

TRIGGER

ANNUAL
2012
REPORT

Publication for the Pan-Africa Community - Led Total Sanitation Project by Plan International





CoverPhoto: © Plan Haiti

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Acronyms

CDF	Constituency development fund (Kenya)
CHW	Community health worker (Kenya)
CLTS	Community-led total sanitation
DA	District Assemblies (Ghana)
DGIS	Dutch Directorate-General for International Cooperation
DHO	District health office (Malawi)
HAS	Household Surveillance Assistant (Malawi)
HWF	Hand washing facility
IEC	Information, education, communication (Uganda)
JMPT	Joint monitoring programme team (Zambia)
KVIP latrine	Kumasi Ventilated-Improved Pit Latrine
MoPHS	Ministry of Public Health and Sanitation (Kenya)
PO	Partner Organization (Ghana)
ODF	Open defecation free
RESA	Region of Eastern and Southern Africa
RHC	Rural health centre (Zambia)
SAG	Sanitation Action Group (Zambia)
SLTS	School-led total sanitation
UCLTS	Urban community-led total sanitation
VHT	Village health team (Uganda)
VIP latrine	Ventilated improved pit latrine
VSLA	Village Savings and Loans Association (Uganda)
WASH	Water, sanitation, hygiene



School toilet block funded by Plan in Ghana

Introduction

CLTS as means of socio-economic transformation and a path to climbing the sanitation ladder

Community-Led Total Sanitation (CLTS) focuses on the behavioural change needed to ensure real and sustainable improvements – investing in community mobilisation instead of hardware, and shifting the focus from toilet construction for individual households to the creation of open defecation-free villages. CLTS stresses community empowerment and collective behaviour change including safe sanitation and hygiene with hand washing.

In 2007, Plan International introduced CLTS in Africa, as an effective approach to achieving its child survival and development goals. In the last six years, 10 Plan Country Programmes in the Region of Eastern and Southern Africa have adopted CLTS as the main approach to promoting sanitation at scale. CLTS has been recognized as the key strategy to implement the sanitation national policies of 6 countries in the region (Malawi, Zambia, Tanzania, Uganda, Kenya and Ethiopia)

The Pan-Africa CLTS Programme is one of the efforts of Plan International to promote sanitation at scale beyond national and regional boundaries. The project was launched in January 2010 as a multi-country initiative that involves 5 countries of Eastern & Southern Africa (Kenya, Ethiopia, Uganda, Malawi and Zambia) and 3 countries from West Africa (Sierra Leone, Ghana and Niger). The Programme is being coordinated by Plan Nederland and co-financed by the Ministry of Foreign Affairs in The Netherlands.

The main objectives of the Pan-Africa CLTS Programme are

- to reduce infant and child morbidity and mortality in the 8 African countries and
- to empower rural and peri-urban communities through the use of CLTS, School-Led Total Sanitation (SLTS) and Urban Community-Led Total Sanitation (UCLTS).

A key focus of the project is the sharing of experiences, and the facilitation of learning between the 8 countries and with other external audiences. This has been supported by the two international partners, IDS and IRC.

In 2012, the 8 implementing countries were intensively engaged in the mid-term evaluations.

The Pan-Africa CLTS Programme has become an inspiration for other national, regional and continental multi-country sanitation initiatives. Plan Malawi has become the 1st Country Programme in the region to be selected as Executive Agency (EA) of the Global Sanitation Fund (GSF), which is a nation-wide CLTS/Sanitation Marketing project. Plan Tanzania has learnt from Plan Malawi experience and secured the EA position in the GSF Project. The CLTS scalability multi-country research project, funded by USNO and the Bill and Melinda Gates Foundation has used the experiences from the Pan-Africa CLTS Programme.

This “Trigger 2012” reflects both the successes and challenges of the 8 countries as the project moves into its 4th and final year.

Plan International RESA, Plan Nederland, Institute of Development Studies (IDS) and IRC

Pan-Africa Programme



This Trigger magazine is meant to inform a wider audience about the development of the Pan-Africa Programme and to share lessons learnt that could be useful in implementing similar CLTS projects. In this issue, we outline the progress at country level, the main challenges and the lessons learnt during 2012.

Scaling up CLTS

Community-Led Total Sanitation



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Ethiopia

Pupils help in maintaining cleanliness



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Zambia

Primary School children recite a CLTS poem



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Kenya

WASH team visits communities



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Ghana

Construction of low cost latrines in Tororo, Uganda



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Uganda

Village members celebrate ODF status



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Sierra Leone

Solar powered water supply system installed by Plan Malawi



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Malawi

Toilet block well built by Plan in Tillaberi



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Niger

Progress overview

Summary of accumulated progress until December 2012

The Pan-Africa Programme has set the ambitious target to facilitating 805 rural, 36 (peri)- urban communities and 742 schools in reaching the Open Defecation Free (ODF) status by the end of 2014. As a result 2.6 million people would gain access to sanitation and improve their hygiene practices.

