

CLTS Sharing and Learning Workshop Wednesday 18th May 2016



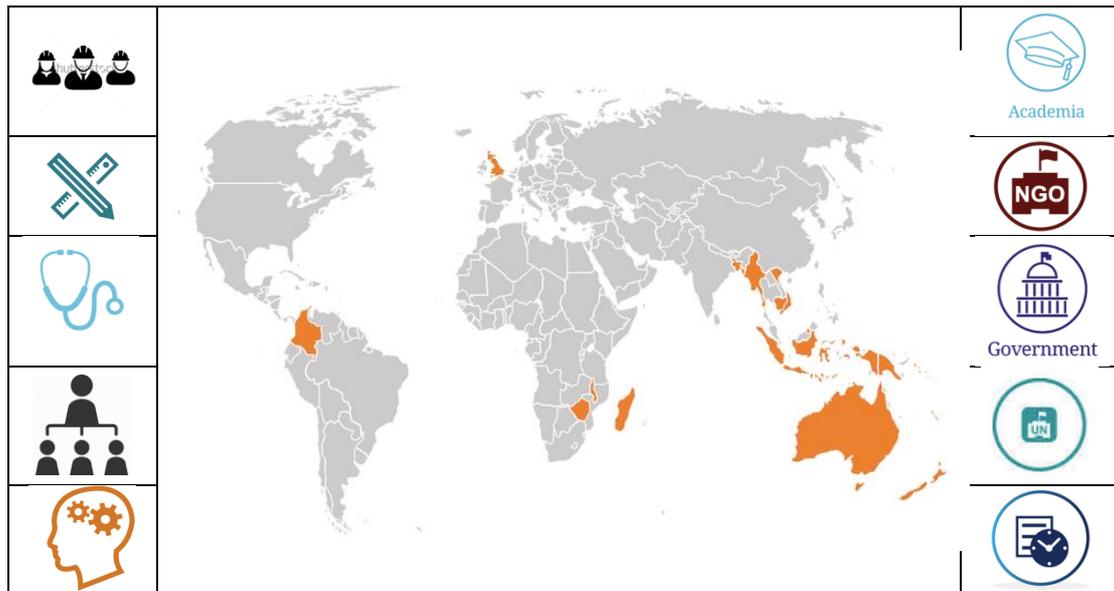
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WASH 
FUTURES 


Water, Sanitation & Hygiene Conference 2016

Introductions

At the start of the meeting an exercise was introduced to see who is in the room. Participants represented a range of organisations (academics, NGOs, government, UN and consultancies), had a variety of backgrounds (disciplines including engineers, scientists, health professionals, managers and social sciences) and came from a number of countries (UK, Bangladesh, Timor Leste, Vietnam, Cambodia, Vanuatu, Malawi, Australia, Solomon Islands, Myanmar, New Zealand, Madagascar, Fiji, Indonesia, Colombia and Zimbabwe). Details are in the participant list.



Participants had varying levels of experience and expertise on CLTS: the more experienced participants were asked to introduce the newcomers to the key aspects of the process. After these introductions, participants worked together to create the agenda for the workshop.



Participants were asked to write on cards what they wanted to know - or share - on the following topics:

- *Sanitation for the poorest, most vulnerable and hardest to reach*
- *Sustainability, speed and scale*
- *Follow up, verification and certification*

The cards were then sorted and clustered to inform the meeting agenda.

Open discussion: Pits filling up

The first open discussion theme was on 'pits filling up'. *Do people move up the sanitation ladder to better latrines? Is it appropriate to build basic latrine as a first step or is it more sustainable to build a good quality latrine first?*

