryana
2. Cambodia	2004	Concern World Wide was the first to initiate CLTS in Cambodia. Ministry of Rural Development, UNICEF and Plan International are some of the major users of the approach.
3. Nepal	2003	International, NEWA (Nepal Water for Health) and WaterAid first introduced CLTS in Nepal.
4. Indonesia	2004	WSLIC- II project (Water and Sanitation for Low Income Communities) and Ministry of Health, Government of Indonesia; WSP- EAP (Water and Sanitation Programme – East Asia and Pacific Region), first initiated the approach in five pilot areas. Later it spread to all major islands of the country.
5. Uganda	2002	First introduced in Kibale district under Irish Aid supported District Development and Decentralisation Programme
6. Zambia	2003	DWASHE and WaterAid Zambia first initiated CLTS in Monze district on a very small scale, after a review of WaterAid's programme by Dr Kar. Later, in December 2007, UNICEF and the Ministry of Health arranged a national workshop and hands-on training on CLTS for government staff, NGOs and INGOs. CLTS was then also implemented in Choma district.
7. Pakistan	2004	UNICEF and IRSP, an NGO based in Mardan, NWFP, started CLTS in Pakistan, with support from WSP-South Asia. RSPN, AKRSP, NRSP, TRDP and the Kushhal Pakistan Fund all use the approach.
8. Nigeria	2004	WaterAid Nigeria piloted CLTS in four states: Benue, Enugu, Ekiti and Jigawa.
9. Mongolia	2004	ADB supported Urban Slum Development Project and testing of the approach was done in GTZ supported Nature Conservation and Buffer Zone Development Project in the Gobi
10. China	2005	Introduced by Plan China in Shaanxi Province

Country	Year of introduction	Supporting agency
11. Ethiopia	2006	VITA (formerly Refugee Trust International), supported by Irish Aid first introduced the approach in Arbaminch. Plan Ethiopia is also one of the main implementers of the approach.
12. Yemen	2006	The Social Fund for Development (SFD) and the Ministry of Rural Development within the Government of Yemen introduced CLTS through a hands-on training of trainers and facilitators from SFD and a few national and international NGOs in Ibb district in April 2007.
13. Bolivia	2006	UNICEF, Plan Bolivia and WSP-LAC initiated CLTS in Bolivia. Plan, Tanzania, A regional hands-on training workshop was organised by Plan RESA for the staff of eight Plan countries in Africa
14. Tanzania	2007	A regional hands-on training workshop, organised by Plan RESA for the staff of eight Plan countries in East and Southern Africa, was held in Tanzania in February 2007.
15. Kenya	2007	In May 2007, after attending CLTS hands-on training workshops in Tanzania and Ethiopia, Plan Kenya decided to pilot Community Led Total Sanitation in three Development Areas.
16. Malawi	2007	Plan Malawi staff who participated in hands-on training workshop on CLTS facilitated by Kamal Kar in Tanzania and in Ethiopia introduced the approach on a pilot basis.
17. Burkina Faso, Ghana and Mali	2007/8	Supporting Agency: After piloting CLTS in Nigeria, WaterAid is now planning to roll it out to the other three countries in their West Africa programme, Burkina Faso, Ghana and Mali. The programmes in these countries are currently still in the early stages of the process.
18. East Timor	2007	WaterAid Australia and Plan East Timor are in the early stages of implementing CLTS.
19. Sierra Leone	2008	UNICEF Sierra Leone, the Ministry of Health and Sanitation, Plan UK and Plan Sierra Leone arranged a series of hands-on training workshops with Kamal Kar. Workshop participants triggered CLTS in 34 villages.

## APPENDIX B: Open Letter on Going to Scale with Community-Led Total Sanitation (CLTS)

Dear Colleague,

Recently, there has been a rapid spread of understanding and acceptance that subsidies to rural households for sanitation hardware are counterproductive and inhibit collective local action. This presents opportunities and challenges. The accelerating spread of Community-Led Total Sanitation, and of understanding what it entails, is hugely encouraging. We hope that its enormous potential for reducing poverty, enhancing human wellbeing, contributing to the MDGs, and leading to other collective actions, can be realised.