By the end of 2012, a total of 538 rural communities and 254 schools have gained the ODF status. Looking at the target of the entire programme this means that 67% of the targeted rural communities and 34% of the targeted schools have reached the ODF status.

This also means that by the end of 2012, 1,144,296 people have gained access to sanitation and have improved their hygiene practices. In 2011, this number was 773,821, which means that in 2012 alone 370,475 people have gained access to sanitation and have improved their hygiene practices as a result of activities of the Pan-Africa programme.

Progress in the area of engagement of the private sector has been limited so far due to the fact that sanitation marketing is actually a programme on its own and Plan staff does not have enough capacity to both implement a full blown CLTS programme and a sanitation marketing programme at the same time. Plan staff also indicated that they are still learning how to implement sanitation marketing effectively. But despite the fact that sanitation marketing did not receive full attention, almost all Plan Country Offices have piloted the approach in 2011 and 2012 and progress is being made.

Apart from this, all the national governments of the 8 countries have accepted the CLTS approach as a national approach. The Pan-Africa Programme has played a catalytic role in this process together with other NGOs that have actively lobbied for this.

In 2012 the Pan-Africa Programme reached its half-way point and a Mid Term Review (MTR) was conducted to draw lessons learnt of past and on-going activities in order to improve the implementation of the programme in the second half of the project. Overall the programme is on track to meet its targets and the programme is scaling up nicely. This is a huge achievement in a relatively short period of time.

Reflections:

summary of challenges, opportunities and mitigation actions taken

Many of the lessons learnt as part of the Pan-Africa Programme's challenges and opportunities will be of wider applicability and thus of interest to others working on sanitation and hygiene projects. They have been divided into three phases – pre-triggering, triggering and post-triggering. The pre-triggering phase refers to the preparation phase of raising awareness of the risk that open defecation presents and to reinforce a natural sense of 'disgust'; the triggering phase of CLTS refers to the community members analysing their own sanitation situation including the extent of open defecation and the spread of faecal-oral contamination that detrimentally affects everyone; the post-triggering phase of CLTS refers to the translation of the awareness and momentum from the triggering into action plans and the implementation of these plans and monitoring the results to make and keep the community open defecation free (ODF). See link <http://www.irc.nl/page/80594>

Stakeholder reports in the programme clearly show that CLTS is effective in triggering awareness of the dangers of open defecation. They improve new social behaviour in the area of sanitation. Good monitoring and follow up are needed to ensure that the initial trigger translates into sustained behaviour change, sanitation use and maintenance of facilities over time. The Pan-Africa Programme has reflected on some of the key ways in which individual countries have dealt with issues of sustainability and scalability and there are interesting examples of creative ways in which countries have overcome challenges in these areas.

See link: <http://sanitationupdates.wordpress.com/2013/08/09/creative-measures-improve-sanitation-programmes-in-eight-african-countries/>



Girls show the handmade brooms they use to clean the compound in their village

Country progress overviews

The overall progress of the Pan-Africa Programme has been good and in all 8 countries, a total of 485 communities (34 % of the overall programme target) have taken up collective action after triggering, to improve their sanitation and hygiene situation. The success rate per country varies greatly depending on context, approach, effectiveness, capacity and government support.

Despite some of the differences in implementation, there are many common challenges all 8 countries face, for example the selection and long-term motivation of effective natural leaders; sustainability of latrines during the rainy season or in areas with termites.

Within the Pan-Africa Programme, existing solutions are shared and discussion about innovative ways of addressing problems is stimulated.

This section of Trigger describes the progress per country in detail. We compare project progress between 2010, 2011 and 2012. We also outline key project achievements within the Plan Country Offices and briefly describe the main challenges, mitigating actions taken, lessons learnt and offer a short case study to illustrate the project's impact on the local community.



Photo: © Plan Malawi

Community member collecting water from a tap at one of the new water points in Malawi

Triggered @ Ethiopia



Ethiopia progress report:

Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	7,536 villages / 210 kebeles. A kebele is the smallest administrative Unit with about 30 Development Unit or Villages	0	1,351 / 46	3,141 / 103
No. ODF schools	20	0	41	168
No. people that have gained access to sanitation and improved hygiene practices	1,200,000	0	241,844	580,539

Main challenges & how they were addressed:

Sanitation activities are classified under administration costs

It is a government requirement that 70% of all NGO expenditures are allocated to programme costs and only 30% to administration. Plan Ethiopia is working with partners to address the administration cost issue. Transfers of cash to partners are considered programme costs so this would be a way around the issue of solving the problem of having too high a percentage of administration costs.

Government sector offices are often busy

Plan Ethiopia engages different segments of the community in hygiene and sanitation activities: teachers, health extension workers, kebele managers, and chair persons, in order to embed the approach in a varied range of institutions.

Difficulty in managing public latrines

Villages have built road side latrines for passers-by to use so that no one defecates in the open in an ODF village. However, management structures need to be in place on who should maintain them. At the moment no solution for this problem has been found.

