Plan Netherlands’ experience of using a CLTS approach in urban environments
Plan Netherlands’ experience of using a CLTS approach in urban environments

This document was written by Jamie Myers (j.myers2@ids.ac.uk). Jamie is the CLTS Knowledge Hub’s research officer based at the Institute of Development Studies. His focus is on CLTS and CLTS-related activities across Africa and Asia.

Introduction
Plan Netherlands
Plan Netherlands is a Dutch NGO (established in 1975) and is member of Plan International, one of the oldest children’s development organisations in the world. Plan works with children, their families, communities, local grass roots organisations and local governments to improve basic services like water and sanitation. Plan puts emphasis on the rights of and opportunities for girls because discrimination and inequality based on sex is common practice in many developing countries. Girls, for example, suffer more than boys if water is not available. Often they are the main duty bearers responsible for fetching drinking water and are the ones that need to take care of the sick when family members fall ill due to waterborne diseases.

Water, Sanitation and Hygiene (WASH) is one of the 8 impact areas of Plan. Plan’s overall WASH (Water, Sanitation and Hygiene) objective is to improve the survival, protection, dignity and development of children and girls in particular. The strategy is to enhance the self-reliance mechanisms of people, and to realizing the full benefits of WASH services (including socio-economic development) through promotion of behavioural changes. Plan has a long track record in WASH in Africa and Asia.

Plan Netherlands’ Pan African CLTS Programme
Plan was among the first organisations in 2007 to introduce the Community Led Total Sanitation (CLTS) approach in Africa. The CLTS approach particularly aims to raise awareness of the sanitation and hygiene practices in rural communities, and triggers the population into collective action to improve the situation by itself. A major principle of CLTS is no individual household hardware subsidy and all households have to construct a latrine to 100% Open Defecation Free (ODF) status. The principle works, as experiences in many countries have demonstrated how CLTS has triggered positive change in many communities.

The Pan African CLTS programme was launched in December 2009 in 8 African countries. The programme aims to expand Plan’s current CLTS activities within 6 African countries (Sierra Leone, Ethiopia, Uganda, Kenya, Zambia and Malawi) and introduce it
Plan Netherlands’ experience of using a CLTS approach in urban environments

in two other countries (Ghana and Niger). General objectives of the Pan African CLTS programme are:
• to reduce infant and child morbidity and mortality in 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).
• to contribute to improving the CLTS approach by sharing experiences through learning alliances and action learning.

By the end of 2014, a total of 1118 communities and 569 schools have gained the ODF status and as a result 2.2 million people have gained access to sanitation and have improved their hygiene practices. The programme is co-funded by the Dutch Ministry of Foreign Affairs.

Community Led Total Sanitation (CLTS)
CLTS is an innovative methodology for mobilising communities to completely eliminate open defecation (OD). Communities are facilitated to conduct their own appraisal and analysis of open defecation (OD) and take their own action to become ODF (open defecation free). At the heart of CLTS lies the recognition that merely providing toilets does not guarantee their use, nor result in improved sanitation and hygiene. Earlier approaches to sanitation prescribed high initial standards and offered subsidies as an incentive. But this often led to uneven adoption, problems with long-term sustainability and only partial use. It also created a culture of dependence on subsidies. In contrast, 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. By raising awareness that as long as even a minority continues to defecate in the open everyone is at risk of disease, CLTS triggers the community’s desire for collective change, propels people into action and encourages innovation, mutual support and appropriate local solutions, thus leading to greater ownership and sustainability (CLTS Knowledge Hub).
Using a CLTS approach and tools in urban environments

Plan International’s eight country Pan Africa programme predominately focused on using Community-Led Total Sanitation in rural areas. However, the aim was to also trial CLTS tools in peri-urban and urban communities with the hope that country specific urban total sanitation models would be developed. Jamie Myers, Research Officer for the CLTS Knowledge Hub based at the Institute of Development Studies - also a partner in the Pan African CLTS program- conducted rapid action orientated research on the different CLTS models used. In this paper the outcomes of his research conducted on the peri-urban and urban activities in the programme across four countries – Ethiopia, Kenya, Uganda and Zambia1 are presented.

What is urban?

Firstly it is important to note that ‘urban’ is not a uniform concept, its meaning differs across countries and the boundary between urban and rural is becoming increasingly blurred (McGranahan and Satterthwait, 2014). There are big differences between the peri-urban and urban areas Plan have been working. Mathare, Nairobi, is a densely populated urban slum in the middle of one of the largest cities in Africa. The other side of the spectrum, Leku Town and Manicho are rural towns, similar to the large villages you find in South Asia. Even comparably sized towns can have different government structures.

The ‘CLTS’ approach has also been used differently. In some areas the rural model has been copied while in others it has been adapted to local conditions and integrated into a wider sanitation strategy.

---

1 It complements more in-depth case-study reports from Ethiopia and Zambia.
Table 1 shows the different places where a CLTS approach or CLTS tools have been used

<table>
<thead>
<tr>
<th>Country</th>
<th>Cities/Towns</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethiopia</td>
<td>Hawassa, Lalibela, Leku Town and Manicho</td>
</tr>
<tr>
<td>Kenya</td>
<td>Mathare 10, Nairobi</td>
</tr>
<tr>
<td>Uganda</td>
<td>Luweero and Tororo</td>
</tr>
<tr>
<td>Zambia</td>
<td>Kabwe²</td>
</tr>
</tbody>
</table>

Reasons why particular Country Officers trialled an urban CLTS approach differed. In Ethiopia and Uganda the decision was due to Plan’s aim to create ODF districts which the towns are part of. In Kenya Plan was approached and asked to work in Mathare. In Zambia, the project was focused on increasing the uptake of sustainable sanitation technologies; the idea of triggering to create demand came later.