We are writing this open letter because in our view this potential will only be achieved if quality is maintained as CLTS goes to scale. We write in our personal capacities, basing what follows on past experience and current trends.

With PRA in the 1990s rapid spread sponsored and demanded by donors, lenders and governments led to much bad practice. The label PRA was adopted in many places without the behaviour, attitudes and practices of good PRA. Demand for trainers far exceeded the number of good trainers available. The gap was met mainly by consultants, NGOs and groups who were not competent and did harm. We are concerned that the same should not occur with CLTS. Unfortunately, there are indications that it has already begun. In our considered view, to prevent this and to maintain and enhance quality, three critical aspects deserve special attention: focus and restraint in funding; good CLTS training that is hands-on; and effective follow up after triggering.

For **focus and restraint in funding**, we urge donors, lenders and governments to avoid programmes driven by big budgets, targets and pressures to disburse, and instead to go to scale in a steady manner, focusing on good training and building up and supporting a cadre of dedicated and committed staff and local-level natural leaders. Much damage has been done by pushing too much money too fast at NGOs. Enough funding is needed but not too much.

For **hands-on training**, identifying good trainers is the key, and then supporting them to become full time, with all training hands-on with communities. Some of the best people are tied down by other jobs. Wherever possible, they should be allowed to be fulltime on CLTS. Deterioration of training quality due to fast scaling up has started in some places. It is vital that the quality of training be monitored and no organisations or individuals recruited who lack the experience, attitudes and behaviours that are essential.

For **follow up**, triggering should never be a one-off event but the start of a continuous process of encouragement and support leading to communities becoming sustainably free from open defecation, and empowered and inspired to go further.

This is a critical time in the history of CLTS. If all those concerned ensure these three actions, the future should be bright indeed. And if they do not, a huge opportunity for gains for rural people will have been tragically missed. We appeal to whoever can influence events not to let this happen.

Please feel free to give this letter wide circulation.

Yours sincerely,

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**Distributed in the East Asia Sanitation Conference (EASAN) held in Oita, Japan, 30th November-1st December, 2007 and at AfricaSan, held in Durban, South Africa, 18-20th February 2008.**

## APPENDIX C. Triggering in Special Conditions

### Where people defecate in rivers or standing water

In places where people defecate in surface water (e.g. rivers, lakes, backwaters etc) there will be less visual impact by doing a transect walk. However, you will generally find that community members use that water for bathing as well as maintaining personal hygiene such as rinsing their mouths. In such situations you could request a bucket of water, and question "would you rinse your mouth out with this water? Many may say "yes".

At this stage, you can calculate the daily production of faeces by all households in the community. Also ask how many other communities might be defecating in the same water (e.g. further upstream or around a lake). After this calculation ask them to wash their face and mouth and gargle with that water. Probably no one will agree to do so. Ask why they refuse if they have happily been using the water both for shitteing and for washing up until now.

The calculations of quantities of shit produced by the community should lead into further questions and discussions, for example, where does all the shit go? What are the possible effects of having so much shit on the ground that could contaminate ground water bodies below the ground. These types of questions will get the community starting to think for themselves about the possible impact of open defecation. There is no need for you to tell them.

DO ask questions and try to get the community to work things out for themselves. Ask questions of different community members – men and women, children, rich and poor – to ensure that they all take responsibility. At the end of the analysis, you could ask them "who would go for open defecation tomorrow"? Or "who would take bath in the pond or river where the entire community has been defecating"? Ask them to raise their hands. If no one raises hands, ask them what they would do instead.

### Fixed point open defecation.

In some parts of East Africa, toilets are mandatory but are often constructed in the form of open pits built close to the home. These are sometimes referred to as "fly [and mosquito] factories".

