

# Ensuring Child Safety During and After CLTS

## Learning Brief

### OVERVIEW

Community-Led Total Sanitation (CLTS) has been implemented in Cambodia since 2005 as a means of improving sanitation and hygiene practices in rural communities, and mobilizing them to achieve open defecation free (ODF) status. In CLTS, children are often encouraged to be change agents to help influence their family and community to improve sanitation and hygiene behaviors. However, some strategies may pose a risk to child safety. Therefore, CRSHIP has conducted an “*Evaluation of CLTS Triggering with Children in Rural Cambodia and Its Potential Impacts*” to determine whether, and to what extent, this child protection risk is present as well as to identify recommendations that minimize the risk. This learning brief summarizes the findings and recommendations from the evaluation. It is written for the Ministry of Rural Development (MRD) and development partners involved in CLTS.

### INTRODUCTION

**Since a key approach for implementing CLTS in Cambodia is to engage children as change agents to motivate behavior change in their homes and communities, there is a need to ensure that all CLTS interventions are devoid of practices that may endanger children.** Following observations made in 2015 of CLTS triggering sessions involving children, cautionary concerns were raised regarding the potential child protection risks. The descriptive title for the strategy is “*Child Meets Their Parents/Caregivers to Ask for Building a Latrine.*” As part of this strategy, the facilitator asks a child from a family who does not have a latrine to approach their parent in front of the community during the CLTS triggering event and request the parent to build a latrine. Implementers believe that the strategy reinforces the connection between a parent’s desire to safeguard their child’s wellbeing and the benefit of having a toilet. However, implementers have also observed that the strategy can create very emotional responses from both the parent and the child. Although this strategy was not originally part of the National CLTS Guidelines, it has become widely practiced among CLTS practitioners.

**In response to the potential risk to children, CRSHIP management requested all of its implementing partners to suspend the use of the strategy, and commissioned an evaluation.**

The primary objective of the evaluation was to determine if the above strategy, or any other aspects of CLTS interventions, inadvertently put children at risk of being harmed. During the evaluation, a literature review was conducted followed by 128 key informant interviews (KIIs) and focus group discussions (FGDs). In total the evaluation included 434 participants, drawn from a sample of internationally-based experts, national and sub-national representatives including MRD, CRSHIP stakeholders, development agencies, and provincial, district, commune and village representatives.

### FINDINGS

**There is a conceivable risk of harm to children who are singled out or “volunteered” by facilitators in public meetings to trigger parents/caregivers.** Some participants in the evaluation acknowledged that the triggering strategy of “*Child Meets Their Parents/Caregivers to Ask for Building a Latrine*” may pose a potential risk to the children. The public shame and embarrassment felt by the parent could turn into anger or resentment toward the child, which could feasibly resort to physical or emotional mistreatment of the child.

Additionally, the evaluation found that instead of volunteering, some children were directed by the CLTS facilitator or their teacher to participate in asking their parent for a toilet. This puts the

child in a difficult situation of both not wanting to disobey the authority figure and not wanting to upset their caregiver; either option may have harmful consequences or at a minimum create undue emotional stress.

**The current National CLTS guidelines and training materials lack clear guidance on how to engage children and minimize the risk to them.** The tools and strategies for conducting CLTS with children described in the National Guidelines are nearly identical to those for adults, and do not take into account the special circumstances of working with children. Moreover, the guidelines do not articulate any formalized procedures or monitoring systems to ensure child protection. Without this guidance in place there is a greater risk that child protection principles and practices might be overlooked by implementers.

## RECOMMENDATIONS

To ensure that no child will be at risk within CLTS interventions, the following policy and implementation recommendations should be considered by MRD and CLTS implementing organizations:

### *Implementation*

1. **Cease use of the strategy “Child Meets Their Parents/ Caregivers to Ask for Building a Latrine”** — To avoid risk of harm, children should not be asked to individually trigger their parents/caregivers. In general, approaches which do not publicly isolate any one child should be favored; such as group parades, songs and plays.
2. **Continue to engage children in CLTS implementation using methods that empower their collective voice** — Many participants in the evaluation provided several good practices for engaging children in CLTS activities. For example, using youth clubs to help plan community cleanup activities and disseminate sanitation and hygiene messages, as well as coaching students on how they can help improve hygiene and sanitation practices at home. These types of practices empower children to play a positive and active role in their community and household. However, very few of these practices have been

documented and even fewer have gathered evidence of their effectiveness. Such information would be useful for informing guidelines and training materials for future child-safe CLTS strategies.

### *Policy*

3. **Revise the National CLTS Guidelines and training materials to include child protection safeguards and measures** — The Ministry of Rural Development should ensure that the CLTS Guidelines are revised to incorporate child protection protocol and practices necessary for safeguarding children’s welfare and dignity. Dissemination and training activities on the revised guidelines to subnational implementing agencies should emphasize the new child protection protocols and practices.
4. **CLTS implementing agencies should review their child protection policies with partners to ensure that they are being implemented** — All implementing partners should review their child protection policies and safeguards to ensure risk mitigation planning, monitoring, reporting and response measures are put in place, understood and followed.

### **Further Resources:**

- 1) Ministry of Rural Development, 2013, *National Guideline on Community-led Total Sanitation (CLTS)*
- 2) CRSHIP, 2017, *Evaluation of CLTS Triggering with Children in Rural Cambodia and Its Potential Impacts.*

**About this Document:** *This learning brief was produced by the Cambodia Rural Sanitation and Hygiene Programme’s (CRSHIP) Learning and Documentation (L&D) project. The L&D project supports programme implementation from within to help solve complex implementation problems, and to increase the overall effectiveness and the quality of the results on the ground by making learning and knowledge emergent, context driven, available in real-time, dynamic and evolving. The L&D project is a Global Sanitation Fund (GSF) funded initiative jointly designed by GSF, CRSHIP and WaterAid Cambodia building on GSF’s Real-Time Emergent Learning approach. The L&D project is managed by WaterAid Cambodia in partnership with Plan International, the Ministry of Rural Development, and CRSHIP implementing partners.*