CLTS is “only” behavioural change

School and health institutions need support in construction of latrine structures.

Main lessons learnt:

- Involving teachers and students in triggering and monitoring has contributed to the success of the project. Schools are now the centre of CLTS activities and all celebrations are held at schools. This has made schools more conscious and committed to sanitation.
- Planning water supply for schools and communities as a post ODF support helps communities and schools to move up the sanitation and hygiene ladders.

Hand Washing Facility for Girls' School Latrine

Community-Led Total Sanitation (CLTS) has contributed a lot towards improving the sanitation situation of communities. However, one of the major challenges of CLTS is the provision of post ODF support for communities and schools, including a water supply system for school latrine cleaning and hand washing.

Fikerte Yimer and her friends are pupils in Midregenet Primary School. Fikerte is in grade 6 and previously attended Alawo Ano Primary School up to last year from grade 1-5. Alawo Ano community was triggered in 2011 by trained facilitators and achieved ODF in 2012 being supported by the School-Led Total Sanitation approach. However, water supply in the school was a major problem.

Fikerte says, "When I was in Alawo Ano Primary School, I did not wash my hands after visiting the latrine because there was no water supply in the school. The hand washing facility (HWF) attached to the school is a symbol without function. When I joined Midregenet Primary school this year, I found there is water supply to the hand washing facility (HWF). Now



Photo: © Plan Ethiopia

Fikerte Yimer of Midregenet Primary School

I always wash my hands after visiting the latrine. Now I am healthy and attending school regularly. When I was in Alawo Ano primary School, I fell sick often and missed attending school."



Photo: © Plan Ethiopia

Fikerte and her friends showing Midregenet Primary School Girls' latrine and its HWF

Triggered @ Ghana



Ghana progress report

Ghana				
Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	50	4	20	26
No. ODF schools	25	0	7	26
No. people that have gained access to sanitation and improved hygiene practices	43,770		8,000	24,340

Main challenges & how they were addressed:

Triggering sessions compete with farming activities

The major farming season takes many people away from communities and they hardly have time to participate in activities or meetings. Some community members will be occupied by farm work (June to August) during the rainy seasons and 2 months later (November & December) for crop harvesting. CLTS expects full community participation at meetings, so future activities within the project need to be planned outside the farming seasons. Meetings during farming season periods will be mainly on focus groups or household discussions.

Post-triggering support from some District Assemblies (DA) was not sufficient

From the post-triggering monitoring visits to CLTS/SLTS participating communities, it was observed that some DAs monitoring support to the communities/schools was not encouraging. To mitigate this challenge a stakeholders meeting will be organized to discuss how the support of the DA can be strengthened.

Government employees only have limited time to spend on CLTS activities

There is also a need for full participation of the government employees in all planned activities. However, for these employees CLTS activities are just one of their many responsibilities and they can only spend limited time on it. Being in close contact with the responsible government institutions and lobbying for more time to be made available within the year plan for CLTS activities, will hopefully improve the situation.

Aggressive promotion of standardized latrines (KVIP, VIP) is slowing down ODF rate

In the past years the standardized latrines like the KVIP and the VIP have been promoted in the target communities, and as a result households do not want to construct their own latrine with local materials, but want to wait until they can afford these more expensive latrines models. This is slowing down the ODF process. Plan Ghana and its partners are trying to get people to appreciate the sanitation ladder concept and convince them not to wait until they can afford a KVIP or VIP, because diseases also do not wait.

Main lessons learnt:

- Religious dimension can successfully be used to trigger shame and disgust, leading rapidly to community ignition,
- In all the communities triggered, natural leaders emerged and they participated fully in all the triggering processes. It is an indication that the CLTS process can be sustained after the end of the project, once these leaders are empowered to take the process further as this would give more meaning to the concept of communities leading their own sanitation process,
- CLTS has the potential to address problems associated with gender equity. Male and female together take decisions with regards to WASH and work towards ODF status of their communities,
- It was realized that children are powerful change agents and they can play a very instrumental role in achieving ODF status of the communities.

Youthful champion of CLTS... 16 year old boy constructs a latrine for his household

In 2011, a Partner Organization (PO), Rural Water and Sanitation Services (RUWSS) started work in the Kuma Kuma Community where CLTS and SLTS were introduced to members of the community.

Master Ebenezer Odonkor was then a 16-year-old student at the local school when the programme was first launched. “Any time the PO field staff visited the community and the school to talk about open defecation, I was unhappy because I knew that my community members and I were responsible for the cause of most of the health problems due to poor hygiene and sanitation practices,” says Ebenezer.

Ebenezer’s family, consisting of his grandmother, aunt and four younger siblings, had no latrine in their homestead and were all practicing open defecation.

During one visit by the PO team, a worried Ebenezer asked how he could contribute to solving the sanitation problem in the community. The team discussed the role of individuals in the fight against open defecation, not knowing that Ebenezer was going to singlehandedly construct a household latrine.