- Plan Australia and Plan Netherlands conducted research into sustainability 2 or more years after ODF verification in 4 countries in Africa. The researchers found functioning toilets (re-verification was part of the study) but found less evidence of handwashing. Thus, assessing ODF against more stringent criteria (such as handwashing) meant the success rate for sustainability came down.
- In Ethiopia, Plan has been effective in promoting the building of simple toilets: if people wait until they can build more durable solutions then that might stymie the enthusiasm they have after triggering.
- In Madagascar, pit filling has been a key issue. In urban settings, people live in compounds with 5-40 people sharing a toilet: pits can fill every 3-5 months. Households need a financial plan in place for emptying the toilets but they often don't have one before the pits fill. This isn't enough time for people's habits to change. So when the pit is full, people don't see the benefits of using a latrine and revert to OD.
- In Pakistan, people are moving from open defecation to pour flush latrines, which is a success in terms of moving to improved sanitation but has implications for environmental pollution i.e. black water overflow from the septic tanks is becoming a common problem.
- Partial usage of toilets is another key issue: when only some members of the household can use the toilet or people only use the toilet for some of the time. Within the household men and women might not be able to share the same toilet, for instance with in-laws in PNG. Thus, some households build 2 toilets. Or else one member of the household might have the key to the toilet and prevent others from using it. In the Pacific Island Countries the perception that toilets are for adults is quite common, and so children do not use them. It might also be thought that toilets are unhygienic for children (0-5 years) to use. In Madagascar, some children might be afraid to use the toilet and so prefer to OD.
- OPM collected some interesting data through their Value for Money Study for DFID in Ethiopia, Mozambique, Pakistan and Bangladesh. They found that some households had never experienced their pits filling up (e.g. Mozambique) but that in other countries households in rural areas had covered and dug a new pit when the old one filled up. In South Asia, people were emptying pits since they had invested comparatively more in their toilet (than African households). The decision to empty also depends on population density. In India, people don't want to empty their septic tank; they would rather have a new one.
- Some people think it's healthier to defecate in the open air. This also depends on the quality of latrine. There has been some work on health impacts of toilets sited near households (see work of Jeroen Ensink). Not all definitions of improved latrines include a lid on the toilet. Poor quality latrines near the household (fixed point open defecation)

could have a health effect. Attention to the ground water is also required to ensure that latrines don't contaminate the drinking water.

- There are some examples where communities have been triggered and households have quickly dug a pit (e.g. in South Sudan, people have build pits within 3 months), but its not known if this has improved sustainability.
- In the early days, the focus on CLTS was on the demand-side without much attention to the supply side. Attention to sanitation marketing is important to ensure demand can be met. Good practice varies by context. In general, we have seen that in Africa the materials/supply-chain isn't widely available and that people haven't improved their latrines; in Asia the supply chains are more likely to be in place.

Group discussions at the tables

Participants discussed the following issues at their tables. The key points reported back are shown below:

(I) Verification and certification

- The group discussed their experiences with verification and certification in a number of countries including Myanmar, Timor Leste, Madagascar and Zimbabwe.
- Participants found some commonalities in the way verification and certification is done in these different countries. In general there is a request from the community and verification/certification is made against certain criteria (such as the absence of visible faeces). Usually government personnel perform verification but in Madagascar verification has been done by neighbouring villages and reported to higher bodies, which has benefits in terms of time and cost.
- In some countries, the certificate for ODF is time limited, in Myanmar certification lasts 1 year and then expires.
- Some participants reported issues with 'poacher and gamekeeper' with verification and certification i.e. when those who did the triggering/implementation are also responsible for verification/certification they have a vested interested to show success.

(II) Monitoring (How what, when, who)

- **Who?** Monitoring needs 'awesome' people. The process only as good as the people. There are pros and cons of whether those who do the monitoring are inside or outside the community. And it is important to establish who needs the information and what they will do with it.
- **What can be used to monitor?** A variety of indicators might get monitored including ODF or health benefits. Common indicators for monitoring would help ensure some standardisation across contexts. Monitoring can be done using technology but it's not clear at what point technology should be introduced into the process (e.g. Mwater, Akvo and mobile phone for data collection)? And is technology a good thing for monitoring,