When you ask who defecates in the open, few if any may raise their hands. Then ask:

- If you look down the hole, what do you see? Shit? If yes, can you see (flies) maggots on the surface? If you put a stick down and take it out, is it smeared in shit? Do you think flies breeding inside the pit can come out? If the answers are all yes, how is this different from defecating in the open? Is it even worse?
- Visit some of these toilets during the transect walk.

People may decide quickly to cover all pit latrines. They may also take the interim step of pouring ash in to help eliminate the flies. This approach could also be adopted in raising community awareness about unhygienic household latrines such as those used in China and Vietnam where human excreta is not safely confined but is posed to open environment with all chances of spreading contamination.

It is the same issue/principle, but in order to avoid the chances of offending an individual household rather than pointing out flaws in a community as a whole, visits are recommended to many such households within a community by two or three separate groups of facilitators and community members during defecation area/sanitation transect walk. Findings of all the subgroups may then be discussed in a large group around the map.

### Where toilets exist but are not much used.

This is common in economically more developed areas. Toilets are not much used for reasons such as insufficient water for flushing and/or fear that the pits may fill up.

### People's solutions include

- Direct pit dry latrine, as in parts of Himachal Pradesh in India, using ash and lid.
- Steep sloped slippery toilet pan and drain that needs little water to function.

### Where there is open discharge

In Yemen, toilets in houses often discharge waste into the open, causing quarrels between neighbours. Many such situations lead to police and court cases.

People's solutions include digging holes to make covered soak pits. Many people wanted to revert back to their traditional system of dry latrines. Traditional dry toilets of urban and semi urban areas of Yemen are century old and appropriate to arid and desert conditions. In places with very little to no rain fall ash was used after defecation to cover the excreta and periodically the entire slush was removed from a small door at the bottom of the toilet. The toilets are generally located on each

floor of a two or three storied building. They are connected to a tubular or square pipe running vertically along the building. Excreta fall in the bottom and accumulate in a quarter which is covered with ash every time one used the toilet. These dry pit latrines largely replaced water seal latrines in the cities and small towns. People in the villages also decides to make dry pit latrines of low cost.

### Where women are socially confined and use buckets in the dwelling or plastic bags when traveling

In Yemen and parts of Pakistan, women defecate in buckets kept inside the house, and are only able to empty them outside after dark. In Yemen, women reported that they used the night shelter/pen for the cattle and other livestock at the ground floor of the building. The conditions of these animal pens are terrible where human shit and animal droppings get trampled and mixed up making a horrible stink in the room generally without any window or ventilation. Girls and women have no other choice but to use these places for defecation.

People's solutions are to build latrines and toilets.

### APPENDIX D: Sample questions for raising disgust

#### Questions those could be asked to community during a defecation area transect walk

- ▶ Who all come to shit here?
- ▶ Where do the women go?
- ▶ Which are the places used by the children? (However, a children group is facilitated separately and they take their facilitators and others to places which they use for open defecation)
- ▶ Who's shit is this?
- ▶ Indicating two or three different heaps of shit, ask if they see any difference in shapes, color, form-viscosity, etc. What do they think the reasons could be for such differences (e.g. diarrhoea, dysentery, cholera, indigestion etc)?
- ▶ Pointing to a fresh shit, ask if they could see any living things on it (e.g. flies, maggots, insects, mosquitoes, dung beetle, etc)?
- ▶ If you find some covering their noses or spitting in disgust, ask why they were doing that? Do they do the same whenever they visit the sites everyday?
- ▶ Ask how far the flies can go, and if they visit their homes carrying shit?
- ▶ Tease them by suggesting they should probably not worry much because the flies they see on shit are different from those that sit on their food (might not agree with your suggestion and they will say that those are the same flies that carry shit to home)
- ▶ Ask if more flies sit on liquid shit or solid shit, dry or wet shit?
- ▶ Ask which shit dries up earlier, normal faeces or faeces from diarrhoea person? Which are more watery?
- ▶ Ask which ones attract more flies (dry or watery/semisolid shit)?
- ▶ Ask if the contamination from a liquid diarrhoea shit spreads faster or normal semi-solid shit spreads faster?
- ▶ Finally ask if they enjoy living in such environment?