A month later during a field visit, the team found that Ebenezer had started digging his household latrine. They provided technical assistance and introduced him to the community as a role model for the youth, to motivate him to continue with the project.

Within two months, Ebenezer had completed building a latrine for his 7 member household. He used local raw materials for the superstructure - thatch, wooden door and a squat hole.



Master Ebenezer shows off his newly constructed household latrine

The PO field team organized facility-user education for members of Ebenezer’s household who are now using the latrine. Asked how he felt about his achievement, Ebenezer said, “this is my way of contributing to bringing an end to open defecation in the community.”

The PO intends to use him as an ODF ambassador in the community.

Triggered @ Kenya



Kenya progress report:

Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	264	16	41	84
No. ODF schools	546	1	12	22
No. people that have gained access to sanitation and improved hygiene practices	600,000	46,435	312,685	319,752

Main challenges & how they were addressed:

Difficulty assessing health outcomes of the CLTS project

In all the project areas it is still very difficult to attain regular health data in relation to the particular project areas. Plan Kenya has established contact with the provincial office of the Ministry of Public Health and Sanitation (MoPHS) and they have agreed to share health data on a quarterly basis to track the health impact of the project. In Homa Bay Plan is also strengthening the capacity of the district leadership on health information systems to help improve reporting.

Competing priorities among health workers makes consistent follow up difficult

Plan has incorporated and trained more Community Health Workers (CHWs) in the project in order to increase and improve the capacity of those involved in the CLTS project.

Difficulty in sustaining villages' ODF status

To ensure that ODF villages maintain their status, Plan will increase the number of visits and will ask the Ministry of Public Health and Sanitation (MoPHS) to assist them.

Establishing schools ODF status is very difficult

It is difficult to ascertain whether schools are ODF. For a school to be ODF it's mandatory that it has a sufficient number of utilized quality latrines. This is not the case with the schools under review. While it is not possible for Plan to fund the construction of sufficient numbers of latrines per school, Plan is working with communities and other organizations on advocacy initiatives towards increased government support in construction of latrines in public schools.

Main lessons learnt:

- Involving community leaders (like Chiefs) and natural leaders in CLTS has a positive impact on the project activities. They are already respected by the community which makes it easy for them to convince people to construct their own latrine. Chiefs often live in the communities and therefore conduct follow-up visits to ensure everybody is constructing a latrine.
- Appointing active CLTS committees to conduct regular follow up and monitoring with the help of the MoPHS ensures that villages retain their ODF status.

There is a need to encourage finance institutions, donors and government to invest in innovative sanitation facilities that are suitable for low income urban communities who have no access to sewage facilities.

Urban Community-Led Total Sanitation

Between 13th and 18th May 2012, an Urban CLTS training for City Council Officers was held at the Sports View Hotel Kasarani. As part of this, a triggering took place in Motherland and other villages in 5 different divisions within Nairobi. The triggering was conducted by the Community Development Officer in collaboration with other participants who were part of the training.

The process of triggering was attended by about 200 families who were mainly toilet owners and people who have lived in that community for more than 5 years. The triggering process provoked community members into action when they recognized their poor sanitation situation. Action plans were developed and presented at the end of the training.

After two weeks, the Community Development Officer in Kamukunji made a follow-up visit to the community. The follow up revealed that community members, through their natural leaders, had identified a space for a toilet and were in the process of developing a proposal to the Constituency Development Fund (CDF) for toilet construction.

Another team of natural leaders had engaged the Environment Department at City Council of Nairobi to assist them in removing the dumpsite from the community. Within one month, the proposal for toilet construction was approved and latrine construction was set to commence. The Environment Office had also offered the community use of a truck and lorries for removing the garbage.

Latrine construction was completed and latrines in use by December 2012. The garbage tip is reducing with time and hopefully, the community will be able to rehabilitate the space for the construction of a social hall for the residents of Motherland. It is hoped that the natural leaders will be motivated to form an organized group that will take forward the process of organizing and empowering the community.



Toilet constructed in Motherland, Kamukunji , Nairobi .

The triggering process provoked community members into action

Triggered @ Malawi



Malawi progress report

Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	102	25	53	62
No. ODF schools	16	0	2	2
No. people that have gained access to sanitation and improved hygiene practices	94,587	23,120	4661	59,480

Main challenges & how they were addressed:

Inaccessible roads during rainy season had affected programme delivery

During the rainy season many roads are inaccessible due to the terrain problems coupled with poor road network including washed away bridges. This has especially affected monitoring and other aspects of project delivery. To deal with this Plan has encouraged empowerment of community structures from Village Development Committees to natural leaders to do monitoring on their own. Formation of natural leaders' networks has resulted in intensified monitoring and follow up at village and community level.

Collapsing of some latrines during the rainy season

Families are encouraged to construct latrines on raised ground, and also promote latrine sharing in times of need.

Difficulty motivating natural leaders and Health Surveillance Assistants (HSAs)

Some natural leaders have pulled out of the programme because they expected allowances. Plan has been encouraging the promotion of Village Savings and Loan groups to support natural leaders at village and community level. The involvement of other NGOs and government departments has also played a crucial role in encouraging natural leaders to keep participating in the CLTS programme.