On the whole the ODF criteria used were the same as the criteria used in rural areas. However, this did not always cover a whole town but selected neighbourhoods or areas. Zambia, was slight different – Urine Diversion Dry Toilets (UDDT) are being promoted and no other technologies are being monitored. Consequently, for ODF to be achieved the criteria are more stringent.

² In Zambia no CLTS activities took place under the Pan Africa programme. Plan Zambia were involved in triggering communities in Kabwe as part of the Sanitation in Peri-Urban Areas programme run by WASTE. Saivonga in Zambia was also visited where WASTE have been working but there has been no Plan involvement.
Stories from the field:
Different experiences of the use of a CLTS approach and/or tools in urban areas are given below:

A CLTS approach in small towns in Uganda:
Plan Uganda have been using CLTS-like approach in 10 peri-urban neighbourhoods, 2 in Luweero (both are ODF) and 8 in Tororo (6 are ODF).
Plan staff described their approach as being ‘contextual urban community-led total sanitation’. They have adapted the method based on ground realities and incorporated lessons from Plan Kenya’s experience in Mathare. Previously they were focusing on households and tenants however this was changed to focusing on landlords and local leaders. A ‘contextual’ approach was designed by Plan staff who spent time reflecting on what tools would be applicable in the urban context.
There have been efforts made to pressure the local government into taking a leading role. The local government and local leaders have helped track down landlords and enforce the Public Health Act that states landlords have to provide basic sanitation to tenants.
Landlords are triggered – tools used included mapping exercises, transect walks and shit calculations. As part of the triggering landlords commit themselves to a date where they will complete their toilets. It is then Health Inspectors who hold them to account.
There have been difficulties locating landlords but they have been found by engaging local leaders that helped track down those that were difficult to find.

The main stakeholders were:
- Landlords
- Local leaders
- Elected Local Councils
- School Authorities (where there are schools)
- Village Health Teams
- Health Inspectors
- Private sector – for both emptying and sanitation marketing.

The approach in Uganda was described as a hybrid. The OD criteria is the same in urban communities as the one they use in rural villages however the towns are broken into different peri-urban units. It is demand driven and no subsidy is given. However, if communities will be ODF is more dependent on individual decisions to build houses rather than collective action.
As there are minimum standard designs for latrines the sanitation marketing component had to be started immediately.
Lessons learnt from these experiences are being used to inform programming in Lira where CLTS tools will be integrated into a wider urban water and sanitation project.

**Triggering for Sustainable Sanitation in Zambia**

In Nakoli, a slum in Kabwe, WASTE have been working with New Earth, a local NGO, to increase the number of sustainable sanitation toilets. CLTS triggering was used to create demand for improved sanitation options. The slum is a densely populated peri-urban area with an estimated population of 8,500 to 12,500 (both figures were given).

The sanitation challenges in Nakoli include open defecation but also flying toilets and the contamination of wells used for drinking water by traditional pit latrines. The idea of using CLTS to create demand came later in the programme design and was one small component of demand creation which in turn was one part of a larger sanitation strategy. This strategy has included supply side interventions and access to financial services to residents. Table 2 shows the range of different stakeholders involved in the project.

**Table 2 shows the different stakeholders and their roles:**

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASTE</td>
<td>Financed and helped manage the project</td>
</tr>
<tr>
<td>New Earth</td>
<td>Responsible for project implementation</td>
</tr>
<tr>
<td>Plan</td>
<td>Limited technical support and triggering</td>
</tr>
<tr>
<td>The Ministry of Health</td>
<td>Provided data and in charge of Environmental Health Technicians that attended triggering and conducted follow-up activities</td>
</tr>
<tr>
<td>Kabwe Municipal Council</td>
<td>Helped create by-laws and issues land records and occupancy licenses</td>
</tr>
<tr>
<td>Community Empowerment Fund</td>
<td>Microfinance Institution providing loans</td>
</tr>
</tbody>
</table>
Community-Based Entrepreneurs

Local private businesses established to provide sanitation services including solid and liquid waste management, pit emptying and toilet construction. Given coaching programme and training.

Area Councillors and Zone Leaders

Local leadership used to help mobilise the community

Community Based Organisations

Both churches and local NGOs used for additional demand creation

In the pre-triggering stage project staff met with local leadership who were told about the process and the use of graphic language was explained. They recommended the best time to conduct triggering and helped rally the community together.

Triggering was conducted in four zones separately. In addition to traditional triggering tools, tools developed to highlight water contamination were also used – these are described below. After triggering communities developed a Plan of Action however this was later diluted to a household action plan as it was thought that a community goal would be unattainable.

CLTS was just one component of a larger behaviour change communication strategy which included door-to-door campaigns, community radio shows, posters and using church leaders to promote sanitation messages.

The community was also brought together – across all four blocks – to a toilet design meeting where three different designs were discussed and the community used pair ranking to decide which one they wanted. Urine Diversion Dry Toilets (UDDTs) came out on top and it was these that were promoted and monitored. UDDTs have been endorsed by the government. Due to the nature of the area, it is flood prone, these are the only accepted technologies.

