

Workshop Report on 'Sustainability of Rural Sanitation Initiatives in India'

December 8- 11, 2012

Hotel Chanakya BNR, Ranchi, Jharkhand



CLTS Foundation



Government of Jharkhand

Water and Sanitation Program

Water Supply & Sanitation
Collaborative Council



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Summary of the Workshop Report

The Annual International Workshop of CLTS Foundation on '*Sustainability of Rural Sanitation Initiatives in India*' was held in Ranchi between the 8th and 11th of December 2012 and was organized jointly with the Government of Jharkhand, CLTS Foundation, Water and Sanitation Program-South Asia (WSP-SA) and Water Supply and Sanitation Collaborative Council, (WSSCC) Geneva . The venue of the workshop was Hotel Chanakya BNR, Ranchi in the state of Jharkhand, India.

The workshop was attended by participants from 18 states in India and from more than 10 countries all over the world. These included Nepal, Cambodia, Myanmar, Mongolia, Indonesia, Chad, Sudan, Madagascar, Mali, Timor L'este, Solomon Island, Kiribati, and Vanuatu. The workshop was a brilliant opportunity for international actors working on sanitation to exchange stories of success and challenges faced mainly in the institutionalization and scaling up of CLTS.

The focus of the workshop was on the role of government actors and policy in scaling up of CLTS. There was considerable discussion around the tendency of government programmes towards subsidy, which limits community wide motivation and constrains the success of CLTS. Presentation from representatives of several Indian States revealed that subsidy is still an ongoing challenge due to national programmes like the Total Sanitation Campaign (TSC) and Nirmal Bharat Abhiyan (NBA). Some states were working round these problems by giving the allocated subsidy as a reward once ODF status is achieved.

International participants emphasised how government support to CLTS makes a huge difference. Some countries such as Chad were working in a context with little government support, but there were many instances of governments having reduced or removed the subsidy approach and promoting CLTS (e.g. Madagascar, Nepal Mali etc.).

Further discussions looked at moving up the sanitation ladder and on building on CLTS successes to mobilise wider community action, e.g. for health, hygiene and livelihoods. The workshop also included a field visit for participants to see firsthand how CLTS is being implemented in India.

The workshop design was carefully structured to allow discussion and focus on the Indian and International experience separately; of scaling up of CLTS with government and non- governmental institutions. There was also emphasis on how CLTS could lead to wider livelihood development, Nirmal Bharat Abhiyan and what policy changes are required in our National Sanitation Strategy. The bold declaration by Shri Debashish Gupta, IAS, Development Commissioner, Jharkhand and Shri S.N Tripathi, IAS, Pr. Secretary Rural Development, Gov of Odisha to stop household level hardware sanitation subsidy encourages many other states and senior decision makers of Governments from different countries. Success stories from the states of Himachal Pradesh and

Haryana and Meghalaya also encouraged the participants.

The event concluded with the development of a Declaration in support of reducing subsidy and enhancing community commitment to achieving total sanitation.

NOTE: This is only a very concise version of the workshop report. Please refer to the original report below for details.

Introduction and Background to the Workshop

The Annual International Workshop of the CLTS Foundation on ‘Sustainability of Rural Sanitation Initiatives in India’ was held at Hotel Chanakya BNR, Ranchi, India between the 8th and 11th of December 2012. The Workshop was hosted by the Government of Jharkhand with substantial financial support from the Water and Sanitation Program-South Asia. The Water Supply and Sanitation Collaborative Council, Geneva also supported some aspects of the Workshop.

The workshop was planned in the context of the current sanitation situation in India and the promise shown by CLTS in tackling this situation both in India and other countries. In India roughly 54% of the population still do not practice safe sanitation; in other words, more than 635 million people defecate in the open. Government of India has been trying to tackle this mammoth problem through the centrally sponsored programme of Total Sanitation Campaign (TSC) since 1999. Now Government of India has launched the Nirmal Bharat Abhiyan (NBA) to enable rural local body involvement in sanitation. International organizations like WSP, UNICEF, Water Aid, Plan International, CARE, Bill and Melinda Gates Foundation and others have been propagating the CLTS approach with their support at different places. Many donor agencies have been funding and supporting national and local governments as well as NGOs to implement and scale up CLTS in Asia, Africa and Latin America. CLTS has now been rolled out in 51 countries across the globe. It has been incorporated as the National Sanitation Strategy in 18 countries (of which only 4 are in Asia and the rest in Africa).

Since 2009, CLTS Foundation has, in association with partner organizations and state governments in India, been organizing an annual international workshop on “Sustainable Rural Sanitation in India” to highlight both the success that community based initiatives have shown as well as the nature of the enabling environment required for these to succeed. This workshop in Ranchi was the 4th annual workshop following Nainital in Uttarakhand, Shimla in Himachal Pradesh, and Gurgaon in Haryana. Earlier workshops have seen participation by more than 300 senior Government officials, decision makers, political leaders, INGO’s, bilateral and multilateral donor organizations and delegations from 10 Asian and African countries. Each of these workshops has increased

awareness of the potential of Community Led Total Sanitation. The unique combination of field visits, interaction with natural leaders and intense analytical discussion over three days have made these workshops an integral part of the efforts at disseminating information on the rural sanitation scene in India.

The reason for choosing Jharkhand as the venue for this workshop was dictated by the commitment to rural sanitation exhibited by the state in recent months. Many ODF villages have come up as a result, providing an inspirational learning ground in a poor, tribal region. The workshop assumed importance as it provided government leaders, policy makers and other actors in the field of sanitation an opportunity to give their feedback on the working of NBA and the challenges being faced while working in the field. It also provided an opportunity for initial feedback on the extent to which the enhanced subsidies under the NBA have been able to overcome the story of a spurt in toilet construction (but without the required collective behaviour change) that has been the hallmark of the last decade.



Participants at the inauguration day of the workshop

The Objectives of the workshop:

The workshop was organized with the following objectives:

- To function as a forum for intensive discussion and interaction between national level policy and decision makers from the participating nations of Asia and Africa that have either initiated or are in the process of adopting CLTS as part of their national sanitation strategy (Success and challenges in adopting CLTS).
 - To generate understanding of how CLTS could be institutionalized and scaled up within the national sanitation strategies of the governments of interested countries that still use up-front, individual-household hardware sanitation subsidy. (Countries those are still struggling with subsidy; they are interested to bring about collective behaviour change for sustained health outcome and are stuck with subsidy).

- To function as a forum for sharing of experiences; to enable understanding of the different ways in which governments could scale up CLTS towards achieving the sanitation MDG.
- To form a clear idea on the government led initiative of scaling up CLTS through visits to ODF communities and interaction with the heads of districts and states.

The key questions to be addressed in the workshop were:

- What has been the experience with different approaches in achieving ODF status that ensures positive health outcome?
- What is the extent of sustainability of the surge in sanitation coverage in the last decade?
- Where has success been greater and more promising?
- What lessons have been learnt in wider scaling up with quality, institutionalization and mainstreaming of successful approaches?
- What are the institutional experiences and challenges in shifting from the measurement of change of material outputs to health outcome?
- What lessons could we all learn from experiences of other countries that have in recent years adopted CLTS and have made significant progress towards achieving the sanitation related MDG?
- What lessons do all these impart for the design and implementation of the NBA - Clean India Campaign?

Workshop Participants

As the host state, the Government of Jharkhand had the most significant participation in the workshop with both state level policy makers and district, block and panchayat level practitioners, participating in the event. The CLTS Foundation, WSP-SA and WSSCC as the main supporters and facilitators also contributed significantly to workshop participation. The commitment of the Government of Jharkhand ensured that senior decision makers, officials and others responsible for program implementation in 18 different States of India, participated in the workshop.

The workshop was also attended by participants from 13 countries from Asia, Africa and the Pacific region. These included Nepal, Indonesia, Myanmar, Cambodia, Mongolia, Chad, Sudan, Madagascar, Mali and a ten member strong team from Timor Leste, which included the Honorable Mr. Elias Pereira Moniz, Secretary of State for Water Supply, Sanitation and Urbanization, Ministry of Public Works, Government of Timor Leste. A strong four member team from the Pacific region

participated, which included Solomon Island, Kiribati, and Vanuatu. Other national level organizations active in sanitation also participated in the workshop.

8th December, 2012, Inaugural Function

The workshop started with an inaugural ceremony on the evening of the 8th of December 2012 at Chanakya BNR Hotel. The opening ceremony saw welcome speeches and remarks from **Shri Deepak Sanan**, IAS, Additional Chief Secretary, Government of Himachal Pradesh, and Advisor CLTS Foundation, **Shri Debasish Gupta**, IAS, Development Commissioner Government of Jharkhand, **Dr. Kamal Kar**, Chairman, CLTS Foundation, **Mr. Juan Costain**, Regional Team Leader, Water and Sanitation Programme-South Asia, World Bank, **Mr. Elias Pereira Moniz**, Secretary of State for Water Supply, Sanitation and Urbanization, Ministry of Public Works, Government of Timor Leste and **Mr. Anand David**, Embassy of Ireland. This



was followed by the inaugural address by **Shri Hemant Soren**, Deputy Chief Minister, Jharkhand and a vote of thanks by **Shri Sudhir Prasad**, Additional Chief Secretary, Government of Jharkhand.

Shri Deepak Sanan thanked all the participants for their presence and said that the workshop had only been possible because of the support received from the Government of Jharkhand and the WSP-SA. As a backdrop to the workshop, he explained that over 600 million people (constituting 58% of the world's total) defecate in the open in India. The absence of safe sanitation is the single most important cause of malnutrition and disease. Open defecation is intrinsically linked to higher child mortality, stunting and deficiency in cognitive development. The practice of safe sanitation involves behaviour change and not provision of toilets. Given the externalities linked to sanitation, it requires collective behaviour change, not just at the individual level. Experience around the world has shown that collective behaviour change is best achieved through CLTS. This workshop was aimed to better understand the processes involved in CLTS and the enabling environment required for CLTS to succeed. "Toilet construction in rural India is now said to exceed 73% of households but only 31%



are using them. We need to change this reality”.

Shri Debashish Gupta mentioned that CLTS is not reliant on funds but on motivation and that this has been successful in other states. The goal is an ODF-(open defecation-free) state of Jharkhand and the state is ready to use this successful approach to achieve this goal.

Dr. Kamal Kar welcomed all the guests from within India and abroad. He gave a brief account of the immensity of the sanitation problem and why this workshop is crucial. “India is the second fastest growing economy of the world but the country is also number 1 in open defecation. If we do not take serious action, this will not go away. India is losing 6.8% of its GDP due to health, tourism loss, etc related to poor sanitation”. He sincerely thanked the Chief Minister and Deputy Chief Minister of Jharkhand for making a serious commitment to improving sanitation and hosting this workshop. He said that CLTS has spread to 54 countries and there was much to learn from others. “Chad is a small country and they are making huge progress, and Madagascar is also progressing though it is a small island (although Madagascar is the largest island in African continent). A large and senior delegation from Timor L'este, including the advisor to the Prime Minister was also attending. CLTS is all about empowering people so we must empower Jharkhand too”. He also thanked Juan Costain of WSP for their support to the workshop.