Main lessons learnt:

- Natural leaders' network is a gateway to attaining CLTS sustainability.
- Encouraging cheap community innovations helps to promote ownership and sustainability of the interventions.
- Encouraging sharing of latrines helps communities to maintain their ODF status and adopt good behaviours.
- The need to involve the District Health Office is the only way to ensure a good working relationship with HSAs.
- Involvement of more stakeholders to support natural leaders' motivation/incentives is one way of sustaining the CLTS intervention.

Moriyeta Masauko: “Championing the difference!”

Moriyeta Masauko started living in Jimu Village at the age of 6 when her parents lost their job as domestic workers on a major farm in a neighbouring village in Lilongwe District. At the tender age of 10, she recalls how at one time her younger sister suffered from a bout of diarrhoea and her parents were unable to take her to hospital because they did not have enough funds. Luckily for them, the sister survived but she was so emaciated that they had to visit other traditional doctors to look for traditional medicine.

One time while listening to a local radio she heard a jingle encouraging people to live in sanitary and hygienic villages, since then she vowed to help her family construct a pit latrine and to be drinking clean water. This was, however, a challenge because her parents believed that frequent ailments were a result of witch craft in their neighbourhood.

At the age of 21 in 2011, Moriyeta was part of the crowds that witnessed triggering by Plan Malawi and Government Extension Workers in their village of Jimu. She recalls the process was so enthralling and conveyed the same message as the jingle she had heard on the radio sometime back. This whole process triggered her into action and she volunteered to be a champion for promoting sanitation and hygiene in her village.

She worked tirelessly with her fellow men, natural leaders, to promote and encourage change. They did this by following up on the action plan that the whole village drew up and reports which were frequently submitted to Health

Surveillance Assistants at the local Health Centre and also to the Community Development Facilitator for their village.

The monitoring and follow up paid off when finally the District Coordinating team paid Jimu Village a visit. Moriyeta explains, ‘Ndinaliokondwakwambirikuonaanthuakubomaakubwerakudzatsimikizamudziwathuwakwanitsandipowasiyakunyerapatchire.’ (I was very happy to see government officials finally come to our village to certify it as open defecation free - ODF).

Moriyeta has benefited from the natural leaders’ training that was offered by Plan Malawi and she has managed to facilitate triggering in 5 villages.

In her village, Moriyeta continues her role as a natural leader to encourage everyone to uphold the good sanitation status. She appreciates the health benefits brought about by the CLTS project. “My village and our neighbours are not at risk of water borne diseases anymore, especially diarrhoea,” she says.

The village already has a portable water source through a borehole which acts as a barrier for faecal oral transmission and enhances hand washing which is a very critical element in CLTS.

Jimu village has become a model to other villages. They come to witness and learn from the good sanitation and hygienic practices. Moriyeta takes a lead in educating them. The ripple created by Jimu Village is slowly spreading to other villages and they are gaining ground to self-triggering and attaining ODF status.



Triggered @ Niger



Niger progress report:

Niger				
Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	103	7	23	32
No. ODF schools	40	0	15	25
No. people that have gained access to sanitation and improved hygiene practices	135,000	18,152	74,569	66,110*

*NB: The number of people that have gained access to sanitation and improved their hygiene practice has decreased from 74,569 to 66,110 with floods affecting the latrines particularly at Dosso.

Main challenges & how they were addressed:

The conciliation of the CLTS approach with the process of subsidised latrines by the government for the benefit of ODF villages

This interferes with the CLTS activities as some communities are still waiting for Plan to finance the latrine for them. Plan is working with other NGOs to eliminate latrine subsidy altogether.

Collapsing latrines due to floods negatively impact the efforts of the communities towards ODF

It is difficult to reconstruct latrines after collapse. Households are encouraged to finance sanitation actions with the generated incomes of microfinance. Also Plan is supporting the affected communities through emergency help and has written an action plan on how to implement CLTS in emergency situations.

Harmonization weakness between WASH actors

Through advocacy within the WASH Cluster, Plan tries to increase harmonization between WASH actors at the national level.

Main lessons learnt:

- Organization of competitions on hygiene and sanitation between villages, reinforces the spirit of collective involvement
- Involvement of women/girls as members of community and school committees have significantly reduced the negative view on women's leadership
- Pupils' involvement in hygiene and sanitation practices extends to household level
- The households which have enjoyed the use of latrines are more willing to rebuild their collapsed latrines
- Sensitization and exchange of experiences reinforces adoption of best practices in maintaining latrines

Girls leading SLTS at Gongatarey School (Dosso Department)

Despite the existence of latrines in Gongatarey School, students often defecated behind the class rooms or in the bush rather than in the latrines, exposing them to different diseases. This was mainly due to lack of proper knowledge on the benefits of hygiene and sanitation. To alleviate this situation, Plan Niger extended the activities of the CLTS project to the schools in its areas of intervention.