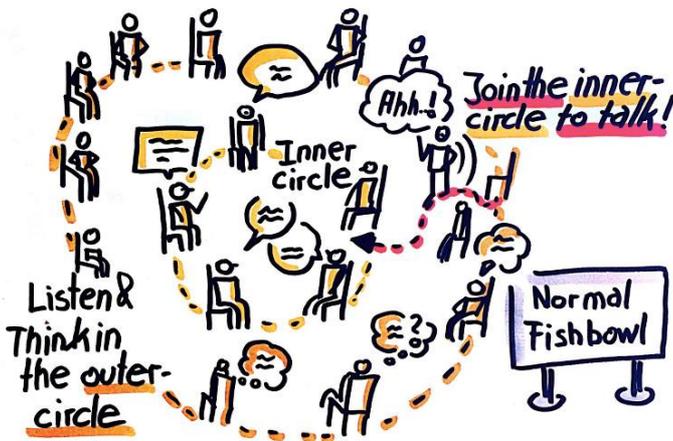
does it lead to better analysis that is used to inform the decisions? Face to face observations and qualitative data collection could be an additional form of monitoring.

- **How to monitor?** It is important to monitor the CLTS process as well as the quality of the outcomes. Government support in the process is essential. Monitor should be done in a standardised way. The process is only as good as the people.
- **When?** Monitoring is usually done at baseline and/or triggering and post-implementation. But it is important to monitor throughout the CLTS process to ensure quality outcomes.

(III) Post ODF Follow Up

- Facilitators must have natural abilities, not everyone who is trained will make a good facilitator. Follow-up post ODF should concentrate on use rather than just ownership of a latrine (to ensure that communities don't revert to their old practices after triggering process). The focus should focus on whether the toilet (output) is used (outcome)?
 - Is speed in attaining ODF at odds with sustainability?
- Building a pit latrine in some settings can make the situation worse: on atolls digging a pit latrine can contaminate the ground water. Thus, it is important to consider water supply and sanitation at the same time (ground water contamination is not a second generation problem in the atolls). It is also important to consider the private sector and supply-side in this context: in some settings, materials have to be brought by boat to households. Collective purchasing arrangements have been effective to bring down the costs.
- Sustainability of the support systems and follow-up is also important: who should do the follow-up? Are volunteers best (do they have an incentive if they are not being paid)? Or community health workers (who are government employees but only do it because they are paid)?

Fish Bowl discussion

 <p>Source: Google images (http://www.marcelvanhove.com/)</p>	<p>A fishbowl conversation was held between participants (4 at a time) on a variety of topics including the least able, subsidy, handwashing and combining CLTS with other approaches.</p>
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Topic	Issues discussed
People who are least able	<p data-bbox="439 341 904 368"><u>Anecdotal evidence of community support</u></p> <ul data-bbox="439 389 2029 863" style="list-style-type: none"> <li data-bbox="439 389 2029 464">• CLTS is an opportunity to think about people that are vulnerable and marginalised to take action to help vulnerable households – like child headed households. <li data-bbox="439 485 2029 560">• The mythology is that the community will always help the least able to help themselves. In a number of contexts and social settings, the community has refused to support widows/single older women because didn't think they needed help. <li data-bbox="439 580 2029 810">• Assumption that support has to be a monetary subsidy. There are other ways to get the most vulnerable onto the sanitation ladder. In Malawi, subsidies cannot be sustained. At village level by-laws allow communities to collect fines that can be used to support the most vulnerable but it can be difficult to identify vulnerable people. There have been instances where assistance has been provided i.e. the cement to make the slab and line the pit; 50kg bag of cement is enough for a slab for 3 households. Youths have also helped digging latrines and building structures. <li data-bbox="439 831 2029 863">• Most significant change stories are a way to identify how the most vulnerable people in the communities have been supported. <p data-bbox="439 900 860 927"><u>Does San mark support the least able?</u></p> <ul data-bbox="439 963 2029 1098" style="list-style-type: none"> <li data-bbox="439 963 2029 995">• People can support vulnerable households by using local materials and resources (in Africa). <li data-bbox="439 1016 2029 1098">• Going straight from ODF to a good quality latrine (e.g. in East Asia) makes it more difficult to support vulnerable people. The need to buy materials and spend money makes it harder here than in an African context where the requirement is labour and local materials. <p data-bbox="439 1134 584 1161"><u>Incontinence</u></p> <ul data-bbox="439 1198 972 1230" style="list-style-type: none"> <li data-bbox="439 1198 972 1230">• There is the issue with OD and incontinence. <p data-bbox="439 1267 904 1294"><u>Identification of people who are least able</u></p>