Mr. Juan Costain stated that it was a great honour for him to be invited to the workshop and to speak at the inaugural event. WSP is providing some financial support, though it is not the financing that matters but the ideas. He hoped that “the workshop would discuss the most interesting ideas regarding behaviour change in rural sanitation. There was a huge opportunity to make a big difference. Jharkhand epitomises the issues relating to sanitation. Jharkhand, like the rest of India, is showing good economic development, we hope they can match that in water and sanitation. The MDG relating to sanitation is the one that is most off track. Around 2,000 children die every day due to poor sanitation, about half here in India”. He also mentioned that malnutrition has lifelong effects if it is not adequately addressed in the first two years of life and this too is intrinsically related to sanitation.

Mr. Elias Pereira Moniz mentioned that a high priority of the Government of East Timor is to have a healthy population. Between 2011 to 2017, their plan is to achieve national coverage of 60% sanitation by 2015 and 100% by 2017. Timor L'este has been making good progress in the area of sanitation and they hoped to learn from the Government of India and the participants at the workshop how they have managed to make progress in their respective countries.

Mr. Anand David read out a message from Mr. Brendan Rogers, Head of Irish Aid, Government of Ireland.

“Kamal Kar is an esteemed colleague and friend of the Government of Ireland. Now CLTS is being used in 51 countries in Asia, Africa and Latin America. We do not need to see sanitation as a problem, but rather as a solution. It is about giving people dignity, restoring privacy, personal security for women, etc. That is why the work of CLTS Foundation is so important. It gives people the possibility to access low cost latrines, and it is a powerful entry point into communities”.

Shri Hemant Soren welcomed everyone to the state of Jharkhand and stressed that CLTS was a very good solution for the problem of sanitation everywhere in the world and especially in Jharkhand. He said that he was keen to hear all the participants voice their opinions on how to work on sanitation problems in their own states and countries. He was sure that Jharkhand would imbibe a lot from this workshop and show great progress in sanitation as a result.



Shri Sudhir Prasad was very pleased to have people from so many parts of the world attending the workshop. He thanked the Chief Guest and the participants and hoped that their contribution to the workshop would be significant in taking forward the task of improving rural sanitation in both Jharkhand and the rest of India.

Following the formal inauguration, the Government of Jharkhand hosted a cultural program and dinner which presented an opportunity for the participants to interact informally before the workshop sessions beginning on the next day.

9th December, 2012

Session I:

The Sanitation situation in India and Indian experience at scaling up of CLTS.

Chair: Shri Deepak Sanan, Additional Chief Secretary, Government of Himachal Pradesh

Panellists

- ▲ **Shri S.N. Tripathi**, IAS, Principal Secretary, Government of Odisha
- ▲ **Shri Navin Parmar**, Chief Engineer, SWSM, Jharkhand
- ▲ **Shri Vinod Mishra**, Director: Trainings, Knowledge Resource Centre, Administrative Training Institute, Nainital, Uttarakhand.

This session comprised three presentations.

1. Dr. Dinesh Chand, Additional Advisor to the Government of India, on the status of Rural Sanitation in India.

The presentation highlighted the progress in rural sanitation since Independence and specially the



major spurt in toilet construction in the first decade of the 21st Century. However, it also brought out the concern about sustainability revealed by different evaluations. While Departmental figures have shown huge increase in toilets in rural households, the 2011 census has brought out an increase of only 9% from 22% to 31% since 2001. An

UNICEF evaluation of 2008 brought out that only 2% of NGP villages were actually ODF. The CMS study of 2010 revealed a huge gap between reported and actual coverage. It also pointed out that among the best performing states in recent times were Himachal Pradesh and Haryana.

2. Dr. Amit Agrawal, Dy. Commissioner, Hissar, Government of Haryana on CLTS based intervention in the State of Haryana.

The key points emerging from Dr. Agrawal's presentation were that:

- Before adoption of a CLTS approach, the sanitation strategy was target based and subsidy oriented, catering only to Below Poverty Line (BPL) families. Consequently, this benefit was restricted to only certain sections of the population. So if households were Above Poverty Line(APL) and even very slightly better offthan BPL, they did not come under the purview of any better sanitation strategy. The subsidy based approach was neither collective nor behavior change oriented.
- The states that have shown the best results on sanitation are the ones where CLTS has been implemented. People need to believe that they need a toilet. Once they do, they will use any kind of local material to make it. The man who made the cheapest toilet in Haryana just bought the basic sub-structure and used leftover hay from the harvest season as super structure.

- ODF communities display posters with captions in the villages of Haryana that bring out the commitment to collective behavior change. Two examples given in the presentation were:

“If someone defecates in the open, he will have to pay a fine of Rs.100/- and the one that catches him, will get a reward of Rs.50/-”

“In our village, no one defecates in the open, so you also please refrain.”
- Dr. Amit Agrawal concluded by saying that we need to rethink what our ultimate aim is“just to construct toilets or to change the hygiene behaviour of communities”?

3. Mr. Robin George, Sanitation Coordinator, Government of Himachal Pradesh, on the sanitation revolution in Himachal Pradesh.

The key points emerging from Robin George’s presentation were that:

- In a matter of five years, Himachal Pradesh has progressed from 31% rural household coverage to over 90%.
- Subsidy should be given after construction and usage of toilets by entire communities and not *before*.
- Monitoring should be done by the community.
- Natural leaders are a catalyst for advocating CLTS and those individuals who take initiative should be publicly recognized and acknowledged.
- What didn’t work was pressurizing individuals for toilet construction.
- The next stage is solid and liquid waste management.

After the presentations, the participants were invited to raise questions or give comments. Comments from Meghalaya and Jharkhand were especially noteworthy:

Mr. K. D. Talukdar, SE Rural Circle, Shillong-cum-Member Secretary (SWSM), Meghalaya, commented that Open Defecation was the norm till recently. Today the scene has completely changed and it is all because of CLTS. Now there are many ODF villages and most important is the fact that the people have understood the need for behaviour change. Subsidy is not distributed to individuals. Instead post ODF, it is given to the entire community.

Shri Debashish Gupta, IAS, Development Commissioner Government of Jharkhand said that in India, religion has immense influence on behaviour. It has prescribed a very strong set of ‘dos’ and ‘don’ts’ and taboos. “We have to now treat sanitation like religion. As if defecating in the open is a taboo. Only then will the change really happen”.



The Chair then invited the panellists to give their views on the key issue of subsidy.

Shri S.N.Tripathi, IAS, Secretary Rural Development, Government of Odisha made three important observations:

- There is need for some funds to be made available for the poorest. It may not be given as a subsidy, but to the community as a whole.
- Big funds may cause a problem, so we can give it in the form of community rewards.
- Unless we understand the cause, it is difficult to work on an issue. It is important that sanitation is treated as an important issue. It must be constantly addressed in our interaction with people.
- CLTS is a very health and gender friendly initiative.

Shri Vinod Mishra, Director, Training, Uttarakhand Academy of Administration, Nainital observed that “it is important to note and understand the NBA guidelines which say that the NBA strategy is “community-led” and “People-centred” but if you see implementation strategy it is again supply-driven like the Total Sanitation Campaign. So there is a contradiction in policy. Only keeping the term ‘Community-led’ in guidelines is not sufficient especially if the implementation policy is based on supply and is incentive driven. There is no sign of collective behaviour change in the strategy. The Government of India should think about why the Ministry’s reported achievement and the census data shows a big difference”.



Shri Navin Parmar, Chief Engineer, SWSM, Jharkhand stated that “the strategy of the Government of India’s NBA programme is

community led, but when you get down into the detail it shifts to supply driven. We have seen in past programmes that subsidy does not work, but still it is there. There is a big contradiction in the NBA guidelines in this regard. There is also a big gap between the data from the census (30%) and the data from the Ministry of Water and Sanitation (70%) – a 40% gap is not insignificant. Government of India needs to re-think their monitoring system. Subsidy should be given *Gram Panchayat* wise after behaviour change. Why have Himachal Pradesh and Haryana done so well and Andhra Pradesh and Punjab not well at all? We need to really address these questions”.

Shri Deepak Sanan, Additional Chief Secretary, Government of Himachal Pradesh ended the session with a fervent plea, “are we willing to face up to the hypocrisy of identifying toilets with improved sanitation and address what is right there in front of our eyes? It makes no sense to count toilets. It makes no sense to have a mix of approaches. Is it kindness to build toilets for people but continue to allow them to eat each others’ shit? Sanitation is truly a public good. What is the point of having 70% toilet construction and just 31% usage? We are sending lots of money down the drain. If the term CLTS does not suit, then call it a collective approach to sanitation. In the UNICEF evaluation of NGP villages in 2008, Maharashtra was the only state to show a few *Gram Panchayats* that were actually ODF. Maharashtra was the only state where CLTS was partially tried among the early award winners. In all other states, all the NGP winners were bogus. If Bangladesh, one of the poorest countries in the world can do it without a subsidy led programme, then we have no excuses. The poor do need support but that is the responsibility of the community, not of an external agency. We have done enough experimenting now; we just need to get on with it”.

Session II

The International experience of scaling up CLTS

Chair: Mr Juan Costain, Regional Team Leader WSP, SA, New Delhi

Panellists:

- ▲ **Mr Niry Lanto Jean Luc Rakotondrasoa**, Director of Sanitation and Hygiene, Ministry of Water, Government of Madagascar
- ▲ **Mr. Abdallah Abdelrassoul** UNICEF, Chad

Juan Costain in his opening remarks stated that this should be one of the most interesting sessions of the workshop since CLTS Foundation had been successful in getting so many international participants.

Presentations were then made by representatives of different countries reporting on their progress and experience with CLTS.

Chad - Mr. Abdallah Abdelrassoul, UNICEF, Chad

In Chad, sanitation coverage is only 12%. There is a high incidence of diarrhoea, typhoid and cholera. Currently there is no government leadership on sanitation and no institutional structure with responsibility for the subject. However, UNICEF has been active in Chad and is only using the CLTS approach with no subsidy. Once people are ‘triggered’ they construct toilets using local materials to make the structures. Once they all stop open defecation, celebrations are organised with participation of government staff and NGOs’. UNICEF introduced CLTS in 2009 but it is still a struggle working with government. In 2011, some government staff was sensitized and now a draft national sanitation strategy has been prepared.

More than 500 villages have been triggered till now. In the years 2010 and 2011, there was not a single case of cholera in CLTS villages. This is making other villages wake up to the results of CLTS and there is spontaneous triggering. The lessons learned include: communities can do it without subsidy and celebration is the key mechanism to bring other communities to ODF status as well. Chad’s future action plan includes: developing a national strategy with CLTS and no subsidy approach; building synergy with other donors and NGOs and developing regional action plans



Cambodia – Mr. Chhorn Chhoeun, Deputy Chief Rural Sanitation, MoRD

The country programme approach has CLTS as one amongst 7 elements (with sanitation marketing, school wash, hygiene promotion, behaviour change communication, regulations, and sanitation by religions). CLTS started in 2005 through the NGO Concern with training in 2 villages. In 2010, a revision of the triggering tools was undertaken in association with Knowledge Links India to facilitate training workshops in 6 provinces. In 2012, Dr Kar facilitated further training for 11 provinces. By 2010, 1400 villages were triggered and around 544 villages achieved ODF status.