Gongatarey school has been practicing School-Led Total Sanitation (SLTS) since 2011 to improve the hygiene conditions in the school through the use and maintenance of the school latrines. Students have taken an active role in sensitizing their peers on the use of the latrines

The objective is to ensure empowerment and participation of students in the transmission of useful skills to their peers for the improvement of their well-being. Thus, the members of the school government of Gongatarey School are carrying out sessions on raising awareness twice a week under the supervision of the 'President'

Atikatou, the President of the school Government of Gongatarey, a 13-year old girl in grade 6 leads the sessions. "We organize sessions on sensitization every Monday and Friday from 11:30am during the hours of Practical and Productive Activities (PPA)," she says.

"During the sessions on sensitization, we develop messages for children who defecate in the open air and those who do not use the school latrines properly. The objective is to sensitize them on the diseases caused by the excreta and the related risks. We also advise them to wash their hands with water and soap or ash, after using the latrines. This is meant to bring them to adopt good practices in order to preserve our health. We are being supported by our teachers," Atikatou explains.

"The maintenance of the school latrines is carried out twice a week by a group of four students (2 girls, 2 boys). The boys bring water in buckets and assist the girls to clean the latrines. This has very much improved the neatness of our school," she adds.



Hygiene session conducted by Atikatou, chair person of the School Government of Gongatarey

Triggered @ Sierra Leone



Sierra Leone progress report:

Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	150	8	48	78 (another 20 communities are awaiting verification by the District Health Management Team)
No. ODF schools	20	0	7	20 triggered and 13 have achieved ODF status
No. people that have gained access to sanitation and improved hygiene practices	32,630	1,332	12,354	22,020

Main challenges & how they were addressed:

Lack of safe drinking water in some communities

The project is using funds from other donors channelled via Plan Norway to construct water wells in some communities that have been declared ODF.

Some villages are still reluctant to accept the idea of CLTS, thinking that donors have given money to build toilets but that the project is using them for the unintended purposes

The active involvement of the councillors, the CLTS taskforce, the sanitary officers and the network of natural leaders in the monitoring process, has led to communities accepting the CLTS concept.

Radio discussions that provide opportunity for the public to contribute through phone-in programmes have contributed in changing the mind-set of communities into accepting the CLTS concept.

Some natural leaders are withdrawing their voluntary support in search of greener pastures

New natural leaders have been receiving technical support through coaching and training to fill the gap created by those who leave to go to the mining industry or the energy sector.

Trained Masons do not have the financial capacity to fabricate low cost sanitary materials

The trained local artisans/masons have been linked to more advanced entrepreneurs at the District level to enhance collaboration and partnership.

Main lessons learnt:

- The effective monitoring process and involvement of natural leaders, sanitary officers and section chiefs ensures the proper maintenance and use of latrines.
- It is economical to use locally available materials used in constructing latrines. These are durable and easy to replace when necessary.
- The formation of a network of natural leaders can lead to programme success and sustainability.

Role of women in CLTS

The project undertook some action research on the role of women in CLTS. The research looked at the role women play in the sanitation committees and as natural leaders to enhance sustainability. Thirty women were randomly interviewed by the researchers to look at their specific roles and functions and how it can impact the triggering process or the post-ODF monitoring process.

The outcome of the research proves that:

- They do house to house monitoring on a daily basis
- They give health talks to men and women while monitoring
- They encourage men to help women in doing some of the domestic work.
- They help in mobilizing the youth to construct latrines for widow headed households.
- They work closely with the chiefdom health overseer to promote sanitation activities within their community.
- They reported cases of faecal-oral disease, such as diarrhoea, to the nearest health centre.
- They show household heads how to prepare Salt, Sugar, Solution (SSS) for diarrhoea or cholera cases as preventive measures in case there is no Oral Rehydration Solution (ORS).
- Few women act as lead facilitators during triggering process.

The challenges encountered in CLTS:

- Majority of women in the sanitation committees or natural leaders cannot read or write.
- Some women are shy to talk to a group of people.
- Some women find it difficult to walk a distance in carrying out monitoring and triggering sessions.
- Some women are not respected in their communities where they are expected to carry out their work.
- Some community members and stakeholders believe that women are being paid to execute their duties.
- Some of them are expecting payment because of the work they are doing.

Recommendations:

- Leadership training is required for the uneducated women.
- Women who are shy to talk should be given a lead role in monitoring and triggering.
- Awareness raising and sensitization messages should be addressed to community members and stakeholders to change their perceptions about the volunteers.
- Women to be involved in all aspects of the project.



A lady collects from a water pump constructed by Plan

Triggered @ Uganda



Uganda progress report:

Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	127	19	50	130
No. ODF schools	39	0	12	18
No. people that have gained access to sanitation and improved hygiene practices	115,400	3,258	18,954	46,550

Main challenges & how they were addressed:

Limited access to credit among masons to invest in sanitation marketing

Masons have been supported to join Village Savings and Loans Association (VSLA) groups in order to access credit and to be able to have some initial funds to invest in sanitation marketing.