	<ul style="list-style-type: none"> • It is difficult to identify the people who have trouble building toilets – you cant always find them just by asking. • Assumption that a less able person is without resources but a single mother might have extended family; migrants who support through remittances. • School WASH team promote clean water, clean hands and safe food as well as school hygiene kits –and spread the message to communities (e.g. by singing songs). School WASH teams can identify vulnerable school students.
Subsidy for the least able?	<ul style="list-style-type: none"> • A demand generation followed by a supply-side process e.g. Sanmark (a variety of latrine options) can get you so far but it is difficult to reach the last group of people without a subsidy (e.g. Cambodia). This might be a sequencing issue rather than a subsidy vs. no-subsidy issue. • In Pakistan the community identify the poorest 10% of members and these households get a loan at a preferable rate. • At the last WASH Futures Conference someone said that it’s easier to talk about shit than it is to talk about subsidies – it’s encouraging to hear there is more flexibility to apply subsidy now – why a softening has occurred? • Smart subsidy has been used in Viet Nam to reach the poorest of the poor e.g. with an upfront voucher, or by encouraging the neighbour to support others and teaching the masons to build low cost and hygienic latrines. The smart subsidy doesn’t cover all the costs e.g. the certification process costs money. • As well as support and subsidies, there is also a need for on-going support for helping people move up the sanitation ladder. In Viet Nam Women’s Unions at the communal level help identify the poorest of the poor and provide loans for sanitation. It’s not clear yet what impact a subsidy for hardware has on sustainability - people should construct facilities that have low O&M costs. • Subsidy is used as part of the Zim CATS programme in Zimbabwe; a study is underway to see how the official subsidy for 5-10% of the population has impacted on the overall approach. In Zimbabwe, there is a history of a high standard of latrine – the toilet can be built to a higher standard than the house (cement block and roofing). CLTS hasn’t worked very well.

Shaming and discrimination	<ul style="list-style-type: none"> • Nepal has a drive to be ODF by 2017 and a national policy for total sanitation. Uptake tends to be slow for the low caste and there is some shame for lower caste in not being ODF. There has been discrimination for those who don't have toilets (e.g. flagging of faeces and denial of access to health services).
Soap and handwashing	<ul style="list-style-type: none"> • In areas where there is tourism, soap from hotels could be reused i.e. a catholic group called 'soap for hope' –used soap is reused in schools or households and health stations. • In Malawi Natural Resource Management Committees train community groups to make soap from the jatropha tree for those who cant afford to buy soap. People in Malawi have traditionally used ash but the national guidelines promote use of soap. • Ash can be used in schools – soap is vulnerable to theft, goats, also costs.
Disability	<ul style="list-style-type: none"> • Awareness of disability can be raised through the CLTS process and people with disabilities have been involved in the process. During community mapping, village chiefs often say there is no one with disability in their community but if you ask in the right way then they say yes. • People with disabilities are often isolated, without a source of income, through WASH programmes they can learn a skill that could help them get a job. When WASH service delivery is linked to income generation, the profits can be shared to subsidise access for the poorest people including people with disabilities. • Dialogue circles have been used with people with disabilities (as well as pregnant women and the elderly), carers and guardians in the village to discuss the challenges they face, identify the solutions and develop a community action plans on how to address this. Accessibility audits can highlight the challenges that people face using facilities and identify the solutions to solve the problems. NGOs have been using the arts to create awareness of WASH and promote inclusive WASH. • People think they need imported materials to build inclusive latrines but local materials are available that can work just as well.