Lessons: The main factors for achieving success include: engagement with the local authority (Commune Council, Village Chief); right selection of Natural Leaders; starting with a low cost latrine then later upgrading; and continual learning while engaged in the CLTS approach. The challenges include: behaviour change takes time; sanitation investment is still a low priority; expectation of subsidy; pit collapse in rainy season; preference for pour flush latrine; sustainability

of ODF status.

East Timor - Mr Joao N. Da Piedade Bras

Sanitation in rural areas is 18% and 61% in urban areas (June 2010). The National Strategy aims to achieve 100% sanitation by 2017. The National policy was approved in March 2012 with a focus on developing sanitation and environmental health monitoring systems and on CLTS based behaviour change. Since 2008 there has been a sharp rise in access to sanitation. The National Basic Sanitation Strategy has two stages: first sanitation demand creation through CLTS triggering, then sanitation supply marketing to build enterprises which produce sanitation hardware and information and help people to move up the sanitation ladder.

Indonesia – Ms Yustina Ni Nengah Tutuanita, SKM.

Indonesia has 220 million people, spread over about 1000 islands. There is a big difference in sanitation between cities and rural islands.

Two programmes address sanitation – STMB and PPSP

There are 5 pillars to the STMB – Community Based Total Sanitation Policy: stop open defecation; hand washing with soap; household water treatment; solid waste management; and waste water management. All of them are linked. CLTS tools have been used to trigger in 6,200 villages in 2011 (last 2 quarters), and 8,042 villages in 2012 (first 3 quarters).

PPSP is another programme promoting sanitation in cities and districts. Problems of urban areas are different from rural areas, as people are busy and more individualistic, with less motivation for collective action. There is need to shed light on how CLTS can work in urban areas.



Ms Yustina NiNengah, MoH, Gov. of Indonesia



Mr. Kalifa Keita, UNICEF, Mali

Mali – Mr. Kalifa Keita, UNICEF

CLTS is integrated in the national water and sanitation strategy of the country. CLTS is the first step for any sanitation programme. Government has an initiative to scale up with quality, looking at

government roles and innovations. Now efforts are being made to improve post triggering follow up and household level monitoring. Challenges include: lack of harmonisation in CLTS implementation; sustainability of CLTS impacts; difficult to balance spread of CLTS to new communities.

Mongolia - Ms Munkhzul Zhalzan, World Vision

In 2011, Kamal Kar visited Mongolia and CLTS was piloted in one province to see if it would work. It has been implemented for only one year. There was no expectation of any result within this time. But communities have been achieving total sanitation without any external support from World Vision or anyone else. As the pilot has been successful, World Vision will continue to implement in the coming years. Other NGOs and UNICEF have been invited to learn from this experience. A government official from Health Department is also participating in this workshop to learn more.

Madagascar - Dr Rija Lalanirina Fanomeza, Director, GSF Programme

In Madagascar 90% of the people do not have adequate sanitation and 60% do not have access to drinking water. WASH sector is a priority in Madagascar. CLTS was introduced in 2008. Under the GSF programme (Global Sanitation Fund), CLTS is one of the main strategies with a zero subsidy approach. The objective is to reach 6.5 million people in 12,000 villages. Till now, the achievement is 1,500 ODF villages, 120 national trainers pool and 1,000 natural leaders trained based on 2 support visits from Dr Kamal Kar. There is a WASH coalition from National to Commune level. There is an existing national policy and strategy on sanitation and efforts are on to develop a National Basic Sanitation Policy, which will include CLTS as a component. Some challenges include: scaling up; harmonisation of approaches; CLTS in urban areas; and data quality assurance and verification of information.

Nepal – Mr. Balkrishna Pokhrel , Program Officer, FEDWASUN

Sanitation coverage in Nepal was 43% at 2010 and is now estimated at about 50%. For rural areas it is 37%, and for urban it is 80%. About 50% of the districts still remain below the national average. Only 12% of the urban households are connected to sewer or drainage systems. Diarrhoea outbreak is still persistent. Around 10,500 children under the age of five years are still dying from diarrhoeal diseases annually. The aim is to achieve 100% total sanitation by 2016-2017. Challenges include: monitoring and sustainability of behaviour change; landlessness; sustainability of sanitation facilities; scarcity of water; lack of investment in research and development.

Myanmar - Dr. Mya Than Tun, UNICEF

The first CLTS training in Myanmar was held in January 2011 with Dr. Kamal Kar and Dr Brigitte Bode. There have been 7 more training by UNICEF and 215 people are now trained on CLTS from the Department of Health, UN agencies, NGOs, etc. Now there are 6 agencies applying CLTS and 236 villages are declared ODF. Achievements to date include: translation of CLTS Handbook and Trainer's Guide; production of a checklist for post-triggering process and a checklist for verification of ODF community; and certificates for ODF communities. Future plans are: to conduct more training for partners; advocacy to township medical officers; strengthening of the verification process; and scale up of CLTS implementation with Ministry of Health. Lessons learned include: impact is better when there is no subsidy village nearby; response is better if village is around 50 HH; nearby villages are easily triggered.



Pacific States – Vanuatu, Solomon Islands, Kiribati

CLTS is very new in Pacific states. It is being implemented by UNICEF in Kiribati, Vanuatu, and Solomon Islands. Challenges across the region include geographical problems of being made up of many scattered islands; geology of sandy soil and shallow ground water; existence of subsidy driven projects; poor understanding of government; poor sector information; and cultural beliefs and practices. Opportunities: government strategies for water and sanitation are starting to improve, WASH partners are coordinated in their support to government.

Summing up by panellists



Mr. NiryLanto summed up the session by saying that a good overview of the CLTS situation in various countries was given in the session. Mr. Abdallah said that a need for leadership from the government is needed for CLTS to be effective. There is need for National Strategies. These strategies should clearly say there is no subsidy and ensure a unified approach across a country

Session III

How do we move up the sanitation ladder?

Chair: Mr. Alexander Grumbley, Sanitation Advisor, BESIK, Timor-L'este (East Timor)

Presentations by:

- ▲ **Dr. AmitAgrawal**, IAS, Deputy Commissioner, Hissar, Government of Haryana
- ▲ **Mr. Brecht Mommen**, WASH Specialist, UNICEF, Odisha
- ▲ **Mr. AbdallahAbdelrassoul**, UNICEF, Chad
- ▲ **Mr. MoussaCissoko**, Ministry of Environment and Sanitation (MEA), Mali.

Presentations in this session focused on both scaling up and spread issues as well as moving up the Sanitation ladder.

Dr. Amit Agrawal, IAS, Deputy Commissioner, Hissar, Government of Haryana

Sanitation is a community problem. It takes the whole community to participate. Once there is even a small success anywhere, people from around the area also get interested and might try it. It can also be used as a strategy. Begin with a community that is likely to change, that has shown leadership. Most likely they will be successful. Then others will also want to emulate that.

Mr. Abdallah Abdelrassoul took the example of his own country to explain the post ODF stage. If the focus is on technology, it will be costly. With CLTS, everything must come from the community. "After talking to the ODF communities, we looked for local masons, and trained them in how to make bricks. It was important to do this. If you are going to ask for something from outside, they will not feel the need in the community. It is not only about sustainability but also about job creation for our own people. For the poor communities it's a way to make money while delivering materials to nearby villages. It's the communities themselves that make it and sell it. They are waiting for nothing from us. This happened in some areas. Second step was extension. Bring other communities to learn what is happening in one village. Then they replicate it in their own villages. One thing that led to scaling up was to write down what happens before and after attaining ODF. If Media accompanies, they also telecast. Women have shared stories, which confirm that rape and attack have radically decreased after preventing open defecation. As Muslims, ladies are not really expected to speak. But with CLTS, they have their own place. In the area where our female colleagues are working there was a blind person who built his own latrine and wants to be an

ambassador for his own village. What we're doing now to organize a competition by gathering representatives that have reached ODF status and judge the person who has the best latrine. There will be rewards for that person. It is also a way of motivating people to construct toilets. It means there is always innovation with CLTS. It is not closed a book”.

With the help of a power point presentation, **Brecht Mommen**, showed how people start from OD to building a pit latrine, to finally using a toilet. The Total Sanitation Campaign aims at people crossing all these stages right to the end. In Odisha, 85% people did not have toilets according to the latest census. “A sample study before the census showed that out of the 12% households which had a toilet, 7% did not use them. It was clear that this situation needs to be addressed. One option is to let people built their low cost models. When the government gave the money, they only had to improve the pour flush latrine. “Instead of bringing the toilet to the people; bring the people to the toilet”. Let the people take the first step. Then use government incentives with 40% to be given towards cost of latrines, 40% for upgrading and after some time, 20% can be transferred after attainment of ODF status and ensuring sustainability”.

Mr. Moussa Cissoko, Ministry of Environment and Sanitation (MEA), Mali

“In terms of improvements to latrine design, communities use some Shea nut butter residue (a residual waste material after extraction of oil) mixed with mud to cover the superstructure. Then it becomes very solid like cement. This is attractive to people from other communities who are motivated to find out more. To scale up, the government plays a role through follow up action with the local development committee in the villages. A team of people is sent to follow up and check the ODF status. After reaching ODF status, the emphasis is given towards getting cement slabs (sanitary platform) and keeping food hygienic, hand washing, clean water, and mosquito net marketing. Pictures are used to illustrate water treatment, food hygiene and water hygiene. There are two aspects to scaling up: improvement of sanitary and hygiene conditions in villages; and attracting other villages to also participate in CLTS”.

Comments from the audience:

- Can the ECOSAN (composting toilets) approach go along with the CLTS approach?

Dr. Kamal Kar intervened to say that in CLTS, there is no pressure and no prescription. People decide first what they want to do. If they want ECOSAN, the choice is theirs. In many places, recycling of human waste is common. There are 2.6 million people globally who



don't have access to basic sanitation, 90% of them are landless. ECOSAN is most useful for those who have land and agriculture.

Dr. Regina Papa from Tamil Nadu commented that ECOSAN is a successful program which she has seen and inspected. For sea coasts and wherever the water level is high, it is a successful government initiative. *Brecht Mommen* commented that ECOSAN is considered to be a good option when all other technology fails.

- What are the options in higher water table areas?

Abdellah Abdelrassoul narrated that there is a place in Chad where cholera is very severe. The water table is very high in that place. So instead of digging a pit, they built a high toilet with stairs leading up to it.

Dr. Kar in closing remarks stated that technology must suit local conditions and design must be based on local wisdom. He has seen instances where technology has resulted in pit collapse in heavy rainfall areas. Then construction of a second latrine becomes a difficult proposition. That is why, it is important to build with local materials and let people decide on the form and pace of movement along the sanitation ladder.



Participants during a group discussion.

Session IV

How can CLTS lead to wider social development?