Ask any other questions you think might raise disgust amongst them. Innovate locally.

### APPENDIX E: Sample checklist of follow-up activities (immediately after triggering CLTS)

#### First:

- ▶ Formation of follow-up team
- ▶ 3-4 people
- ▶ at least one women in the team
- ▶ include some powerful natural leaders or someone from best triggered/post-triggering best performing village in the team

#### Second:

- ▶ visit all the villages
- ▶ initiate the children's procession
- ▶ carry the chart of their commitment of date to declare ODF and get it signed
- ▶ have a meeting with the natural leaders of that village
- ▶ help the village put up the paper map in a central place with a marker so they can start ticking off those houses that started construction or have already constructed
- ▶ visit all the construction sites with the community – construction site transect walk. Daily monitoring by the community
- ▶ encourage those who have started and ask if they need any technical guidance – particularly loose or sandy soil – but mainly work their own ideas and use examples from other villages
- ▶ agree on date for next visit and tell them that in the next visit there will be many people from the other villages that have made solid progress, and inform them of the good progress made by those villages
- ▶ take pictures of new constructions
- ▶ for slow progress villages conduct a meeting with chief and community members to help them develop their own progress monitoring plan for at least two weeks
- ▶ In the worse case, be prepared for visitors who want to see that there are people who want to eat each other's shit (trying to help them live up to own commitments that they said during large group meetings of other village presentations/workshops)

Share all the local or indigenous technologies from communities triggered by CLTS – with reference and name of the villages.

## APPENDIX F: Target-driven partial sanitation and CLTS compared

CLTS requires a number of shifts in approach as compared to subsidy-driven programmes. These contrasts are summarized in the following table.

Program Element	Target-driven Partial Sanitation	Community-Led Total Sanitation
Starting Point and Focus	Things Outputs	People Outcomes
Core Activity	Constructing Latrines	Igniting and facilitating processes
Latrines designed by	Engineers	Community innovators
Number of designs	One or a few	Many
Main materials	Cement, pipes, bricks, etc. purchased from outside	Bamboo, wood, tin, jute, plastic, etc. (almost all locally available)
Cash cost	High	Can be under US\$1
Indicators	Latrines constructed	Open defecation ended
Sustainability	Partial and patchy	Higher
Who benefits	The better off	All, including the poorest
Key motivation	Subsidy	Disgust; self-respect
Coverage /usage	Partial	Total
Benefits	Lower: open defecation continuing	Higher: open defecation ends

The implications of these shifts may be significant for institutions wishing to adopt or scale up CLTS. It implies changes in institutional and personal mindsets and behaviours which tend to be philanthropic (i.e. to subsidise), professional (i.e. to promote high standards), and bureaucratic (i.e. to spend big budgets). CLTS, on the other hand, is founded on the principle of no hardware subsidy, often with facilitation by local 'non-expert' community members, supported by low-cost training, none of which require much budget. It aims to be a truly community-led process and scaling up also needs to be driven at the community level (and not driven by the need to disburse funds).

International agencies, including NGOs, have a role to play in promoting the spread of such locally-empowering initiatives. Government and national NGOs have roles in assuring favourable conditions and supporting ignition and lateral spread. All need to recognise the importance of using a 'light touch' so that CLTS can be ignited and, once ignited, can spread from community to community.