Combining CLTS and other approaches	<ul style="list-style-type: none"> • In the Pacific, CLTS is linked to a much broader ‘Healthy Island’ Approach for community well being. • In Zimbabwe CLTS is linked to Health Club Approach (which includes health and nutrition) as well as total sanitation – Zim CATS. • In other contexts PHAST has been used alongside the CLTS approach in the same village. • CLTS has also been linked to a village saving association or income generation activity.
Local government	<ul style="list-style-type: none"> • In Nepal the government has created an enabling environment for ODF and public servants have to have toilets in their household or get a deduction in pay. • Timor Leste has a drive to make sanitation a priority at the district level (it takes about 1 month to trigger 4 villages).
School led total sanitation	<ul style="list-style-type: none"> • The triggering process is similar in SLTS: implementing agencies partner with the MoE to support the national school WASH process and make sure that the teachers are on board after the triggering process.
Concluding comments	<ul style="list-style-type: none"> • In the early days of CLTS the advice given in the Handbook was to trigger in small, homogeneous communities with good leadership rather than more difficult communities. Some of the early successes in Asia are in hill areas of Nepal and India. The Terai has larger communities with more caste differences and are proving to be difficult to convert to ODF. • It is important not to undermine governments that they have no subsidy policies –Nigeria, Chad, Ghana and Mauritania have refused sanitation loans that included policy of subsidies. Pakistan has a no subsidies. BRAC uses a targeted subsidy approach that is introduced towards the end of the process. Subsidy on a large scale can be corrupted at the local level, and doesn’t reach the poorest people, has to be very carefully targeted.

Open discussion based on the information collected on flipcharts

Participants were asked ahead of the meeting to bring information on:

- Total number of communities triggered
- Total number of communities ODF
- Government Policy on CLTS (Is CLTS explicitly included in official policy/strategy documents? Is CLTS being implemented in governmental programmes but not included in official policy/strategy? Is a national policy/strategy currently being elaborated/validated?)
- What are the three main challenges for CLTS in your country?
- What knowledge and learning is there with regards to ODF sustainability in your country?
- What innovations are there that might be useful for others to know about?
- What CLTS-related research is completed/ongoing/planned in your country organisation, especially concerning post-ODF and sustainability”

This information was transcribed onto flip charts during the meeting breaks:

(I) Priority issues

The discussion focused on:

- **Can CLTS and PHAST co-exist?** Within the Civil Society WASH fund, there have been different approaches to combining PHAST and CLTS. In Myanmar, community volunteers are trained on PHAST to generate interest in building a latrine before the community is triggered using CLTS. In Zimbabwe PHAST is used to maintain the gains of CLTS for sustainability.
- **Shaming and punishment** CLTS isn't intended to shame people for their behaviour but feel shame for what they have been doing – it takes a 'do no harm' approach in the community. In some cases the Walk of Shame has been changed to Walk of Pride, appreciative enquiry. However, whistles, humiliation, denial of licenses and other human rights infringements have been reported. In Tanzania, red flags were used on the households without a latrine; and in other places CLTS has reduced the level of respect in youth-elders interactions.
- **Leadership, political will and champions to complement CLTS?** Going to scale has to be done with government but learning is still needed on how to get government support and ensure that champions rise? It's also important to get managers to understand CLTS more fully.
- **Is triggering enough to achieve total sanitation without any support on water facilities?** There is a strong connection between water and sanitation practices. Where people are washers then it's hard to do total sanitation without water. People don't want to take a half way step –a pit latrine – they would rather wait for a latrine that can be flushed with water.
- **How do we use CLTS in the Pacific where people OD in the ocean?** CLTS doesn't work in all contexts and isn't needed in all contexts; in some Pacific Island Countries, hanging latrines over the ocean have been used and the fish feed on the shit. People will not trigger or use latrines that contaminate the soil. Therefore, technical options are needed e.g.

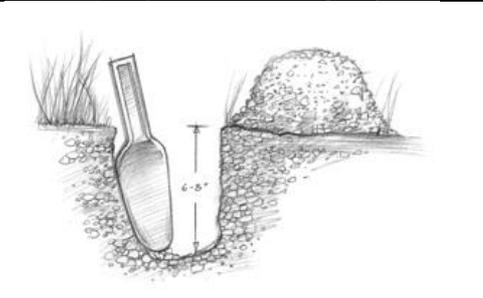
compost toilets that are more sustainable on atolls since ground water lenses might become contaminated.