There was also a financial component. Originally the project staff had been working with Zambia National Building Society however the criteria to apply for a loan was tiresome and the process took a long time. One household said they had have been waiting for over twelve months. In May 2015 WASTE partnered with Community Empowerment Fund, a microfinance institution. With their head office in Kabwe they are closer to the ground and the process is faster. In addition, they spent time designing the appropriate
Plan Netherlands’ experience of using a CLTS approach in urban environments

loan. To apply for a loan a Bill of Quantity is filled out which states the different materials needed to build a UDDT, households tick boxes corresponding to materials they need. This means loans can be reduced if households are able to provide the materials themselves.

GIS mapping has also been used to monitor coverage and to alert CBEs when pits are almost full. New UDDTs are plotted with data on location, zone, household name and the number of uses attached. As the number of users is also collected government is altered when a pit is nearly full and are supposed to coordinate with the CBEs. The idea is that government takes it over. It is still unknown if this will be a successful initiative.

Modifying CLTS in Hawassa, Ethiopia

Plan Ethiopia worked in four towns. Lalibela, Hawassa, Leku Town and Manicho. In Hawassa an 11 month project was funded by Plan Ethiopia and coordinated by Nazareth Children’s Village Integrated Development (NACID). The approach in Hawassa was adapted using lessons learnt during the implementation of CLTS in Leku Town and Manicho.

Twenty ‘urban slum villages’ were selected with the help of the municipality – who also signed off on the project and an urban CLTS guide written by Plan Ethiopia. There have been varied levels of success across the different development units.

The project was trying to tackle open defecation, dirty toilets and the dumping of solid and liquid waste. It was not 100% subsidy free – those people without space or resources needed to have public and communal toilets built for them. Furthermore household/compound triggering was used as a post-triggering activity. It was effective at reaching households that did not attend community triggering.

Pre-triggering community meetings were held in each slum village where attendees were told there would be a sanitation project and asked to elect someone to join a Community Facilitation Team. They were then given 5 days CLTS training and conducted the triggering.

Shit calculations were adapted to include shit that was dumped into the environment – thus including flying toilets. They also included solid waste calculations. Pathways for faecal contamination and transect walks were successful however mapping exercises were found to be too time consuming.

In addition to community triggering each compound was visited and household trig-
gering was conducted. This involved facilitating discussions on sanitation and solid and liquid waste. Instead of going to open defecation areas households were taken to the compound toilets.

The project also involved training and encouraging natural leader groups to become community-based entrepreneurs that collected rubbish and could eventual empty latrines.

**Stakeholders:**
Across the urban areas different stakeholders have been engaged:

**Local/municipal government:**
Urban government structures are often complex, confusing and uncoordinated. They are different across and within countries. This makes it difficult to recommend what local government departments need to be engaged as it is highly contextual. However, it is clear that guaranteed support from municipal government is essential. How to win and keep municipal support is an unanswerable question and there is no silver bullet. What is presented here is the roles local and municipal government departments have been used.

In Kabwe different government departments have been engaged to play different roles. The Kabwe Municipal Council was supposed to create by-laws for those who did not comply with regulations. They were also giving out land records and occupancy licences which were part of the paperwork needed to apply for a loan with both Zambia National Building Society and the Community Empowerment Fund. The Ministry of Health supported the project, providing New Earth with statistics. Environmental Health Technicians helped with the triggering and follow-up activities. More community-based elected officials were used to mobilise the community and encouraged people to attend meetings.

In Uganda the authorities have been used to track down landlords and to enforce the Public Health Act. This has required working with Health Inspectors and elected Local Councillors.

In Hawassa, Ethiopia, local government departments were required to approve the project and provided space for public meetings. In both Hawassa and Lalibela local governments agreed to provide land for CBEs to use to dump solid waste they collected from communities. This has been an area of contention. Groups have either not been given any space or the space in inappropriate i.e. too far or the wrong terrain.
Despite being unavoidable working with local governments can slow down the process. There are instances where they have made promises that have yet to be fulfilled. They also have a high staff turn-over. At the central government level all governments are currently working on either an urban sanitation strategy or urban ODF protocol.

**Community-Based Actors:**
As demonstrated in the different stories from the field community actors have been actively involved. **Local leaders** have been used to mobilise communities. In Uganda they were used to help track down absentee landlords. In Kenya household visits by local leaders as well as government officials proved successful at encouraging household to participate. In Zambia they helped mobilise the community.

**Landlords** have also been engaged being both triggered and held to account.

**Natural leaders** and **community-based entrepreneurs (CBE)** have also been involved in promoting as well as sanitation marketing activities. **Natural leaders** groups emerging from CLTS triggering in Hawassa were given training to conduct household/compound triggering. They were also provided with carts, boots and gloves to collect rubbish, thus generating income for themselves. Groups were natural leaders were encouraged to form **community-based entrepreneur (CBEs)** groups.

In Zambia, CBEs were established to provide solid and liquid waste management services. They also received training in toilet construction and build UDDTs for households who take out loans from the Community Empowerment Fund. Furthermore, they helped collect coordinates for the GIS maps.

**Financial Institutions**
In Zambia financial institutions have been used to help provide loans for households. This has not been a feature in other Plan programmes though is seen in other urban initiatives that use a CLTS approach or CLTS tools (Myers, 2016).

**Adaptations**
- **Triggering to highlight water contamination in Kabwe, Zambia:**
  - Hydrogen Sulphate Test: Field testing kits were given to the community. Water from wells and piped water is tested by the community to see if they are contaminated with faecal matter. If the water in the test kit turns black it means the sample has tested positive for faecal matter. The following day community members are asked to present the results.
Plan Netherlands’ experience of using a CLTS approach in urban environments

- Paraffin Test: A small amount of paraffin was placed into the pit latrines. The next day people are asked to drink the water from nearby wells. Community members were able to taste the paraffin in the water highlighting the connection between the contents of the pit latrine and household wells.