Chair: Katherine Pasteur, CLTS Foundation

Presentations by:

▲ **Mr. Gouri Shankar Mishra**, TMST, Odisha

▲ **Mrs. MunkhzulZhalzan**, ADP Manager, Zuunkharaa Community, Mongolia

▲ **Mr. Kalifa Keita**, UNICEF, Mali

Katherine Pasteur introduced the session by saying that one of the major benefits of CLTS is that it produces a strong sense of collective achievement once open defecation has been eliminated. It allows the communities to work together for collective benefit, for rich and poor alike. “Why not then go on to work collectively to achieve other community goals? Through the CLTS process, Natural Leaders have already emerged, and community analysis and community maps have already been produced. So the context is perfect for addressing other issues. These could be other health issues, such as hand washing, food hygiene, sandal wearing, etc; or wider issues such as school attendance, women's savings, farming or fishing, community buildings and infrastructure. Let us hear about some experiences from three countries”.

Mr. Gouri Shankar Mishra of TMST, Odisha, stated that they are working on issues of health and sanitation in Odisha under a DFID supported project. How does sanitation impact health? Small scale research needs to be done to understand the extent. TMST is trying to implement CLTS in its true form in 15 blocks. Whether that has an impact on child mortality at the village level, will be known soon. He emphasised on the need to steer Self Help Groups away from just microfinance to village level work, which could include water, sanitation and increased livelihood support.

Mrs. Munkhzul Zhalzan, ADP Manager, Zuunkharaa Community, Mongolia, gave a brief introduction to Mongolia. She mentioned that it is a big country between China and Russia with high mountains, forests and the huge expense of the Gobi desert. It is land locked and is one of the fastest growing economies of Asia based on its mining industry. About 72% people have access to safe drinking water and 50% have access to adequate sanitation facilities. After Dr. Kamal Kar facilitated CLTS in 2011, 30 facilitators from 16 provinces were trained. They have, as part of CLTS, been involved in community mobilization and sensitization. Before the triggering, there was no playground and issues of high crime rate and distillation of local alcohol. After CLTS implementation, communities constructed toilets without external help. People do not go out to defecate. Alcoholism and issues around illegal distillation of country spirit and vodka have now been addressed. The streets are now clean. Earlier they were dirty and filthy. Households are now demanding playgrounds for their kids and are trying out other livelihood options with their own initiatives. Children were engaged in small scale mining operations earlier. Now they are painting in their spare time. The impact of CLTS has been that people take pride in their community and greatly improve the cleanliness of the environment.

Mr. Kalifa Keita, UNICEF, Mali, narrated that the experience in Mali mainly relates to promotion of other health outcomes, such as hand washing with soap, and safe storage of water and food. There has also been mobilisation of schoolteachers to promote good sanitation practice in schools and promotion of mosquito nets. There is a need to formalise community organisations.

Katherine Pasteur's final comments were that all three experiences are about an early stage of CLTS implementation and that wider social benefits are still being realised and assessed by them.

Day 3

Session V, VI and VII

Field Visit to five districts around Ranchi

The participants were divided into five groups and visited five different villages: Kheram, Rahe, Bakshi, Suti, Chaata. They were able to see and experience for themselves CLTS implementation in the villages. The participants (with the help of a translator) were able to speak to members of the community about their views on sanitation.

We are all using toilets because we have understood that sanitation is a community issue. Even if one person defecates in the open, we are prone to diseases. Our children also understand this and even they use toilets! -
Community Member, Kheram Village

A representative of the group visiting each village gave all participants a short summary of their village visit. A summary of these reports is given below:

Bakshi village- The people were very proud of the toilets constructed by them. It was good to see use of locally available material. The toilet cost was stated to be about Rs.500/-. All members of the family are using the toilet. Most of the answers came from the women members in the community. No external agencies were involved in this effort.



Participants in the Bakshi village



A local toilet model made by the villagers of Chata

Suti village- It was a very clean village. Women had a lot of control of cleanliness affairs. The toilets were constructed very recently. They mentioned that menstrual hygiene was not an issue. They did not report any subsidy. All toilets were reported to be built within Rs.500/-. How long will the toilets sustain was a question that could be posed.

Chaata village—The village was very hospitable. The village was declared ODF on 3rd December, one month after CLTS triggering. Earlier there was no household with a toilet in the same village. Now they have built them using locally available materials. Most of latrines still do not have a roof. This was a matter of concern to the group. Children's excreta are also properly disposed. Schools latrines are all in use.

The village has no electricity and there is hardly any sustainable source of water due to which they might face problems during summer. That might raise questions about the sustainability of this effort. Regular monitoring is required to prevent slipping back to OD. It was very nice to see children understanding the benefits of using toilets.

Keram village- All households have built their own toilets and they all use them. The village was declared ODF on 5th December. The group wondered about how sustainable this will be. Within the NBA framework, there is a possibility of funds and upgrading. If a part of the community receives money and the other part doesn't, how will it work? There was a stream in the village. The villagers wanted that this should be used to bring water to all the houses.



Posters displayed in Keram Village

Rahe village- The overall cleanliness was great. The group was struck by the fact that ODF status had just been achieved. The Latrines were found to be very simple and made from local materials.

Almost all toilets had a roof though these were not strong and might get dislodged in the rains. It was evident that a lot of household level monitoring was being done to make sure that everyone understood the importance of sanitation and behaviour change. Still doubts can be raised about the sustainability of ODF status. Where will they go from here? There is need to support their community to upgrade to better toilets.

Some Comments from other participants:

Mr. Vinod Mishra- This is the first time that Jharkhand has been working so sincerely towards attaining ODF

Shri Sardendu Narayan- It has been decided that Rs. 4600/- is to be given after building toilet and we are in the process of facilitating this to ensure up-gradation.

Mr. Abdellah Abdelrassoul- In some villages people are drinking water from open wells. There is no hand pump and some people are building latrines near the wells. This can be very unhygienic.

Shri Deepak Sanan raised the question that should community be rewarded with money and if yes, at what stage?

Vinod Mishra's presentation on WSSCC and GSF's global initiatives

Vinod Mishra made a presentation on the different activities of WSSCC, Geneva and the Global Sanitation Fund. After his presentation he screened a short video film on GSF programme in many countries in the world. It was mentioned that the two states in India where GSF is being implemented are Jharkhand and Assam.

As the audience learnt that Jharkhand was also a state where GSF programme is being implemented, questions were raised by several members of the audience regarding the progress and participation of representative from the Global Sanitation Fund India programme. It was surprising that no member from the GSF programme in Jharkhand was present at the workshop venue, when there was such a large amount of fund being disbursed towards the cause of sanitation in Jharkhand. GSF should have considered it a moral responsibility to send representatives and make presentations at the workshop. Shri Sudhir Prasad expressed his surprise at this and wanted to know why there was no one present from the GSF programme implementation group. He also mentioned that he was surprised to see the pictures of Jharkhand in the GSF video, where as the state government did not have any information on what was happening in the GSF programme implementation areas in the state.

Shri. Sudhir Prasad, Additional Chief Secretary, Government of Jharkhand proclaimed that on priority basis, he would make sure that these villages now get enough water supply!

Session VIII: Scaling up of CLTS with non-formal institutions

Chair: Dr. Kamal Kar, Chairman, CLTS Foundation

Panellists:

- ▲ Dr. Joelina Ratenfinjanahary, CLTS Coordinator (FAA Program), Madagascar
- ▲ Dr. Mya Than Tun, WASH Officer, UNICEF-Yangon, Myanmar

Dr. Joelina Ratenfinjanahary, Director, FAA, Madagascar, stated that their objective is to eliminate Open Defecation. They work with traditional leaders, religious leaders (through the Catholic Church) and with natural leaders. These natural leaders often go on to become community consultants. “In terms of the process we start with the village, then to the Fokotany, the commune and the district. We set a roadmap for working with natural leaders to ensure progress. The progress so far has been that 3046 villages have been triggered and 1560 are declared ODF. We have 2803 Natural leaders and 178 Community Consultants. Lessons learnt have been that working with communities one by one is very slow. Working through natural leader means the growth can be exponential and therefore much faster”.

We have still to move from ODF commune to ODF district and ODF region. We need to work more on sustainability of ODF status. We plan to develop books containing local innovations and scaling up guides. We want to set up a “CLTS University”! - **Dr. Joelina Ratefinjanahary, Madagascar, participant at the workshop.**

Dr. Mya Than Tun, WASH Officer, UNICEF-Yangon, Myanmar

“We have done training and produced guidelines which are being translated into the local language. Post triggering monitoring is really important. We are also strengthening the verification process, and have developed a verification checklist. We verify a second time after a year and only if behaviour change is sustained are they declared ODF. UNICEF plays a very important role in changing the strategy towards a no-subsidy approach. The point is not just to trigger a few villages but to create the enabling environment for sustained action for behaviour change”.

Dr. Kamal Kar stated that in some states in India a huge amount of money has been poured by different agencies without securing an enabling environment. Consequently, only one or two blocks in a whole state might have become ODF. Some States are just not interested and progress is very slow. “What is the point of hitting a wall that won’t shift? There are other states that are more interested – like Jharkhand – that are open-minded to trying an approach to see if it works, when the past approach has not worked. Mr. Niraj Lanto was the first director of Sanitation in Madagascar

within the Ministry of Water. The position did not even exist earlier in the Ministry. This new position has been created recently only after CLTS (ATPC-French version of CLTS) was introduced for large-scale implementation under the FAA programme supported by the GSF in Madagascar. This is a great example of how Indian states could give priority to the sanitation issue and understand the meaning of sanitation before water!"

Shri Sudhir Prasad, Additional Chief Secretary, Jharkhand said whatever has been done in Jharkhand in the last two months is there to see. This is the beginning of addressing the problem and scaling up. We need these people around to help us. We want our activities to be certified. We are fortunate that so many delegates from outside countries are visiting Jharkhand. There has been a lot of learning. I have learned so much about these different places and how CLTS is being used. But still there are people defecating in all these places. We must face it as a global challenge, to address our sanitation footprint. We should also add business to toilets, like the bio-toilet, and the fertiliser made from human waste. There are so many other things that we could be doing. This is the first time we have had such a workshop held in our state and the capital city of Ranchi. So I pay my respects and thank you all!

I will make my constituency Chunaar in Uttar Pradesh, India ODF without any government funds! – **Shri Jagtamba Prasad**, first elected Member of Legislative Assembly, Uttar Pradesh

NBA and Policy Flexibility: where do we go from here?

Chair: Dr Kamal Kar, CLTS Foundation

Panellists:

- ▲ **Mr. Ajith Kumar**, WSP, South Asia, Head of Rural Sanitation, Delhi.
- ▲ **Mr. Deepak Sanan**, CLTS Foundation
- ▲ **Mr. Frank Odhiambo**, UNICEF, Delhi.

Dr. Kar requested each table to take 5 minutes to discuss within themselves questions or issues that they would like to be discussed in relation to way forward. This was a special Q&A session leading to a session on participants' statements on commitments going forward.