Failure and mistake

- Faeces flagging in Nepal has been a mistake (bright coloured flags placed in faeces found lying around, which is intended to make villagers feel ashamed). What are other ways to deal with people who refuse to change?
- After triggering it is expected that people will stop OD very quickly but it often takes time. Does ODF depend on % of community triggered?
- How to sustain ODF beyond certification – effective follow up at regular intervals, re-verification process for rebuilding toilets
- Poor triggering at scale = disaster – failures in that so go for quality in the facilitation
- Poor monitoring is a challenge
- Overlap with WASH organisations with different approaches –challenges is a subsidised programme near by that makes things different – making the subsidy work

(II) Innovations and insights to share

The discussion focused on:

 <p>Source: Google images (https://www.aplos.com/academy/course/how-to-write-a-nonprofit-business-plan/marketing-strategy-section)</p>	<p>The 4 Ps of sanitation marketing have been used in Cambodia to bring services and supplies closer to the consumer: making the slab locally minimises transport costs and reduces costs of labour.</p>
 <p>Source: Google images (https://emergencysanitationproject.wikispaces.com/Alternative+Toilet+Options)</p>	<p>Tiger worm toilets have been used by a variety of agencies (including Oxfam and Water for People) in a number of different settings including Ethiopia, Liberia, India and South Africa. The Tiger worms compost the faecal matter, which reduces the frequency with which the pits needs to be emptied. The waste that is generated is safer and easier to handle.</p>
 <p>Source: Google images (http://tacticalintelligence.net/blog/survival-sanitation-how-to-deal-with-human-waste.htm)</p>	<p>In India, the practice of Gandhighiri has been successful in persuading people to use the cat method of sanitation (putting sand on top of the faeces) after triggering.</p>

Gandhigiri refers to the practice of the ideals of Mahatma Gandhi; it includes the tenants of satya (truth) and Satyagraha (force which is born of Truth and Love or non-violence)

Source: <https://en.wikipedia.org/wiki/Gandhigiri>

(III) Research projects underway include:

- East meets West has a Randomised Control Trial on CLTS triggering in Lao PDR.
- Naomi Francis is completing her PhD research on community-based WASH program in Timor Leste. Naomi has completed 12 months of field work in remote, rural Timorese communities where WaterAid is implementing its rural WASH programme that involves both water supply and CLTS/sanitation marketing.
- OPM are leading a [Randomised Controlled Trial](#) in Pakistan as part of DFID's WASH Results Programme.

Close: To close, Robert thanked all for participating so fully. It was a very rich occasion and we hope to stay in touch.

Ideas for future Frontiers

- Facilitation
- Urban
- Follow up how different communities do it
- Where by who evidence of impact
- Income generation led to ODF
- Smart subsidies and focused financing
- Institutional triggering – ministry level triggering
- Post conflict settings

Resources referred to in the workshop

Lisa Cameron, Susan Olivia, Manisha Shah (December 2015) [Initial Conditions Matter: Social Capital and Participatory Development](#) Discussion Paper No. 9563

WaterAid and SHARE (2015) [Hygiene needs of incontinence sufferers](#).

Tiger worm Toilets:

- David Watako, Koslengar Mougabe, Thomas Heath (2016) [Tiger worm toilets: lessons learned from constructing household vermicomposting toilets in Liberia](#). Waterlines 35(2), pp. 136–147
- C. Furlong, W.T. Gibson, A. Oak, G. Thakar, M. Kodgire, R. Patankar (2016) [Technical and user evaluation of a novel worm-based, on-site sanitation system in rural India](#). Waterlines 35(2), pp. 148–162

Papers on behaviour change post intervention in Nepal have been submitted to [Social Science and Medicine](#) and [Medical Anthropology](#)

CLTS Writeshop

A writeshop was held in Kenya in 2015 for those wanting to document an interesting experience on CLTS and sustainability. The book has 19 chapters and themes include technology, government, social equity and inclusion, and the phased approach in the Philippines.

The book will be launched at WEDC Conference in Ghana (11-15 July 2016). The book will be available for free download on the website: <http://www.communityledtotalsanitation.org/>

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