- Hawassa, Ethiopia. In areas where different households live together in compounds household/compound triggering has taken place.

- The triggering of landlords. For example in Uganda where landlords once triggered commit themselves to a date to complete a toilet and it is up to Health Inspectors to hold them to account.

Challenges

- Faeces can still enter communities from other areas even if all households in a project area has ‘improved’ sanitation. In Saivonga, Zambia, where WASTE have been using triggering to create demand for UDDTs, communities rely on a lake for their water supply. Unfortunately there were reports of government institutions and hotels sewage seeping into the lake. In Lalibela we were told that hotels in the tourist town had sewage being emptied untreated into the environment.

- Working with governments is essential however it is difficult. Plan Ethiopia listed the high turnover of government staff as one of the main challenges for the CLTS project in Lalibela. The more stakeholders are included in a particular process the harder it becomes to manage. Different stakeholders often work at different paces and on different time lines. Any successful project will need to adapt to these changes. As mentioned above in Kabwe, WASTE and New Earth have found it easier working with a small microfinance institution rather than a large building society.

Lessons learned

Though numbered they are not ordered in regards to relevance or importance.

1. The sanitation challenges in peri-urban and urban areas are often more than traditional CLTS alone can bear. However, it has the potential to be integrated into a wider programme. Even in small towns in Uganda adaptations were necessary.

CLTS tools should be used as one component of a larger behaviour change communication strategy. The Plan ODF Sustainability Study recommended getting as many people to attend triggering sessions as possible (Tyndale-Biscoe, 2013). However, it is extremely difficult in urban areas, even with close community ties, to guarantee a critical mass of people attending. It should be expected that triggering alone cannot reach everyone. In Lalibela, no community members remembered a triggering session. This could be
explained by an estimated 45%-55% community turn out. Household triggering in Hawassa helped spread messages to more community members however it is labour intensive and replicating this process may be a challenge. A multi-faceted approach is recommended where messages are provided in different ways to complement CLTS tools. Innovative ways of doing this should be encouraged, documented and shared. Building on demand generation activities was found to be successful in small rural towns in Mozambique (Thomas and Alvestegui, 2015).

2. A thorough understanding of the local context is needed. This will mean a longer pre-triggering phase. This is also being realised to be necessary in rural programmes however in a messier urban environment this is even more important (Myers, 2015). This includes:

- Institutions arrangements: which government departments should be engaged? Where can allies be found? Is there a history of high staff turnover?
- Community structure and community groups
- City-wide shit flow diagrams

Having a good knowledge of the context at the same time as acknowledging that one’s understanding can change during the life cycle of a project is essential; Plan Country Offices should be able to adjust to new learning and adapt activities accordingly.

3. There are good examples of learning both within and across Pan African countries. Uganda had designed its urban approach based on learnings from Mathare, Kenya, and staff reflecting on the conditions on the ground. They are also using their experiences in Luweero and Tororo to inform the design of a new urban sanitation programme in Lira. Plan Ethiopia designed their intervention in Hawassa based on the experience they had had in Leku Town and Manicho. Future actions in Zambia will build on experience of the Country Directors previous work in Mathare. Plan Kenya also held sessions with Practical Action who used a CLTS approach in Nakuru.

4. Projects should have full-time staff members or organisations based on location. At least one full-time member of staff is needed to be based in any town where a CLTS approach is being used to facilitate (not implement) the process and manage the relationship between multiple stakeholders. Where this was not happening very little progress had been made.

Having someone to lobby government departments continuously trying to make sure
they maintain interest and uphold any promised made could be beneficial. They could also help introduce new government staff to the project and help alleviate the challenge of high staff turnovers.

5. There has been a **spectrum of different support mechanisms** used but no direct individual household subsidies. This includes micro-finance products and providing communal latrines for those without space or resources to build their own. For example in Hawassa community members were given corrugated iron sheets for the superstructure but had to dig the hole themselves.

6. **Local government involvement is essential.** Local governments across different towns have been involved in different ways. It is always context specific – nothing is set in stone. Giving recommendations what to expect and push for is therefore difficult. What is more useful is examples of what role municipal governments have taken in the past; an a la carte menu of ways to engage with local governments.

7. **The success of any programme is reliant on a number of different stakeholders.** This will always include multiple local government departments. Other actors will vary dependent on local context and what additional programming is needed. It is important to note that often stakeholders work at different paces. In any successful project changes are likely to be made across the project cycle. Finding institutions that can approve changes or new directions and are able to adapt quickly to local conditions is likely to help increase the chance of success.

8. **Slippage is different in urban areas.** The sanitation challenges of towns are different. Open defecation is a problem but so is flying toilets, basic and dirty latrines, the unsafe and unhygienic management of faeces and restaurants and hotels with unimproved latrines. CLTS tools have been used to address some of these issues. Consequently, slippage must be adapted to recognise this. In areas where the challenge was cleanliness slippage needs to be seen as toilets returning to unhygienic conditions.

9. **External shocks can have disastrous effects to defecation and hygiene practices.** In April 2015 in Mathare, Nairobi, the water was cut off for a number of days and many of the toilets people relied on were out of order. In Manichew, Ethiopia, a lack of water had had a very serious impact on handwashing practices.