Inadequate marketing led to low demand for sanitation services

In 2011 it became clear that a lot of the masons trained as part of the sanitation marketing activities were not selling latrines. In 2012 Plan partnered with Water for People to conduct an evaluation on their sanitation marketing pilot. Plan has started to implement some of the recommendations from this report. Sanitation marketing materials have been redesigned and new marketing channels have been sought (places of worship, ODF celebrations, schools, radio).

Linking SLTS with CLTS

The project has promoted the creation of a clean and safe environment that is essential for child survival and growth. However, there is a need to develop child-friendly information, education and communication (I.E.C) materials to facilitate learning, as children can learn better with visual materials. CLTS could be taught in schools and linked with the community interventions to enhance effective ODF attainment.

Main lessons learnt:

- Access to finance for both consumer and supplier is imperative in ensuring that sanitation marketing thrives.
- Intensive marketing activities are needed to promote the services offered by masons through different avenues such as places of worship, radio, ODF celebrations etc.
- Empowering and strengthening community based structures to participate in, own and sustain the project interventions is key to the project's success. In this project Plan Uganda has empowered and strengthened the Village Health Teams (VHTs), natural leaders, masons, school children and local leaders.

- Community-based monitoring systems are an integral part of the programme to ensure adequate and constant monitoring of project activities. In this project VHT and natural leaders have played a critical role in monitoring ODF attainment and sustainability. This has enabled the VHTs to track progress on the action plans developed during triggering.
- Access to safe water is crucial to ensure good hygiene and health. Plan Uganda has provided safe water to ODF communities to support them in sustaining their status. This has enabled them to practice hand washing and good personal and environmental hygiene.
- The involvement of the local government in the project activities has enhanced buy-in for the CLTS approach at the district and sub-county level. The districts of Tororo and Luwero have recognized CLTS as an effective approach and they have scaled it up to non-Plan supported areas.

A mother's tale in sustaining ODF status

Amyo Agnes' resilience is immeasurable. She is a mother of four children, whom she raises largely on her own since her husband is a driver and is rarely at home. She distils local brew for a living. Her village is among 14 others that were triggered by Plan Uganda in June 2010. The community was verified in August the same year and subsequently celebrated Open Defecation Free status three months later, in November 2010.

Agnes' determination to provide better sanitation for her family forms a significant part of her village's attainment of an admirable sanitation situation. For a long time, Agnes – whose children attend Aputiri Primary School located approximately 300 meters from her home – used to defecate in the nearby bush.

"I was motivated by the meeting organized by Plan and the sub county (CLTS triggering) in 2010," confesses Agnes. The first latrine she constructed collapsed due

to invasion by termites six months after construction in December 2010. Then she constructed yet another, which ultimately collapsed in April 2012 due to heavy rains.

However, this did not break her spirit. Because Plan had enabled her to understand the negative effects of Open Defecation, she immediately built yet again another latrine because she did not want to relapse to OD. "I used to feel so disoriented without a latrine, I am now happy to own one, more so constructed by myself," she says. "I know my latrine is not the best in the village, but I am glad I have put up something after two destructions by termites and rain," she adds. Agnes is also proud that her children have learnt to clean and maintain the latrine. Agnes did most of the latrine construction work alone including sinking the pit. She only spent 10,000 Ugandan shillings (US \$ 3.88) to buy the nails used for roofing.



Agnes outside her latrine

Triggered @ Zambia



Zambia progress report:

Indicators	Target	Accumulated Progress 2010	Accumulated Progress 2011	Accumulated Progress 2012
No. ODF communities	127	19	50	130
No. ODF schools	39	0	12	18
No. people that have gained access to sanitation and improved hygiene practices	115,400	3,258	18,954	46,550

Main challenges & how they were addressed:

CLTS volunteer motivation

Most of the CLTS volunteers compare themselves with volunteers from other NGOs who receive a monthly allowance and working tools. Plan Zambia is making deliberate steps towards training many more natural leaders so that they operate within their own villages hence avoid justifications for allowances and working tools such as bicycles.

Water yield from some of the protected shallow wells was reducing

From June 2012 the water table in most of the communities was dropping.

Community members were advised to be regulating water drawing times to allow the well to accumulate water. The Department of Forestry through their reforestation programme will support tree planting near the water points, so as to keep water tables high even during the dry season.

Delay of the Authority to train District JMPT members for CLTS

The Ministry of Local Government and Housing under which rural water and sanitation falls, delayed in releasing Joint Monitoring Programme Team (JMPT) trainers to train the District JMPT. As a result, the process of undertaking ODF certification took long and inevitably there was a delay in the eventual certification of ODF villages. The District JMPT has since been trained after the Ministry finally sent trainers to train the JMPT. Eight community based JMPTs have so far been trained to carry out some of the functions of the district-based JMPT.