## APPENDIX G: Sources and Contacts including websites, videos, work forums etc

### Key Publications

- ▶ Community-Led Total Sanitation as a Livelihoods Entry Point – A Brief Introduction Katherine Pasteur, IDS, Sept 2005 [http://www.livelihoods.org/hot\\_topics/CLTS.html](http://www.livelihoods.org/hot_topics/CLTS.html)
- ▶ Practical Guide to Triggering Community-Led Total Sanitation (CLTS) Kamal Kar, November 2005 <http://www.ids.ac.uk/ids/bookshop/wp/Wp257%20pg.pdf>  
(Also available in Chinese, Arabic, French and Spanish)
- ▶ Subsidy or self-respect? Community led total sanitation. An update on recent developments (Including reprint of IDS Working Paper 184) IDS Working Paper 257 Kamal Kar and Katherine Pasteur, 2005. [http://www.livelihoods.org/hot\\_topics/CLTS.html](http://www.livelihoods.org/hot_topics/CLTS.html)
- ▶ Latest Update to Subsidy or Self Respect, Kamal Kar and Petra Bongartz, April 2006. Update to IDS Working Paper 257 [http://www.livelihoods.org/hot\\_topics/docs/CLTS\\_update06.pdf](http://www.livelihoods.org/hot_topics/docs/CLTS_update06.pdf)
- ▶ Favourable/Unfavourable conditions for CLTS: proposes that triggering and the achievement of ODF status are more likely to succeed in some conditions than in others. Starting in favourable conditions and spreading into less favourable is a commonsense strategy. [http://www.livelihoods.org/post/CLTS\\_pos.htm](http://www.livelihoods.org/post/CLTS_pos.htm)

All of these and many other documents are available from the **Livelihoods Connect website**  
Livelihoods Connect hosts a hot topic on CLTS, a mini-website, which contains a wealth of useful materials on Community Led Total Sanitation (CLTS) and how it can serve as an entry point for other livelihoods activities: [http://www.livelihoods.org/hot\\_topics/CLTS.html](http://www.livelihoods.org/hot_topics/CLTS.html)

For any enquiries or if you would like to be added to our **CLTS mailing list** so that you will receive updates on new materials available on the website as well as other CLTS related news, please contact Petra Bongartz ([P.Bongartz@ids.ac.uk](mailto:P.Bongartz@ids.ac.uk))

### Videos

#### UNICEF Cambodia

- ▶ CLTS (Khmer version)  
Contact Hilda Winarta [hwinarta@unicef.org](mailto:hwinarta@unicef.org)

### Knowledge Links, India (19-29 minutes)

- ▶ No Shit, Please! (English)
- ▶ Ek Behatar Duniya Ke Liye (Hindi)
- ▶ Understanding CLTS with Kamal Kar (Hindi with English subtitles)
- ▶ People and their Voices (Hindi with English subtitles)  
Contact Knowledge Links  
[contact.knowledgelinks@gmail.com](mailto:contact.knowledgelinks@gmail.com)

### Project Concern International, Indonesia

CLTS contact: Solihin Abas abu\_qowwam@yahoo.com

### TVE

Earth Report: Clean Living broadcast on BBC World in March 2008  
See <http://www.tve.org/earthreport/archive/doc.cfm?aid=1889> for more detail  
For tape or DVD orders – contact Dina Junkermann, TVE distribution manager: tel. +44 20 7901 8834; email: [dina.junkermann@tve.org.uk](mailto:dina.junkermann@tve.org.uk)

### WSP/WASPOLA, Indonesia

Contact PAK Djoko of GATES project at WSP, Jakarta, [dwartono@worldbank.org](mailto:dwartono@worldbank.org)

### Awakening Change

**WSP-South Asia, 55, Lodhi Estate, New Delhi, 100003, India,**  
Contact: Ajith Kumar, [Ckumar1@worldbank.org](mailto:Ckumar1@worldbank.org)

### WSP Bangladesh

▶ Igniting Change,  
Contact: WSP-South Asia, Dhaka, Bangladesh;

### UNICEF Sierra Leone, Freetown

'Community Led Total Sanitation in Beautiful Salone'  
Contact: Francesca De Ferrari, [fdeferrari@unicef.org](mailto:fdeferrari@unicef.org), Darren Geist, [dgeist@unicef.org](mailto:dgeist@unicef.org)

### Countries with CLTS and organisations involved in implementation/trials of CLTS

#### Africa

- Burkina Faso:** WaterAid
- Egypt:** Plan Egypt applying CLTS Principles in solid waste management
- Ethiopia:** Vita, (formerly Refugee Trust International) implementing CLTS in Arbaminch area, WSP, Plan Ethiopia
- Ghana:** WaterAid