10. **Length of projects is much longer.** These projects take much, much longer than expected. Hawassa, where the project ended after 11 months, is still not ODF. Neither is
Lalibela where Plan no longer works. In Kabwe, Zambia, where ODF was never a target very few toilets have been built to date.

References


Myers, J. (2016 Forthcoming) Using a CLTS approach and/or CLTS tools in urban environment: Themes and Trends, 39th WEDC International Conference, Kumasi, Ghana


Case study 1
Using CLTS tools in urban and peri-urban areas: Ethiopia

1 Introduction:
This case-study focuses on different ways that Plan International Ethiopia (PIE) has used CLTS in urban areas. It also looks at the successes, challenges and the key lessons and implications. The document draws upon information collected through interviews with key stakeholders and observations and reflections from field visits.

2 Locations:
As part of the Pan African CLTS Programme, PIE has been working in four towns: Hawassa, Lalibela, Leku Town and Manicho. Hawassa is much larger than Leku Town and Manicho and all are in the Southern Nations, Nationalities and Peoples Region. Lalibela is in the Amhara Region in the north. A predominantly rural approach was used in Lalibela, Leku Town and Manicho. In Hawassa, Plan staff adapted the approach based on the lessons they had learnt through the experience of working in Leku Town and Manicho.

The drive behind using CLTS tools in an urban context appears to be the need to declare whole districts – which the towns are part of – to be open defecation free (ODF). The criteria used in all towns is the same used in rural areas and includes:
- a latrine for every household
- a cover
- no faeces found in the open
- handwashing facilities.

3 Method:
The method used to investigate the CLTS processes and outcomes in these towns is not stringent academic research but an action orientated learning process. Much of the conclusions drawn will have a level of bias. The amount of time spent in each town was limited and not all neighbourhoods were visited. Furthermore, the context is highly important making it difficult to generalise. Nevertheless, the main findings have deliberately been made broad enough to make them useful to different cities in Ethiopia and other countries which are struggling with similar issues. The majority of my time was spent in Lalibela and Hawassa, brief visits were made to Leku Town and Manicho.

4 Leku Town and Manicho
Leku Town: The project was conducted between January and June 2013. The town became ODF in 6 months. PIE trained Health Extension Workers to trigger and
community leaders were used to mobilise the community members. A predominantly rural approach was used. However, it also included forcing businesses to upgrade their sanitation facilities.

The problems in Leku Town were not so much open defecation but unhygienic, unsafe and unclean latrines in hotels and restaurants and the use of flying toilets by some households. For example some restaurants had pit latrines built right next to their kitchens – these businesses were made to destroy them and build new ones.

**Manicho:** With a population of not much over 5000, Manicho is more peri-rural than peri-urban. Traditional CLTS was conducted there. It was declared ODF. There have been huge water problems and there is very little handwashing.

**5 Lalibela:**
Lalibela has a population of 35,000. It is a pilgrim town, a UNESCO World Heritage site and a popular tourist centre due to its world famous churches. It is mainly built on rock. Due to difficult terrain and its status, digging pits is physically difficult and also banned. Baseline data indicated that 38 per cent had latrines and there were parts of the town that were filthy.

Lalibela is made up of three kebeles – two urban and one rural. Triggering happened in 2010, at the very beginning of the Pan Africa programme. This is important to note because CLTS thinking has progressed fairly substantially since then. A key lesson from Lalibela – that additional post-triggering activities and support are need to ensure sustainable outcomes – has become more evident in rural programmes. This is even more pronounced in urban areas where sanitation problems are often much more complex.

PIE worked for five years in Lalibela town. They conducted a Training of Trainers – the training was attended by both those working in rural and urban kebeles – and helped with the pre-triggering and triggering which was the same in rural areas and in Lalibela town. Shortly after triggering, responsibility was passed to the city administration. Unfortunately the municipality has a high staff turnover which has had a detrimental effect on the success of the project. After triggering, development units were visited and progress was monitored every two weeks. A technical team was set up post-triggering and met once a month to monitor progress. PIEs financial support ended long before ODF was in sight however they are still monitoring progress and running sanitation marketing activities.

---

1 The name given to a small administrative unit in Ethiopia
Neither of the urban *kebeles* in Lalibela are currently ODF. The two urban *kebeles* currently have 68 per cent sanitation coverage and open drains have been covered to limit OD. PIE staff also noted that associations have been formed and clear OD areas regularly. Out of 131 development units 89 have self-verified as ODF. However, based on the criteria in Ethiopia I found very few households that should have been classified as ODF. Major challenges have been a lack of space, resistance from tenants, lack of urban planning and frequent changes in government staff. As mentioned above PIE no longer provide financial support but are still monitoring progress and have just started sanitation marketing activities.

There was an assumption that if households own land, they have and use their own toilets and if they don’t then they use communal toilets. This is however not the case. Open defecation still happens – one defunct public latrine was surround by piles of faeces. I was told by the chairmen of one of the *kebeles* that 24 municipal toilets had been constructed though I failed to find a functioning one. Furthermore, household latrines are uncovered. A full pit was also found that had not been covered properly. A World Bank project has built 14 Sustainable Tourist Toilets however none have been opened yet. Furthermore, I was told by a member of the community that the toilets are not enough for all those that visit during Christmas and King Lalibela’s birthday celebrations. One household spoken to who currently practice open defecation had been told they would be banned from using the new toilets as they had enough land to build their own.

When walking through the communities very few people remembered the triggering activities. One women I spoke to could only recall a traditional coffee ceremony when asked what she remember about sanitation related activities. This could be due to a low turnout at triggering – PIE estimated about 44%-55% of households attended. Another possible explanation is that the town’s population is transient - however due to time constraints it was not possible to explore this further.

