IDS RESEARCH SUMMARY

Research findings at a glance from the Institute of Development Studies

IDS PRACTICE PAPER 1

APRIL 2009

Going to Scale with Community-Led Total Sanitation: Reflections on Experience, Issues and Ways Forward

Perhaps as many as two billion people living in rural areas are adversely affected by open defecation (OD). Community-Led Total Sanitation (CLTS) is a revolutionary approach in which communities are facilitated to conduct their own appraisal and analysis of OD and take their own action to become ODF (open defecation free).

Enhancing sanitation and hygiene in rural areas has major potential for increasing wellbeing, and contributing to the Millennium Development Goals. Those most affected by lack of toilets, privacy and hygiene are women, adolescent girls, children and infants. This paper considers the different approaches of CLTS in Bangladesh, India, Indonesia, Pakistan, Ethiopia and Kenya, and looks at practical strategies for going to scale, as well as the challenges it faces. Four key themes in moving forward are identified: methodological development and action learning; creative innovation and critical awareness; learning and action alliances and networks; and seeking to seed self-spreading or light touch movements.

2.2 million people are estimated to die annually from diarrhoeas and related diseases, the majority being children. This is directly related to poor sanitation and hygiene levels, particularly in South Asia and Sub Saharan Africa. Even where there are improved facilities, the OD of other community members

presents an ongoing health risk.

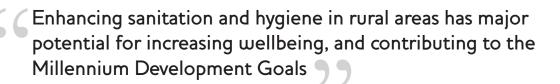
Despite rural sanitation programmes that rely on targeted hardware subsidies to households, OD continues. CLTS provokes communities to become ODF through their own efforts. Principles of facilitation rather than instruction, and bottom-up empowerment rather than top-down control inform the processes

OD is an unpleasant topic for development professionals; however, the benefits of health, convenience, increased safety, self-respect, and increased livelihood gains when communities become ODF, cannot be overlooked. CLTS brings further benefits: the speed at which communities become ODF; gains for all in a community, not just some; community confidence and solidarity that can be a basis for other initiatives; and the emergence and growing confidence of local or Natural Leaders (NLs).

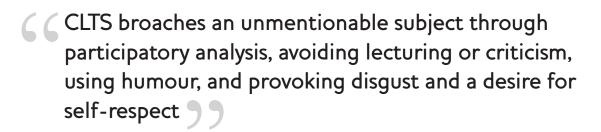
The author acknowledges the obstacles to collecting credible OD data.

Sustainability of communities being absolutely ODF can also be problematic

The diversity of CLTS approaches is considered. In Bangladesh, where CLTS originated, going to scale has been NGO-led often in collaboration with local government. In India, the government plays a key role in dissemination, with very little NGO involvement. In Indonesia, CLTS spread is project- and government-based with central support for local pluralism, without hardware subsidies. Pakistan emphasises the NL approach in its scaling up strategy. In Ethiopia there is NGO and government collaboration. In Kenya, the process involves partnership between NGOs and the Ministry of Public Health and Sanitation. Various forms of CLTS take place in other countries and the rich range of commonalities and experiences, both across organisations and countries are examined to reveal effective practices.



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Key research findings:

- Facilitators, facilitation and training are central and fundamental. CLTS broaches an unmentionable subject through participatory analysis, avoiding lecturing or criticism, using humour, and provoking disgust and a desire for self-respect
- CLTS flourishes where there are no national policies of household hardware subsidy. In which season training happens, and which government department manages sanitation are also factors in success.
- Campaigns can take place on any level, national or local, and competition between communities is fostered to encourage CLTS spread.
- The best results are achieved when facilitators are full-time and strongly motivated. International workshops with cross-visits also contribute.
- NLs can be important mobilisers in the community. Children and young people also play strong roles, and can make excellent NLs. Committed champions are the key to successful CLTS spread.
- The market can play a role through making low cost hardware available.
- Verifying and certifying the ODF status of communities is an important challenge.
 Where there are rewards for achieving ODF status, lax standards and corruption can be an issue.

The author considers obstacles to CLTS (senior staff opposition, vested interests and hardware subsidies) before discussing CLTS in relation to other Participatory Methodologies, and synergies with other approaches. As CLTS becomes fashionable, there are dangers of going to scale too quickly, without the expertise needed for optimal outcomes. Further, there needs to be an emphasis on creative innovation, encouraging communities to 'find their own way'. The long-term sustainability of CLTS is considered and how it is affected by factors such as problems arising from latrines that collapse or fill up, tensions over sharing latrines and hardware subsidies in neighbouring communities.

Key policy lessons / implications of research

- Priorities include: helping the stronger community members to support the weaker; minimising water contamination by correct siting of toilets; using complementary approaches such as hand washing; follow-up with communities; and methods to introduce CLTS into new countries and contexts.
- At all levels, including policy influence, creative innovation includes inventing and adapting practice to overcome obstacles, and to suit local capacities.
- Internationally, nationally, and at subnational levels, networking and communications to share and learn is a key way forward.
- Seeding and strengthening CLTS so that it becomes self-spreading. Social and women's movements may present special

Credits

Robert Chambers, 'Going to Scale with Community-Led Total Sanitation: Reflections on Experience, Issues and Ways Forward, Research Summary of Practice Paper 319. April 2009 The opinions expressed are those of the authors and do not necessarily reflect the views of IDS or any of the other institutions involved.

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