**Kenya:** Plan Kenya, UNICEF

**Mali:** WaterAid

**Nigeria:** WaterAid

**Sierra Leone:** UNICEF, Ministry of Health, Education, Water Supply Energy and Power and Plan Sierra Leone

**Tanzania:** Plan Tanzania,

**Uganda:** Plan Uganda, Kibale District Administration supported by Irish Aid

**Zambia:** UNICEF, Choma district, DWASHE, Partner NGO of WaterAid Zambia,

**Asia**

**Bangladesh:** SDU-CARE, Bangladesh, Dishari, Plan, WaterAid and their NGO partners like, VERC, NGO Forum for Drinking Water Supply and Sanitation, Dhaka Ahsania Mission, World Vision, WSP-South Asia

**Cambodia:** Ministry of Rural Development, Royal Government of Cambodia implementing CLTS in six provinces, UNICEF, Plan, Cambodia, Swiss Red Cross.

**India:** Government of India (State Governments of Maharashtra, Haryana, Himachal Pradesh, only Urban CLTS in Kalyani Municipality under Kolkata Urban Services for the Poor (KUSP) in West Bengal), WSP-South Asia.

**Indonesia:** Government of Indonesia, WSLIC II (AusAid), Project Concern International, WSP-East Asia and Pacific Region, Jakarta, Gates Foundation supported TSSM project in East Java Province.

**East Timor:** Plan and WaterAid Australia have recently started implementing CLTS.

**Nepal:** WaterAid, Plan Nepal, UNICEF, NEWAH, and Nepal Red Cross.

**Pakistan:** IRSP, Rural Support Programme Network, (RSPN Pakistan Khushal Pakistan Fund (KPF)) WSP, SABAWON International.

**Latin America**

**Bolivia:** UNICEF, WSP, Plan Bolivia.

**Middle East**

**Yemen:** Yemeni Social Fund for Development (SFD-Yemen).

## Innovations and local adaptations: the diversity of latrine models constructed by communities across Asia, Africa and Latin America



LEFT AND ABOVE Communities in villages in the Andes in Bolivia. Notice the use of stones and mud bricks in construction. Photo: Meghan Myles, UNICEF Bolivia.



ABOVE Stones used in lining the soak pit. Photo: Syed Shah Nasir Khisro, IRSP, Mardan, NWFP, Pakistan.

LEFT A latrine constructed by a farmer within two weeks of triggering CLTS in Ogo Farm village near Freetown in Sierra Leone. Photo: Francesca De Ferrari, UNICEF Sierra Leone.



ABOVE Notice the water container and soap in front of newly constructed latrines in villages of Kampung Spu province of Cambodia



ABOVE Use of bamboo and plastics in making the super structure while the sub structure is strong and perfect. Vidyasagar colony, Kalyani, West Bengal India.



ABOVE AND LEFT A local community innovated this unique way of absorbing the wash-waste water from a wash room in to a perforated and buried earthen pot filled with pebbles and stones in a village in Maharashtra state in India. This kept the road dry and clean which used to be muddy and dirty before.



LEFT A direct pit latrine constructed immediately after triggering of CLTS in Uletana Bakole village near Arbaminch in Ethiopia. Notice the use of bamboo, mats and plastic which are locally available materials in construction. Often latrines are gradually improved.



ABOVE A latrine constructed in South Sumatra, Indonesia. A woman used some household materials to construct a makeshift latrine in order to comply with the communities decision to go ODF, while her husband was away.



ABOVE After achievement of ODF status, the standard and quality of latrines tends to improve gradually. Households find reasons to invest and improve the quality of toilets from the initial low cost pit latrines they constructed after triggering. A villager who runs a backpackers tourist camp in Chencha Woreda, Goma Gofa zone in southern Ethiopia understood the need for providing toilet facilities for tourists. In the background, a makeshift latrine constructed immediately after triggering of CLTS is visible.

## Your Notes!