As stated above, Lalibela is a unique town due to its cultural importance and rocky terrain. This makes it difficult for households to construct toilets. Based on my brief time there I would suggest the need for smart, targeted subsidies for the poorest and access to additional financial services for the less poor. The terrain also requires technical support. Public toilets have been promoted but they are filthy, locked and/or full – they are also old, I was told some were built 10-15 years ago. Furthermore, there are plans to move people living in the oldest settlements in the centre of the town to a new settlement making people less willing to invest. At present there is no clear date of when this might happen.
6. Hawassa

6.1. The Process

Hawassa is much larger than the surrounding towns of Manicho and Leku Town. Estimates from 2012 put population size at around 165,000. However, the PIE project did not cover the whole town. It was the first systematically organised urban CLTS model. Having used CLTS in Leku Town, lessons learnt were used to adapt the CLTS approach in Hawassa. It was funded solely by PIE with no government budget allocated. The project lasted for 11 months and covered 20 urban slum villages (with approximately 30-60 households each). It has been more successful in some places than in others.

In addition to open defection, the project in Hawassa was designed to tackle the dumping of solid and liquid waste, dead animals being left on the road side and dirty toilets.

Changes to the traditional rural model include:
- The project included solid and liquid waste management.
- The approach was not 100% subsidy free – those without space and resources as well as street dwellers were supposed to have public and communal toilets built for them. There are examples of this happening but it has not happened everywhere.
- Used household/compound triggering as a follow-up activity to triggering

Table 1 shows the different stakeholders involved

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan International Ethiopia</td>
<td>Training, technical support and financing</td>
</tr>
<tr>
<td>Nazareth Children’s Village Integrated Development (NACID)</td>
<td>Implementing agency</td>
</tr>
<tr>
<td>Health Extension Workers</td>
<td>Support for triggering</td>
</tr>
<tr>
<td>Government Departments</td>
<td>Project approval, provision of space for meetings. Also agreed to provide land for community based entrepreneurs to use to dump solid waste</td>
</tr>
</tbody>
</table>

Pre-triggering: In order for the project to go ahead the Municipality’s permission was needed. Initially consultations were held with the Municipality and Health and Education departments. They helped identify the worst performing villages and selected government employees who would receive training. PIE also developed an Urban CLTS Manual that was accepted by the different departments.

In each kebele a meeting was held where the community was told that there would be
Plan Netherlands’ experience of using a CLTS approach in urban environments

a sanitation programme. They were asked to select one member from each village to join the Community Facilitation Team (CFT). The CFTs were then given five days of CLTS training alongside the government employees.

Time was spent to find the most convenient time and date for triggering - Monday or Thursday were both found to be inappropriate as they are market days.

Triggering: The 20 different urban slum villages were all triggered separately. The CFT were sub-divided into four groups and conducted triggering village by village.

Waste calculations were added to shit calculation exercises. For the shit calculation people were asked how much shit was openly defecated AND/OR dumped, so as to include flying toilets. Pathways for faecal contamination were demonstrated using water bottles and bread. Mapping exercises were found to be time consuming and not to be very effective. However, transect walks were found to work well.

During the triggering, each village selected 6 Natural Leaders – 2 men, 2 women, 1 girl and 1 boy. Natural Leaders were then given 3 days training on household triggering, school triggering and how to conduct family dialogues. They were then in charge of conducting household and school dialogues every week for six months. Household visits also included discussions around handwashing, handling of child faeces and solid and liquid waste management.

Innovative post-trigging activities:
Household/compound triggering sessions as a follow-up to community triggering. Each compound was visited and households living on the compound were brought together for a smaller triggering on the compound. Pathways for faecal contamination were demonstrated with water, bread/biscuits and kitchen utensils. Households were also taken to toilets in the same way that communities in rural areas are taken to open defecation sites.
6.2. Successes:
Success varies across different slum villages. There is a large difference between the cleanliness of compound toilets and the communal toilets provided for those living in areas with little space.

Harer was a neighbourhood were open defecation had been a problem. The area has now been cleaned up and shops have been built on previously unused land (see photo 1). The community invested in fences in areas where OD was practiced – for example along ledges between houses and ditches (see photo 2). Community gathered 30% of the total cost and the kebele paid the remaining 70%.

In some areas evidence of handwashing can also be found.

6.3 Challenges:
Despite triggering starting in November 2013 no areas have been awarded an ODF sign. There is a lack of solid waste management, though in compounds pits have been built for disposing of liquid waste, rubbish is collected into bags and there are rubbish bins in some streets. Toilets for street dwellers and communal latrines for those with little space are not sufficient in both number and quality. Community members also reported finding evidence of open defecation in the mornings. However there have been some
positive changes. These include compound owners taking locks off toilet doors so tenants can use them and the erection of new latrines in compounds with large numbers of people that previously only had one toilet.

PIE provided Natural Leader groups with carts, boot and gloves to collect rubbish and thus generate income for themselves. They were promised a site but the site given is too far away to be taken by carts. The municipality made promises including providing vehicles to take waste and appropriate land given for sanitary landfill. They also promised temporary stations where Natural Leader groups can keep the rubbish and mobile toilets and urinals. However, none of these promises have been fulfilled. The sustainability of these groups is difficult to judge and some have had people dropout.

Toilets built are not easy to use for all. I spoke to a blind man that struggled to use the toilet – he does not open defecate but often dirtied the toilet and himself. He is unable to find the hole so has to use his feet. This means not only is it difficult for him to use alone but he also runs the risk of contaminating other parts of the compound with faecal matter.