Questions: Dr. Kamal Kar introduced the panellists and then threw the floor open for participant queries and observations. The following issues were raised:

- Field experience was of villages where ODF declaration was less than one month old. If one year had elapsed, it would have been possible to understand the extent to which sustainability has been addressed.
- Ramakrishna Mission helped set up proper sanitation in Mednipur district of West Bengal. People constructed low cost toilets on being motivated. After some time, many people upgraded with IEC. How can CLTS approach and NBA guidelines be integrated? When people finally adopt hygiene habits, can subsidy be provided at that stage?
- What are the best approaches to up-gradation of pit latrines? What has proved sustainable without compromising behaviour change?
- CLTS is good in rural and small communities. But how to promote it in urban communities?
- In States where subsidies are rooted, and where political parties compete in providing subsidies, how can subsidies be avoided?
- Solid Waste Management issue has already been raised. What about sanitation in public spaces? Public urinals have no management. What should be done about that?
- There is a lot of conflicting data from India about progress on sanitation. How does the government reconcile all this data?
- In the bio-toilet – where is the solid matter disposed? If some product is put in to a bacterial product, it can create a marketable product. How can such a product be distributed/marketed?

The panellists were then requested to give their views on the issues raised. Given the time constraints, panellists concentrated on what they consider the most important issues. The discussion focused largely on the issue of CLTS in an NBA led policy environment.

Shri Ajith Kumar (WSP)

“One question I often hear is how CLTS and the national programme (NBA) can be reconciled? As you probably know there is a national programme that gives money for toilet construction. If you look into the spirit and essence of the guidelines of these two programmes there is a lot of similarity. We are talking about behaviour change not construction of toilets. We are not talking about individual change but at the community level. The national programme also aims for open defecation free communities and they are rewarded for that. CLTS is an approach that time and again has proved itself in different states and countries. It is an approach that targets the individual and the community so that ODF communities can be achieved.

What does it take to achieve an ODF community? Does it require a subsidy? Past experience has shown that money is not an incentive for behaviour change. Unless there is a real demand there will be no change. To try to use money as an incentive is just throwing money away. If people construct

with their own funds then they will use it. Once the village is ODF then the funds in the NBA can be given as a reward. Behaviour change has to come first and incentive comes afterwards. Flexibility is built into the NBA system to interpret in this way”.

Shri Deepak Sanan

“CLTS is saying that sanitation is a basic public good which will give benefit to everybody when everybody adopts. Everyone will suffer if anyone fails to adopt. This requires everybody to change behaviour. It cannot creep from one household to another. They need to see the benefits for themselves, not to show someone else or to benefit others. In a fundamental sense anything that comes from outside, even a reward can be an enemy. Any other approach that tries to introduce the idea that this is not your problem, or that tries to undermine the sense of community, is detrimental. We need to be able to say that other approaches are wrong. They are not fine. The NBA and the past approach, TSC, is saying that there is subsidy available for toilets. What is being measured is the spending of a certain amount of money to build a certain amount of toilets. That is the incentive of the programme, so that is what implementers will do. What does the community then perceive – that the money is coming for toilets, not for behaviour change.

It is also saying that the community is not equal – only BPL people (who get the subsidy) need to change. That breaks up the community, as only some people are incentivised but not others. I know the poor need assistance, but who should assist? The community should assist, if they don't want to eat poor people's shit. School programmes are also saying that school shit is different to the shit of the rest of the community. The key actually is to convey that all shit is everyone's problem and has to be dealt with by the whole community. NBA says put up an action plan that says that those who have already achieved ODF get nothing and those who have no toilets or who slip back get more money. It must not be linked to the processes of toilet construction. That is why I say that we cannot keep mixing up approaches – NBA is about disbursing money for toilets and that we should fight against”.

I cannot speak for other states but in Jharkhand, I will make sure we stop up-front household, hardware sanitation subsidy for six months to a year till they become ODF!
Shri Debashish Gupta, Development Commissioner, Government of Jharkhand

Dr. Kamal Kar: “Shri Sanan has brought up the non-negotiable principle of CLTS – no subsidy, no prescription from outside, don't teach but facilitate! In Haryana and Maharashtra they have created shining examples despite the subsidy dominated policy environment. Himachal Pradesh said that subsidy did not work so the state tried another approach. In Haryana also they diverted that money,

underplaying subsidy and used the funds to develop natural leaders. In Maharashtra, they said subsidy money will come back as a collective community reward after verification, after one year of ODF. We must keep in mind that CLTS is an outcome-focused activity.”

“In Cambodia CLTS was introduced in 2004 through Concern. It was moving ahead nicely. Even the Prime Minister was supporting it. Then ADB came along with a huge loan on sanitation and insisted in providing free sanitation hardware and called it hybrid CLTS. The government could not refuse the ADB grant and it spoilt the whole thing in places where this programme is being implemented. A lot of confusion is being created in areas where some programmes were offering hardware subsidy and others focused on collective behaviour change. In Chad, the EU came with a project of US\$ 30 Million but it was for hardware sanitation subsidy. The government woke up and said we will take your project but without subsidy. This was also the case in Ghana. They refused the subsidy being offered by the World Bank sanitation project. So here too the State governments must stand up for what they know to be right and inform the National Government. You know what is best in your own state so who can challenge you.

One problem with sustainability is due to migrant labour. Regarding public toilets, please look at the case studies in the handbook from Ethiopia. In Mongolia some public toilets are not well maintained – they smell badly in the summer heat. Once the community is triggered there is better awareness but help from government is needed in some public places, like railway stations etc.

Please refer to the book “Shit Matters” from IDS with case studies from Indonesia, India and Bangladesh. Regarding bio-toilets, please discuss directly with Mr. SudipSen of Green Sanitation Foundation who is here. In Mozambique because they had money they started giving laptops, motorbikes, etc as motivation to ODF communities. Then false declarations started, as people wanted their prize, raising questions about the sustainability of behaviour change. In Indonesia, in the dry upland areas of East Java, the village Chief would give a goat as a reward to a ODF neighbourhood or a cap embossed CLTS on it and that was all. That just created so much interest, enthusiasm and respect from other villages. The incentive should not create a false desire just to get the money or big reward; it needs to be culturally appropriate. Please have a look at the CARE International website called ‘From Dependency to Emancipation’ by Brigitta Bode on how CLTS was used as an entry point for solid waste management, livelihood, education etc. I recommend having a look at that by everyone”.

Frank Odhiambo:

“This question about CLTS and NBA is a red herring. I don’t see there is a problem. It’s a matter of sequencing and planning ahead. The NBA guidelines are quite clear that the incentive should be given once communities are ODF. Think of it another way – if all you do is IEC, and then people will request subsidy as the drive is external. If you use CLTS then the pressure to change is

internal”.

At the end of the session, Mr. Nimeri Ali from Sudan who was unable to be present on Day 2 due to travel related delay was invited to make a presentation linked to Session II on international experience of CLTS.

Mr. Nimeri Ali, Plan International, Sudan

“I will detail the challenges we are facing and the lessons learned. In Sudan, Plan is the lead organisation for CLTS along with other UN agencies and the government. We started using CLTS in 2009 with a big workshop and invited different development agencies including Government and NGOs / CBOs. We started working in 30 communities in White Nile State in 2009. Recently Plan expanded into 9 communities around Khartoum. Now we have reached 40 communities in White Nile State (16 ODF), 14 in North Kordofan (all ODF), 8 in Kassala (3 declared ODF) and 9 in Khartoum State (5 declared ODF in just 5 months).

Challenges: The soil is very stony so machines need to be used to dig pits: Flies appeared in communities after they were ODF but they realised they were not covering the latrines which then solved the problem. Another challenge for CLTS arises where subsidy has been provided in the past. Flood disaster last year led to collapse of latrines, which had to be rebuilt. UNICEF is using a CATS approach which conflicts with CLTS. School Led Total Sanitation is another term about which we need to learn more.

Lessons: Involving government to help in scaling up the approach is most important. Ministry of Agriculture provided seedlings for ODF communities. Ministry of Defence has helped with planting trees around communities that have been declared ODF and also provided teams for follow up to achieve greater sustainability. Ownership by community members is important for sustainability. We should consider the seasonal calendar before triggering so that it does not happen in rainy season. Coordination with local authorities is key to scale up and reach all communities. Follow up is essential, e.g. monitoring using community maps transferred onto paper. Independent and objective verification of ODF status is important – e.g. using people from neighbouring communities. Forming CLTS committees is important involving women, men, youth and children. Our next step is to think strategically and form CLTS networks in all states and to incorporate this into the country strategy. We would like to invite Dr Kar to help us with that. We are also thinking of how to introduce CLTS in IDP camps in Darfur. One of them has 165,000 people.

Session X

Commitments on Way Forward

Dr. Kamal Kar chaired this session and requested representatives of each country and state attending the workshop to make a statement of commitment resulting from this workshop.

Statements of Commitment

Sudan – We will fight to include CLTS in the country ‘s national sanitation strategy. Also we will formulate CLTS network in all states with Dr. Kar’s support as also continue to replicate CLTS in more communities. - Nimeri Ali, Plan Sudan Khartoum

Madagascar – The CLTS approach will be the main approach in the national basic sanitation strategy and will be applied in the whole territory of Madagascar with the effective use of zero subsidy principle. A coordination structure will be set up within the sanitation and hygiene department at the government level for the coordination and implementation of the national basic sanitation strategy and particularly of CLTS in the rural areas of Madagascar. We will mobilize all resources needed to reach the vision “Madagascar, a model country, free from open defecation”. - Dr. Joelina Ratefinjanahary, Madagascar

Mali – After the ODF status we will continue to follow up on community sanitation and hygiene activities and to support them without compromising achievements by providing subsidies. –Mr. Modibo Diallo

Chad – As partner of Government, UNICEF will influence the adoption of CLTS in the National Strategy and creation of a proper structure in the Ministry of Water and Sanitation to take charge of CLTS in the country. - Abdallah Abdelrassoul

Indonesia- The government of Indonesia is committed to sustain the ODF villages that we have reached and achieve 100% ODF villages through the CLTS approach by 2014. – Ms Ni Nengah Yustina Tutuanita

Timor L'este – In our national policy for sanitation we have included CLTS and will make a strong commitment to implement CLTS in the strategy for 2015 to 2017. Government has a plan to support incentive not subsidy – an incentive for those who are facilitating the process. The 5 year action plan also includes CLTS. - Mr Elias Pereira Moniz, Timor L'este

Mongolia – World Vision Mongolia and UNCEF will advocate to Government for a no subsidy approach and also support initiatives from the community using CLTS approach. - Ms Munkhzul Zhalzan

Nepal – This workshop has ignited us to achieve the national target by 2017. We commit to achieve the MDG and national target within the stipulated time frame. - Balkrishna Pokhrel

Pacific States

Kiribati – With the technical assistance from UNICEF, CLTS will be introduced in Kiribati in 2013. With the government and partners, CLTS will be spread to the 16 outer islands of the

Republic of Kiribati. - Kibrom Teweldemedhin

Solomon Islands- UNICEF will work with the Solomon Islands government and other sector partners to move forward with CLTS in the country. - Brooke Yamakoshi

Vanuatu- UNICEF will work with the government to consider introduction of CLTS approaches in the government sanitation strategy.