Main lessons learnt:

- There is need for all major NGOs undertaking developmental projects to agree at a higher level on how they will be dealing with volunteers. Rates of allowances for volunteers during trainings can be standardized.
- Shallow well rehabilitation is a cheaper and more sustainable option for clean water provision in the community. However, due to the variations in the water table these shallow wells should be more in the communities to ensure that only a limited number of households are accessing a single water point.
- Government plays a key role in the CLTS programme. Collaboration with the government leads to success of the programme. In Zambia, the government has adopted CLTS as one of the key hygiene promotion tools and the programme is being scaled-up to all districts of the country.

Women as champions in improved village sanitation

Chanda is one of the villages in the Plan-supported community of Lwingishi, which is 35 kilometres south-east of Mansa district. The village has a total population of 434 people with 80 households.

The village was among the dirtiest in the community and was prone to water and sanitation related sicknesses, especially diarrhoea.

Before the CLTS project in 2010, the village only had 8 toilets out of the total number of 80 households. This posed a great danger to the community.

Beatrice Chama, one of the Sanitation Action Group (SAG) members recalls, “We used to suffer a lot before CLTS was introduced in our village. Everyone including our children, suffered bouts of diarrhoea. We often wasted a lot of productive time as we were forced to walk 10 kilometres to the nearest Rural Health Centre (RHC) in Kansenga to get treatment. Little did we realize that the reason we were suffering was because of open defecation that was so rampant,” says Beatrice.

In 2010 after the village was triggered by Plan Zambia, a 9 man SAG was constituted to spearhead sanitation issues. The SAG comprising of 6 women and 3 men came up with an action plan where they agreed to be meeting 4 times in a month to conduct village inspections. From the time the village was triggered there was a huge health improvement and community members realized the value of hygiene and proper sanitation.

To date, every household in Chanda has got a toilet and diarrhoea incidences have reduced.

According to Kansenga RHC staff, Anderson Sinyangwe, diarrhoea is no longer an issue in Chanda village. The only cases that they receive of diarrhoea are those related to malaria. A check in the Disease Cases Register at the centre revealed that in a period of 1 year the village recorded only one confirmed case of diarrhoea.

“We are very happy with the CLTS programme in this village because it has helped us clean up our village. Places that used to be full of shit are now very clean. We used to have a lot of faeces along the road, but now, it is a thing of the past. Diarrhoea is no longer an issue here. We are very grateful to Plan for the support in terms of knowledge. Because of the benefits we have seen, we have now been triggered to trigger neighbouring villages as well because we know that as long as they have open defecation, we are also affected,” says Naomi Namwawa, one of the SAG members.



Beatrice Chama, in red top with 2 other SAG members in front of one of the household latrines in Chanda village

On the issue of sustainability of the programme, Beatrice Chama says, “We shall not stop these inspections and talking about sanitation because this is a matter of life and death and we don’t want to go back to open defecation”.

community members realized the value of hygiene and proper sanitation

Summary remarks

CLTS focuses on the behavioural change needed to ensure real and sustainable sanitation and hygiene improvements. It invests in community mobilization instead of hardware, and shifts the focus from toilet construction for individual households to the creation of “open defecation-free” villages. By raising awareness that as long as even a minority continues to defecate in the open everyone is at risk, CLTS triggers the community’s desire for change and propels them into action until freedom from open defecation has been achieved.

Over the past three years, numerous interesting innovative solutions have come about in the Pan-Africa programme, reflecting on how to deal with specific issues around CLTS. Many of these have been developed into one-pagers originally by colleagues in the Pan-Africa programme and further edited by IDS ¹. Although there is recognition of a number of key challenges within CLTS in each of the three phases (pre-triggering, triggering and post-triggering), what is of interest is the innovative solutions that have been derived at in the Pan-Africa programme. See link <http://www.irc.nl/page/65951>

It is clear from this annual overview that all countries are trying to come up with innovative solutions within their own context. Each country has its own challenges to overcome and incentives to dream up in order to reach the targets set in the Pan-Africa Programme. Most of them are on track and the CLTS approach is spreading.

Inevitably there are still a number of avenues that would benefit to be further explored in the Pan-Africa programme mainly around the role of urban-led total sanitation (ULTS) and school-led total sanitation (SLTS) which were not mainly focused on as CLTS was most pre-dominant in demand within the eight countries in the programme. However, the aspiration of this Pan-Africa programme is that there will be a second phase in which these aspects can be further reflected in the programme. In the meanwhile, it is our hope that this Trigger has given some insight into how this specific CLTS programme has developed.



New toilet facilities at Mpota Junior High School in Ghana

¹ <http://www.communityledtotalsanitation.org>



Pupils at Arujo Primary use a hand washing facility outside their pit latrines

Published 2013. Text and photos © Plan
Design and layout: Caroline Nyamamu - Plan RESA

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All activities listed in this publication are based on case studies, photos, annual reviews and documentation from Ethiopia, Ghana, IDS, IRC, Kenya, Malawi, Niger, Netherlands National Office, Sierra Leone, Uganda, Regional Office, and Zambia.



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