There are problems with some of the communal latrines. In one slum village 60 households share a communal block – three households are allocated a latrine to share. They are all in various states of cleanliness. The communal latrines have been built for them and there was little sense of ownership.

7. Key finding and Implications
- **Triggering needs to be complimented by a much wider BCC strategy.** Making sure everyone in a project area is aware of a project is difficult and triggering cannot be expected to reach all. More is needed to create demand. Compound/household triggering in Hawassa proved to be effective yet labour intensive. More innovative approaches combined with already established communication channels should be encouraged.

- **The sanitation challenges in urban areas, even in small towns, are often more than traditional CLTS alone can handle.** The sanitation challenge is often not just a lack of demand but can also include a lack of space, insecure land tenure lack of finance and/or political commitment. CLTS can play a role however needs to be one component of a much larger sanitation strategy.

- **Shit can enter from outside a targeted communities.** We were told in Lalibela that
untreated sewage from hotels is being released. City wide shit flow diagrams should be conducted and examined to make sure shit is not entering from outside. This is important to ensure that the poorest and most vulnerable are not using their resources (both money and time) to build and improve latrines whilst still being exposed to other people’s shit.

- An organisation or person needs to be on location and in charge of continuously managing the process. The Hawassa project has benefited from a permanent full-time member of staff from NACID based in Hawassa.

- The time needed to reach ODF is much longer than rural areas. Even in Hawassa, which has been more successful than Lalibela, 11 months are not enough for reaching ODF. There have been changes but more time is needed to cover all project areas.

- Diverse local conditions, even within a country, make a universal approach to urban CLTS unhelpful.

Case study 2
Using CLTS tools in urban and peri-urban areas: Zambia

1. Introduction:
This case-study focuses on lessons learnt during a field trip to Zambia to visit towns where CLTS tools have been used. It includes reflections based on visits to project sites and as well as qualitative semi-structured interviews with key stakeholders – including community members, natural leaders, local government departments, partner organisations and WASTE and Plan International Zambia (PIZ) staff.

The major focus of this case-study is Kabwe. Whilst the same approach is being used in Saivonga, I spent less time there and was unable to visit communities. Nevertheless, there were some important learning points.

In this case study, I describe the locations visited and outline the changes and innovations to the CLTS process that I observed. I also look at challenges and successes and end by outlining key findings and their implications for future practice.

2. Method
This was not stringent academic research but an action orientated learning process.
Locations were visited and semi-structured interviews were held with key stakeholders and community members. The findings are highly context-specific and thus difficult to generalise. However, the main findings have deliberately been made broad enough to make them relevant to different cities and small towns in Zambia and other countries which are struggling with similar issues.

3. Kabwe and Siavonga

Kabwe is the capital of the Zambian Central Province. It has a population of approximately 200,000. WASTE’s Sanitation in Peri-Urban Areas project has been working in Nakoli compound*, a densely populated peri-urban neighbourhood with a population of between 8,500 and 12,500 (both figures were given by different people). It is divided into 4 areas with each area having around 350 units where a varying number of households live. It is a low-lying area and prone to flooding.

Siavonga is in the Southern Province and is a tourist town on the shore of Lake Kariba next to the Zimbabwean border. WASTE, along with Harvest Help, has started using the Sanitation in Peri-Urban Areas (SPA) approach with a CLTS component. PIZ has not had any involvement with the activities there. Siavonga, despite having no involvement from PIZ, is included here as lessons from it are beneficial to PIZ’s future programme as well as the WASH community in general.

4. Use of CLTS tools in Kabwe

In Nakoli, Kabwe, CLTS was a smaller component of a larger demand creation strategy which was also part of a larger urban sanitation approach that included sanitation marketing and municipal law enforcement. The idea of using CLTS to create demand was something that came later – consequently there was no funding for triggering or the training and development of community champions.

The challenges in Nakoli are open defecation, flying toilets and the contamination of drinking water wells by traditional pit latrines.

* In Zambia the term compound is used as an alternative to slum
Table 1 shows the different stakeholders and their roles:

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASTE</td>
<td>Financed and helped manage the project</td>
</tr>
<tr>
<td>New Earth</td>
<td>Responsible for project implementation</td>
</tr>
<tr>
<td>Plan International Zambia</td>
<td>Limited technical support and triggering</td>
</tr>
<tr>
<td>The Ministry of Health</td>
<td>Provided data and in charge of Environmental Health Technicians that attended triggering and conducted follow-up activities</td>
</tr>
<tr>
<td>Kabwe Municipal Council</td>
<td>Helped create by-laws and issues land records and occupancy licenses</td>
</tr>
<tr>
<td>Community Empowerment Fund</td>
<td>Microfinance Institution providing loans</td>
</tr>
<tr>
<td>Community-Based Entrepreneurs</td>
<td>Local private businesses established to provide sanitation services including solid and liquid waste management, pit emptying and toilet construction. Given coaching programme and training.</td>
</tr>
<tr>
<td>Area Councillors and Zone Leaders</td>
<td>Local leadership used to help mobilise the community</td>
</tr>
<tr>
<td>Community Based Organisations</td>
<td>Both churches and local NGOs used for additional demand creation</td>
</tr>
</tbody>
</table>

4.1 Pre-triggering and triggering

*Pre-triggering:* Before triggering took place, project staff met with the local leadership including area councillors (elected local political leadership) and zone leaders (also elected to spearhead development work in their zones) to inform them about the triggering process and the use of graphic language.