– Mr. Hilson Toalui



Brooke Yamakoshi, Solomon Islands

Cambodia – The engagement of the government at all levels will be strongly motivated to reach an ODF status in Cambodia. – Mr. Chhorn Chhoeun

Myanmar –After this conference we will work together with the Union Government and stakeholders for scaling up of CLTS with quality in Myanmar. - Dr. Mya Than Tun

Meghalaya – After this 4 day workshop we feel we are on the right track. In all districts we have adopted CLTS approach facilitated by WSP-SA. We have set our goal and we are confident we will become a Nirmal State as envisioned. - Shri K.D. Talukdar.

Karnataka – Karnataka has achieved ODFs status in one district. A few more are on the verge of achieving ODF but still there are many more with low performance. By attending this workshop we have got different ideas and information regarding sanitation and sustainability. With this we would be able to become an ODF state by 2015. - Dr. Gautam Arali

Andhra Pradesh – We will keep sanitation programme at the top of the agenda at all the fora in the state and go ahead with use of CLTS as one of the tools to achieve ODF status in AP. - Shri R. Jagan Mohan

Jharkhand –We will take up sanitation work in a phased manner at GP, block level, district level and make all these administrative units ODF so that there is no slip back. By 31.12.2012, every district will set its own time line to achieve ODF status in a time bound manner.

Rajasthan – State will become ODF, with the support of UNICEF and WSP, by 2017. - Shri Rajesh Kumar Bansal

Tamil Nadu – We will advocate to the state decision makers to move subsidy disbursement to after achievement of ODF status by communities. - Dr. B. Regina Papa

Haryana- We have adopted CLTS strategy and we will downplay subsidy as much as possible. - Mr. Naresh Kumar

Odisha – We feel strongly that CLTS is the most appropriate approach to achievement sustainability. We will try our best to promote CLTS to achieve ODF. - Sri R.N. Das

Himachal Pradesh– Subsidy should go to the community rather than individual. - Robin George

Madhya Pradesh – With support of UNICEF we have prepared our strategy document. CLTS is a part of our approach. We will advise government to use the subsidy as reward as per community choice. We will put all our efforts towards sustainable sanitation. - Smt Sandhya Chaturvedi

Aastha Anuragi (Jharkhand)-Sanitation is the first step towards holistic development. We must all put our true efforts for sustainable sanitation.

S.K. Mohanty (Odisha)- Personally I feel very strongly that CLTS is the most appropriate approach to achieve ODF status and its sustainability. We will try our best to promote CLTS in our state.

Dr Kamal Kar expressed his heartfelt thanks to the whole Team of Jharkhand state. They were invited up and were given a standing ovation. “We have every faith that they will be successful in implementation of CLTS and achieving ODF status in the state.”

You are all working in a very important mission for the benefit of humanity. I wish you all the best in this important work and I know we will meet again. Thanks to the CLTS Foundation team for their hard work. Women are always working behind the scene and they are the best champions of CLTS and they are the worst sufferers of the practice of OD and poor sanitation! – **Dr. Kamal Kar**

Shri Vinod Mishra then read out the Ranchi Declaration to secure the approval of all participants. All the participants were then presented with a memento by the state of Jharkhand.

Shri Sudhir Prasad thereafter declared the workshop closed!

Ranchi Declaration

The 4th International Conference on the Sustainability of Rural Sanitation Initiatives in India held at Ranchi from 8th to 11th December,2012 deliberated on the situation of rural sanitation in India as well as the efforts being made in the direction of community led total sanitation both in India and

other countries and noted that:

- With more than 600 million persons defecating in the open every day, India accounts for over 58% of the global sanitation problem.
- Despite the major emphasis on rural sanitation programs in the first decade of the 21st century, progress in sustainable rural sanitation has been dismal. While reporting in India under Government programs has shown a huge increase in toilet coverage of individual rural households, the census has brought out an actual increase of only 9% between 2001 and 2011, which is less than the 13% increase recorded in the earlier decade between 1991 and 2001. The Nirmal Gram Puraskar for ODF communities has been awarded to over 27000 rural local bodies since 2005. However, reports suggest that the ODF status has been sustained in only a limited number of cases.
- Within this limited decadal growth in rural sanitation in India, the highest achievement has been recorded in the few states that wholly or partially endorsed the community led total sanitation approach. The state of Himachal Pradesh, Haryana and Maharashtra exhibited the most impressive increase in toilet coverage of individual households in the census and the greatest sustainability in the creation of ODF communities.
- Internationally CLTS has shown an ability to live up to its promise whenever an enabling environment has been forthcoming.

In view of the above, the workshop resolved that,

- Government of India to be requested to redesign the Nirmal Bharat Abhiyan. The current guidelines have enhanced subsidy, seek action plans from Gram Panchayats for toilet coverage of all households and favor those Gram panchayats that report lower prior coverage. In effect these guidelines on the one hand continue the earlier toilet focus and on the other hand penalize those who have shown higher achievement under the lower pre NBA financing regime. At the same time, these guidelines inhibit states from adopting a collective behavior change approach, which has shown the best result in the past decade.
- The NBA design should offer states the option of a normative grant (based on the size of their rural population), to adopt an approach that ignites communities to undertake the size of collective action at their own level to achieve an open defecation free environment. The grant should be broken up into a number of tranches to ensure that subsequent installments are disbursed only after securing ODF communities and improved status on health indicators and reduction in malnutrition.
- Donors and the non-Government sector should make every effort to convince states to provide an enabling environment for CLTS to succeed as has been done in Himachal Pradesh and to some extent in Haryana.
- The Government of Jharkhand be congratulated on committing that it will move towards adopting a policy on the same lines as Himachal Pradesh in order to show accelerated progress through community led total sanitation.

Notes: The presentations from the workshop are available on Dropbox, or alternatively from our new website which will be ready by February 2013.

ANNEXURE I

Message from Mr. Brendan Rogers, Director General, Irish Aid and Deputy Secretary General, of the Department of Foreign Affairs and Trade, Ireland (Read by Mr. Anand David)

Distinguished ladies and Gentleman,

All protocols observed

1. Ireland is pleased to attend this workshop on Sustainability of Rural Sanitation Initiatives in India organised by the Community Led Total Sanitation Foundation, Water and Sanitation Programme (WSP-SA) and the Government of Jharkhand;
2. Dr. Kamal Kar, pioneer of the community-led total sanitation approach and Chairman of the CLTS Foundation is an esteemed colleague but also a long term friend of Ireland;
3. As most of you know, the CLTS movement started very quietly in Bangladesh in 2000. Since then, the approach has spread at a remarkable speed and has been supported by NGOs, governments and donors as Irish Aid. It is now being used in 51 countries in Asia, Africa and Latin America;
4. Ireland strongly believes that the importance of sanitation for human health and well-being cannot be underestimated, but despite that sanitation has not always received the attention it deserves;
5. But we don't need to see sanitation as a problem rather sanitation is a solution. It is a solution to eradicate extreme hunger and poverty, to promote food and nutrition security, to ensure universal primary education and to reduce child mortality.
6. Sanitation is also about giving people, the most marginalised and the poorest, dignity. It is about restoring privacy and personal safety and lower risks of harassment and assault for women;
7. And that's why the work of Dr. Kamal Kar and the CLTS Foundation is so important and Ireland is very pleased to be partner to his work. Through the community-led approach he has not only given communities the possibility to access low-cost latrines, but community cohesion has been strengthened, confidence and capacity have been built;
8. However, CLTS is not only about sanitation, it is a powerful entry point into communities. It is about the poorest women and men analysing the multiple causes and symptoms of extreme poverty, including hunger and assess available opportunities.

9. We hope the workshop will be successful in capturing the experience of countries where CLTS has been introduced and galvanising your commitments to the importance of rural sanitation. The Jharkhand State has provided a strong example of this commitment.

Thank you.

ANNEXURE II

Workshop Program

Program Schedule of the 4th Annual International workshop on 'Sustainability of Rural Sanitation Initiatives in India'

Organized jointly with the Government of Jharkhand, CLTS Foundation, Water and Sanitation Program-South Asia and Water Supply and Sanitation Collaborative Council, Geneva

8th - 11th December 2012
Ranchi, Jharkhand, India

Saturday 8th December 2012
OPENING CEREMONY

Time	Topics	Speaker(s)		
4.00 – 4:05pm	Lighting of the lamp. National Anthem			
4.05 – 4.15pm		MC welcomes the participants and invites the Guests of Honour to the stage and introduces them to all the guests.		
4.15- 4.20pm	Welcome Address	Shri Sudhir Prasad , IAS, Additional Chief Secretary, GoJ.		
4.20- 4.25pm	Welcome Address	Shri Deepak Sanan , IAS, Additional Chief Secretary, GoHP, and Advisor CLTS Foundation		
4.25- 4.32pm	Welcome Remark	Shri Debasish Gupta , IAS, Development Commissioner Govt of Jharkhand		
4.32- 4.42pm	Keynote Address	Dr. Kamal Kar , Chairman, CLTS Foundation		
4.42- 4.52pm	Welcome Speech	Mr. Juan Costain , Regional Team Leader, Water and Sanitation Programme-South Asia, World Bank		
4.52- 4.59pm	Special Remark	Mr. Elias Pereira Moniz , Secretary of State for Water Supply, Sanitation and Urbanization, Ministry of Public Works, Government of Timor Leste		
5.59- 6.09pm	Special Remark	Mr. Anand David , Embassy of Ireland		

6.09- 6.34pm	Inaugural Speech and Opening of the conference	Honourable ShriHemantSoren , Deputy Chief Minister, Jharkhand. Honorable ShriArjunMunda , Chief Minister, Jharkhand, India	
6.34- 6.54pm	Opening of the Exhibition by the Deputy Chief Minister of Jharkhand	Honourable ShriHemantSoren invites all guests and delegates to the open air enclosure for the cultural program, cocktail and dinner.	
7:00pm.		High Tea	

Evening Programme: Folk dance and music of Jharkhand state (7.30pm onwards)

8.30pm	Gala Dinner
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Day 1: Sunday 9th December 2012

Theme: Scaling up with quality and institutionalization of Community Led Approach within the government sanitation strategies/Policies focussing on challenges and opportunities- Indian experience

Time	Topics	Speaker(s)
9.00 – 9.05am	MC welcomes all the participants, invites the and the speakers on stage	Chair: Deepak Sanan , Additional Chief Secretary, Government of Himachal Pradesh Panellists - ShriS.N.Tripathi , IAS, Secretary Rural Development, Govt. of Odisha -- ShriVinodMishra , Director: Trainings, Knowledge Resource Centre, Administrative Training Institute, Nainital, Uttarakhand - Shri. NavinParmar , Chief Engineer, PMU SWSM
9:05- 9:10am		Chairperson introduces the Panellists and begins the session
9:10- 9:40am	Presentation by Govt of India and states that have made significant progress on sanitation through community empowerment approach.	1 st Speaker, Shri DineshChand , Sanitation Advisor GoI, presentation on sanitation scenario in India
		2 nd Speaker, Dr. AmitAgrawal , IAS, District Magistrate, Hisar, Govt of Haryana on using the CLTS approach specially focussing on how to ensure the integration of the approach into the government machinery and enhance participation of NGO's, Natural Leaders and civil society
		3 rd Speaker, Shri. S.K.B.S. Negi , Principal Secretary, Rural Development, Govt of Himachal Pradesh presentation on ODF Rural Himachal using CLTS approach specially focussing on how to ensure the integration of the approach into the government machinery and enhance participation of NGO's, Natural Leaders and civil society.