These meetings were used to find the best times for triggering. The local leaders were also enlisted to help mobilize and organize the community.

*Triggering:* Triggering was done in each of the four zones separately over 4 days in 2013. In order to drum up interest, a community theatre group was hired on triggering days. Mapping exercises, transect walks and pathways of faecal contamination were used. Focus groups were also held with men, women and children separately. Children then presented through songs and plays how poor sanitation affects them.
As mentioned above the challenges in Nakoli are beyond just open defecation and also include the contamination of water sources by the use of unsuitable pit latrines built close to wells. In order to address this, two different innovative tools were used during triggering:

1. Paraffin test: A small amount of paraffin was placed into the pit latrines. The next day people were asked to drink water from the nearby well. Community members were able to taste the paraffin highlighting the connection between the pit and the household wells.

2. Hydrogen Sulphate Test: Field testing kits are given to the community. Water from wells and pipes were tested to see if they were contaminated with faecal matter. If the kit turns black it means the sample has tested positive for faecal matter. The following day community members were asked to present the results.

After the different triggering activities had been completed, a Plan of Action was drawn up by the community. This was later changed to household action plans.

The original idea was that Community-Based Entrepreneurs would watch the triggering and in turn trigger other community members – however there was little evidence to suggest that this has happened.

4.2 Post-Triggering and Additional Components

4.2.1 Behaviour Change Communication:
Triggering was only one component of a wider BCC strategy. After triggering other activities included:
- Door-to-door campaigns with every household being visited.
- Using P.A. systems and community radio to spread messages
- Posters in the local language
- Using church leaders to promote sanitation messages

4.2.2 Toilet Design Meeting:
Between one or two weeks after triggering a toilet design meeting to which all community members were invited was held across the 4 wards in Nakoli. Drumming groups and the P.A. system were used to spread information about the meeting. Community leaders (councillors, chairmen and church leaders), the Kabwe Municipal Council, Neighbourhood Health Committees and Environmental Health Technicians were in attendance. Three different toilets were presented (1) urine diversion dry toilets (UDDT) (2)
arborloos and (3) sky toilets. Those who attended the meeting did pairwise ranking of each technology. UDDETs came out on top and were approved by the authorities. It was this technology that was selected as the only option to be promoted and monitored.

4.2.3 Finance:
To begin with, the project worked with Zambia National Building Society to provide loans to both households and Community-Based Entrepreneurs. The application process was tiresome and loans were heavily delayed as they had to be signed off by a board based in Lusaka. Due to these difficulties the project decided to work instead work with the Community Empowerment Fund (CEF), a microfinance institution with less stringent conditions.

CEF have been working on the project since May 2015. Like the Zambian National Building Society they only provide loans for those wanting to build UDDETs. WASTE provided them with a 50,000 euro guarantee fund for defaulters.

Loans are not given in cash but in materials and labour. Loan repayments are made over a 24 month period which starts once the UDDET has been completed.

A Bill of Quantity is filled out which lists what is needed for the construction. Loans can be reduced if households are able to provide materials themselves. The Community-Based Entrepreneurs supply the labour costs and labourers have to finish the toilet within 30 days.

As of August 2015 there had been 35 loan applications, 6 are currently being processed, 16 loans had been disbursed and 10 toilets had been completed in Nakoli.

5. Siavonga:
In Siavonga, CLTS is also one small component of a bigger demand creation programme. The project started in January 2014. My time was limited in Siavonga but one important finding was that some communities where CLTS tools are being used, are reliant on Lake Kariba for drinking water. Unfortunately, it was reported that faeces are entering the lake from other parts of town. Consequently, although households are expected to pay and take out loans for UDDETs they will still be at risk from faecal-oral transmissions.
6. Key Findings and Implications:

- **CLTS has been adapted and not been pursued in isolation.** CLTS is one component of demand creation which in turn is part of a large sanitation strategy. The term urban CLTS or UCLTS does not seem appropriate and is not used. This has implications of how we discuss it in the future.

- **Work with partners that are able to adapt.** Success is reliant on a number of different stakeholders that often move at different paces increasing the number of bottlenecks. In Kabwe working with the Community Empowerment Fund rather than Zambia National Building Society meant that loans can be processed faster and designing the right financial product became more feasible. Actors will vary on local context but finding institutions that can approve changes and are able to adapt quickly to local conditions can help increase the chances of success.

- **City-wide shit flow diagrams/chains should be conducted.** As we have seen from Siavonga, shit can enter communities from outside. Before starting any sanitation project in urban areas it is important to see where the shit is coming from.

- **The term ‘urban CLTS’ is not applicable. The CLTS approach has been adapted and is a small component of a much wider urban WASH strategy.** Some CLTS principles have been ignored while others have been taken up. For example, UDDTs are promoted while other options are ignored. No loans are given for any other technologies and new or improved toilets that are not approved UDDTs are not monitored. However, the adaptation follows a no-subsidy approach and aims for ODF communities. There are certain trade-offs, both ethical and practical, the discussion of which is beyond the remit of this case-study.

7. Plan International Zambia’s future plans:

In the past, urban areas were not a priority for PIZ. However this is now changing. The new Country Strategic Plan (2016-2020) will focus not only in rural but urban areas. This provides an opportunity to introduce a CLTS-like approach in low income settlements in big cities and small towns. Efforts are underway to start using CLTS in selected compounds in Lusaka. The approach will seek to combine CLTS tools with capacity building for group savings and loan organisations and entrepreneurs. Potential compounds have been identified.