9.40-10.30	Short presentations from various States of India, 5 to 10 mintues each.	States share their experience of community led approaches to total sanitation.		
10:30-10:55	Summarization by the Chair person and panellists			
10:55-11:00	Concluding Remark	ShriDebashish Gupta, IAS, Development Commissioner Govt of Jharkhand		

Tea/ Coffee break 11:00am- 11:25am

Theme: Scaling up with quality and institutionalization of Community Led Approach within the government sanitation strategies/Policies focussing on challenges and opportunities - International experience

11.30 – 11.40	MC welcomes all the participants, invites the Chairperson and the speakers on stage	<p>Chair: Mr Juan Costain, Regional Team Leader WSP, SA, New Delhi</p> <p>Panellists:</p> <ul style="list-style-type: none"> - Mr NiryLanto Jean Luc Rakotondrasoa, Director of Sanitation and Hygiene, Ministry of Water, Government of Madagascar - Mr. AbdallahAbdelrassoul UNICEF, Chad 		
11:40-11:10	Presentations by countries those have made significant progress on sanitation through community empowerment approach (CLTS)	All countries will share their experience of community led approaches to total sanitation.		
1:10- 1:25	Summarization up by the Chair person and panellists			
1:25- 1:35	Concluding Remark	Dr. Kamal Kar , Chairman, CLTS Foundation		

Lunch Break 1:30pm – 2:30pm

Theme: Achieving ODF and moving beyond; sustainability of sanitation

2:30- 3:30	Moderated panel discussion on 'How to move along the sanitation ladder after attaining ODF status'; sharing of experiences	<p>Chair: Mr. Alexander Grumbley, Sanitation Advisor, BESIK, Timor-Leste (East Timor)</p> <p>Panellists:</p> <ul style="list-style-type: none"> - Dr. AmitAgrawal, IAS, District Magistrate, Hissar, Government of Haryana - Mr.BrechtMommen, WASH Specialist, UNICEF, Odisha - Mr. AbdallahAbdelrassoul, UNICEF, Chad - Mr. Moussa CISSOKO, Ministry of Environment and Sanitation (MEA), Mali 		
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Tea/ Coffee Break - 3.30 to 3.55pm

Theme: CLTS as an entry point activity into wider social development

4:00- 5:00	Plenary Session- CLTS as an entry point activity and gateway towards wider livelihood development	<p>Chair: Katherine Pasteur, CLTS Foundation</p> <p>Panellists</p> <ul style="list-style-type: none"> - Mr. Gouri Shankar Mishra, TMST, Odisha - Mrs. MunkhzulZhalzan, ADP Manager, Zuunkharaa Community, Mongolia - Mr. Modibo DIALLO, Ministry of Environment and Sanitation (MEA), Mali 		
5:00-5:10	Concluding Remark	Dr. Kamal Kar , Chairman, CLTS Foundation		

Day 2: 10th December 2012

Theme: Visit to ODF villages and face to face interaction with community and local leadership

Time	Topics	Speaker(s)		
7:30- 1:00	Field Visit;	Village visit will be facilitated by Government of Jharkhand in 5 neighbouring districts of Ranchi		
Lunch 1:00pm- 2:00pm				
2:00- 3:30	Reflection on field visit	Facilitated by Mr. VinodMishra , National Coordinator, WSSCC, Mr. NavinParmar , Chief Engineer, SWSM, Jharkhand, HonorableShriSardenduNarayan , Engineer in Chief, PHED. Jharkhand, and the BDO of Kuru Block		

Tea/ Coffee 3:30pm- 3:55pm

Theme: Role of formal, informal institutions, leaders and communities in scaling up CLTS

4:30- 5:30	Plenary Session- Scaling up with quality and spread using all formal and informal actors of sanitation, eg: NL's, community consultants, formal and informal institutions	<p>Chair: Dr.KamalKar, Chairman, CLTS Foundation</p> <p>Panellists:</p> <ul style="list-style-type: none"> - Dr. RijaLalanirinaFanomeza, Director, FAA, Madagascar - Dr. Mya Than Tun, WASH Officer, UNICEF-Yangon, Myanmar - Dr. JoelinaRatenfinjanahary, CLTS Coordinator (FAA Program), Madagascar 		
7:30 onwards		Dinner		

Day 3: 11th December 2012

Theme: NBA and Policy Flexibility: Where do we go from here?

Time	Topics	Speaker(s)		
8:30- 10:30am	Way forward plans and Ranchi declaration	<p>Chair: Dr. Kamal Kar, Chairman, CLTS Foundation</p> <p>Panellists:</p> <ul style="list-style-type: none"> - Mr. Frank Odhiambo, UNICEF Delhi 		

		<p>- Mrs. Amina Ramadane, UNICEF Chad</p> <p>- Shri Deepak Sanan, Additional Chief Secretary, Government of Himachal Pradesh</p> <p>- Mr. Vinod Mishra, National Coordinator, WSSCC</p>		
		Formation of international forum of CLTS practitioners		
Tea/ Coffee Break 10:30am- 11:00am				
11:00-1:00pm	Closing and Valedictory	Mr. Rajendra Prasad		
Lunch 1:00pm				

ANNEXURE III

List of Participants

INTERNATIONAL PARTICIPANTS	
EAST TIMOR	
Mr Elias Pereira Moniz	Secretary of State for Water Supply, Sanitation and Urbanization, Ministry for Public Works eliasmoniz10@yahoo.com
Mr Joao N. da Piedade Bras	National Director for Basic Sanitation Services, Ministry of Public Works jll_timor@yahoo.com
Ms Faviula Monteiro da Silva	Senior Coordinator RWASH, AUSAID
Mr Rodolfo de Araujo Dias Pereira	UNICEF WASH Officer rpereira@unicef.org
Mr Alexandre R.B Sarmento	Deputy General Manager National Development Agency asarmento@odu.gov.tl
Mr Alexander Grumbley	National Planning Officer, Ministry of Health Alex.Grumbley@besiktimor.org
Mr Jose Antonio Brites Seixas	Advocacy Officer, WaterAid Timor Leste zitu010@yahoo.com
Mr Antonio da Costa	National Development Agency
Mrs Siga Osvaldinha Patrocinio	National Sanitation Officer, Ministry Of Health Timor Leste Tachira.Patrocinio@googlemail.com
Mr Joao Pinto Soares	Water and Sanitation Manager, Red Cross Timor-Leste jpinto68@yahoo.com
MADAGASCAR	
Mr Niriy Lanto Jean Luc Rakotodrasoa	Director of Sanitation and Hygiene, Ministry of Water, Gov of Madagascar, rak_nirilanto@yahoo.fr
Dr Rija Lalanirina Fanomeza	Director, FAA, Madagascar, frijalalanirina@gmail.com

Dr. Joelina Ratefinjanahary	CLTS Coordinator, FAA Program Madagascar rjoelina@yahoo.com
ANDRIAMANAMPISOA Jean Clement	GSF program Madagascar Translator ajclement1@yahoo.fr
CAMBODIA	
Khon Lydo	CLTS Officer Dept of Rural Health Care, Cambodia khonn_lydo@yahoo.com
Chhorn Chhoeun	Rural Sanitation Officer, Ministry of Rural Development Cambodia chhoeurnsv@gmail.com
MYANMAR	
Dr. Mya Than Tun,	WASH Officer, UNICEF-Yangon, Myanmar mttun@unicef.org
CHAD	
Mr Abdallah Abdelrassoul	WASH Specialist UNICEF- Chad aabdelrassoul@unicef.org
Mrs Amina Ramadane	UNICEF/Ecole Saine Menagesain CLTS partner organisation ecolesaine@yahoo.fr
NEPAL	
Balkrishna Pokhrel,	Program Manager Federation of Drinking Water and Sanitation Users Nepal (FEDWASUN) balkrishna@fedwasun.org , bk_pokhrel@yahoo.com
Prem Nidhi KC,	Sociologist, Ministry of Urban Development of Nepal Premnidhi.KC@gmail.com
Padam Bahadur Kunwar,	Engineer, Department of Drinking Water and Sewerage of Nepal Padamkunwar1182@gmail.com
Tilak Neupane,	Engineer, Department of Drinking Water and Sewerage of Nepal tilak.neupane26@gmail.com
MONGOLIA	
Ms Munkhzul Zhalzan	World Vision Mongolia, munkhzul_khalzan@wvi.org zolkamgl@yahoo.com
Ms.Lkhagvasuren Jadamba,	Head of Public Health Division of the Khuvgul Aimag Health Department Lkhagvar_cm@ yahoo.com
INDONESIA	
Ms Ni Nengah Yustina Tutuanita	Directorate of Environmental Health, Sub-directorate of Water and Basic Sanitation, Indonesia toetoe_anita@yahoo.com

SUDAN

Nimeri Ali Ahmed	Operations Manager Plan International Sudan nimeri.ali@plan-international.org
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MALI

Mr. Kalifa Keita	Water, Sanitation and Hygiene Specialist UNICEF MALI, kakeita@unicef.org
Mr. Modibo Diallo	Ministry of Environment and Sanitation (MEA) Department of Sanitation (DNACPN) modibodiallo250@yahoo.fr
Mr. Moussa Cissoko	Ministry of Environment and Sanitation (MEA) Department of Sanitation (DRACPN) moise_cis@yahoo.fr

PACIFIC REGION

Brooke Yamakoshi	WASH Officer UNICEF, Solomon Islands, byamakoshi@unicef.org
Hilson Toalui	WASH Officer UNICEF Vanuatu, htoaliu@unicef.org
Kibrom Teweldemedhin	WASH Officer UNICEF, Kiribati, kteweldemedhin@unicef.org
Beia Tiim	WASH Community Development Officer UNICEF Kiribati btiiim.unicef@gmail.com

NATIONAL PARTICIPANTS**ODISHA**

Sri S.N. Tripathi	IAS, Principal Secretary 0674-2395202/ 2392171, wsso.odisha@rediffmail.com
Er. S.K. Mohanty	Chief Engineer, OSWSM oswsm@rediffmail.com
Sri R.N. Das	Consultant, HRD WSSO (OSWSM) rabi.das2007@yahoo.co.in
Shri Gouri Shankar Mishra	Expert Policy and Development TMST Odisha gourisankar66@hotmail.com
Shri Subrat Kumar Ratha	WASH Expert TMST Odisha srath@ipeglobal.com
Brecht Mommen	WASH Specialist UNICEF, State Office 44 Surya Nagar Bhubaneswar-751003, Odisha +91-6742397977/78/79 bmommen@unicef.org

KARNATAKA

Dr. Gautam Arali	Nodal Officers of Bidar , Zilla Panchayat, Bidar 09448125102, gautamarali@gmail.com
Smt. Indira. R	Nodal Officers of Bidar , Zilla Panchayat, Raichur

	9632762144, zssrajchur@gmail.com
Ayan Biswas	Advocacy Manager ARGHYAM, Bangalore ayan@arghyam.org
Vijay Krishna	Director, Sanitation ARGHYAM, Bangalore vijay@arghyam.org
Madhavi Purohit	Sr. Communication Officer ARGHYAM, Bangalore madhavi@arghyam.org
GOA	
Shri D.J.S. Borker	Chief Engineer-I. O/o. The Chief Engineer-I, (PHE, Road & Bridges, National Highways) Public Works Dept., Govt. of Goa, Altinho, Panaji-Goa-403001 09370260613/ 0832-2224472, cel-pwd.goa@nic.in
Shri Santosh B. Bhimegovda	State Coordinator, 9370698176, gsantosh16@ymail.com
HARYANA	
Mr. Naresh Kumar	State Consultant(NBA), Sanitation & Hygiene, Chandigarh captnaresh@rediffmail.com
Dr Amit Agrawal	DC, Hissar dramit_agl@yahoo.co.in
HIMACHAL PRADESH	
Robin George	State Coordinator Department of Rural Development, Himachal Pradesh ccdusanitationhp@gmail.com
UTTAR PRADESH	
Jagtamba Singh	M.L.A Uttar Pradesh
BIHAR	
Shri Arun Kumar Shrivastava	Chief Engineer, PHED, 9431494248 ceurbanphed@yahoo.in
Shri Chiranjeev Kumar	State Coordinator (BSWSM) 9304562306, dir_pmu@yahoo.co.in
CHATTISGARH	
Mritunjay Chandra	CCDU, PHED Neer Bhawan Raipur, Chattisgarh mritunjay_chandra@rediffmail.com
ANDHRA PRADESH	
Shri R. Jagan Mohan	Chief Engineer & Project Director, SWSM, Hyderabad SRTGN Bhavan, HRD Building, 1st Floor, Erramanzil Colony, Hyderabad-500082, 8008502002 pd_swsmp@ap.gov.in swsmpeshi@gmail.com
Shri Vijay Prakash	Superintending Engineer, RWS

	vijayprakash@yahoo.com
Shri G. Raja Rao	Member Secretary, DWSC/SE, RWS&S, Guntur Dist. O/o. Superintending Engineer, RWS&S, Guntur. 9642112213, se_rws_vspm@ap.gov.in
UTTARAKHAND	
Shri D.R. Joshi	State Coordinator (NBA), Project Management Unit, The Swajal Project Mussoorie Diversion Road, Makkawala, Dehradun, 9568128777, dr.joshiac@gmail.com
MADHYA PRADESH	
Smt Sandhya Chaturvedi	CLTS Specialist (State Consultant) Rural Development (SWSM) sanshiva2000@yahoo.co.in
MEGHALAYA	
Shri K.D. Talukdar	SE (PHED) Rural Circle, Shillong cum member Secretary, DWSM, East Khasi Hills Districts, Tura Circle, Tura 03651-232822, (O) 03651-232957® kdt1962@rediffmail.com
RAJASTHAN	
Shri Ved Prakash	Sr. Consultant UNICEF, Rajasthan seniorconsultantddws@gmail.com
Shri Rajesh Kumar Bansal	Director, CCDU, Sanitation, Panchayati Raj Dept. Jaipur, Rajasthan 9414049788, tscrajasthan@gmail.com
Shri Kamlesh Bansal	Accompanying Director, CCDU, P.R.D Jaipur, Rajasthan
WEST BENGAL	
Shri Ganesh Choudhary	OSD & Ex-officio State Coordinator (NBA) Govt. of WB, P&RD Dept. State Institute of panchayats & Rural Development, Dept. of P&RD, Govt. of WB, Kalyani 9679250335, gchoudhary4@gmail.com
Shri Pannalal Mahapatra	OSD & Ex-Officio Joint Secretary Govt. of WB, P&RD Dept. Jessop Building (1st Floor), 63, N.S. Road, Kolkata-01, 9007391810 plmwbprrd@gmail.com
TAMIL NADU	
Tha. Murugan	Additional Director of Rural Development and Panchayat Raj, CCDU, TWAD BOARD, Chepauk, Chennai- 5Add. Dir. RD&PR addrdsc@gmail.com
Dr. B. Regina Papa	Communication Strategist and Sanitation Specialist, CCDU, Directorate of Rural Development and Panchayat Raj, Saidapet, Chennai-15. brpapa@yahoo.com

NEW DELHI

Mr Frank Odhiambo	PhD. Sanitation Consultant UNICEF India Country Office 73 Lodi Estate, New Delhi 110 003 India Tel: +91 11 24690401 Ext 169 Fax: +91 11 24691410 fodhiambo@unicef.org
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GOVERNMENT OF INDIA

Dr. Dinesh Chand	Addl. Advisor (PHEE) Ministry of Drinking Water and Sanitation d.chand@nic.in
Anand David	Representative Embassy of Ireland Anand.David@dfa.ie

JHARKHAND

Sri Debashish Gupta	Development Commissioner, GOJ
Sri Sudhir Prasad	9934316817 Additional Chief Secretary, GOJ
Sri Sardendu Narayan	SPMU, 9431171291 Engineer-in-Chief, DW&SD Jharkhand
Sri Navin Parmar	SPMU, 9431150396 Chief Engineer-cum-Executive Director, DW&SD Jharkhand novindwsc.ranchi@gmail.com
Sri Ram Bilash Sinha	9430757032 Superintending Engineer, Rural Circle, Ranchi, DW&SD Jharkhand se.ranchi33@gmail.com
Sri Ramesh Kumar	9431101019 Superintending Engineer, DWSD Gumla, Jharkhand sedwsc.gumla@gmail.com
Sri Bijay Kumar	9661140757 B.D.O., Kuru, Lohardaga bdokuru@gmail.com
Sri Dhairyा Nandan Prasad	SPMU, 9934155971 Director -I, DW&SD Jharkhand director.spmu@gmail.com
Sri P.C. Choudhary	SPMU, 9199537151

	Director - II, DW&SD Jharkhand dir2spmu@gmail.com
Sri Rajendra Prasad	SPMU, 9431516738 Deputy Director-I, DW&SD Jharkhand prasadrajendra1958@gmail.com
Sri Sanjay Kumar	9771349156 Executive Engineer, Ranchi East, DW&SD Jharkhand ccdwsd.ranchi@gmail.com
Sri Prabhat Kumar Singh	9199434921 Executive Engineer, Ranchi West, DW&SD Jharkhand prabhatsingh1008@gmail.com
Dr. Ravindra Bohra	SPMU, 9608614325 State Coordinator, S&H, DW&SD Jharkhand ravindrabohradr@yahoo.com
Awadesh Kumar Sinha	Sr. Correspondent Hindustan awadheshmhml@gmail.com
Vijay Kumar	DWSD Jharkhand vijaydwsd@yahoo.co.in
James Toppo	Asst. State Coordinator(S&H) SPMU Ranchi toppojames@gmail.com
Nitin Kumar	State Coordinator DWSD Ranchi nitinkumar7951@gmail.com
K.K Ghosh	Training Coordinator DWSD Jharkhand kanakghosh@rediffmail.com
Dr Vikas Kumar	Dy. General Manager MECON Limited Ranchi vikaskr_2004@rediffmail.com
Ms Mamta Kumari	Executive Assistant DWSD(SWSM) mamta13pradhan@gmail.com
Randhir Kumar	Community Mobilisation and Research Officer Dept. of Safe Drinking Water and Sanitation, GOJ randhirjhswsm@gmail.com
Joljus Lakra	Executive Assistant SWSM Jharkhand joljusprabal@gmail.com
Brajendra Henrong	Under Secretary Rural Development Department Jharkhand

	brajendrahenrong@gmail.com
Kumar Prashant	J. Executive Assistant PMU Ranchi kprashantranchi@gmail.com
Ranjit Kumar	Lab Assistant State Water and Sanitation Dept. Jharkhand
Sumanjan Kumar	Ex. Assistant PMU Jharkhand sumanjansrivastava@gmail.com
Manoj Kumar Chaudhary	Deputy Director II SWSM Jharkhand mkcdwsd@gmail.com
Dr SC Jain	AGM, MECON Ranchi rch_jainsc@rediffmail.com
Aastha Anuragi	WASH Specialist State Water and Sanitation Mission Jharkhand aasthaanuragi@gmail.com
Isha Kumari	State Coordinator SWSM Jharkhand isha_vadehi@yahoo.co.in
Amalendra Kumar	DW&S Dept. Jharkhand akumardwsd@gmail.com
Arava Rajkamal	DDC Gov of Jharkhand ddc@drdaranchi.com
Kallosh Saha	State Coordinator(Hydro Geology) State Water and Sanitation Mission Jharkhand kallosh74@gmail.com
Asha P George	State Coordinator Program Management Unit Jharkhand ashageorge.p@gmail.com

WATER AND SANITATION PROGRAMME-SA WORLD BANK

Juan Costain	Regional Team Leader jcostain@worldbank.org
Ajith Kumar	ckumar1@worldbank.org
M. Kullappa	Water and Sanitation Specialist mkullappa@worldbank.org
Upneet Singh	Water and Sanitation Specialist usingh@worldbank.org
Debabrata Bhuniya	State Coordinator Ranchi, Jharkhand devbrat1@gmail.com

Priyanka Singh	State Coordinator Bihar & Jharkhand psingh9@worldbank.org
Thomas John	Coordinator ftravel@airtelmail.in
WATER SUPPLY SANITATION COLLABORATIVE COUNCIL Geneva	
Shri Vinod K. Mishra	National Coordinator, WSSCC vinodmishra2810@gmail.com
CLTS FOUNDATION	
Dr. Kamal Kar	Chairman CLTS FOUNDATION kamalkar@yahoo.com
Swati Kar	CLTS FOUNDATION veda_swatikar@yahoo.co.in
Anindya Paul	CLTS FOUNDATION andiipaul@gmail.com
Deepak Sanan	CLTS FOUNDATION deepak_sanan@hotmail.com
Katherine Pasteur	CLTS FOUNDATION katherine@pasteur.net
Moumita Chakraborty	CLTS FOUNDATION mchakraborty.cltsfoundation@gmail.com
Sonali Mundle	CLTS FOUNDATION sonali.cltsfoundation@gmail.com
Moumita Mukherjee	CLTS FOUNDATION cltsfoundation@gmail.com
Kirsty Milward	Freelance Consultant Suchona/CLTS FOUNDATION milward.bose@gmail.com
Shourabh Mukherjee	Chairman, Young Horizon School Kalikapur E.M Bypass Kolkata West Bengal ymws@sify.com
Moushumi Haldar	Young Horizon School
GREEN SANITATION FOUNDATION	
Sudip Sen	sensudip@stoneindia.co.in
Shelabh Bhalla	Dy. Manager GSF, Kolkata

shelabh@stonebiotech.co.in