SANITATION SUCCESS STORIES:
NINE BANGLADESH CASE STUDIES
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by

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Introduction

In 2015 our team interviewed nine Bangladesh union chairmen, elected local government leaders, about sanitation in their rural areas.¹ We had previously visited all of these unions while doing a follow-up study in 53 unions for the World Bank in 2009-2010, which was four to five years after they had been declared ‘100 percent’ covered, meaning that all households had sanitary latrines according to the Bangladesh national standard. The 2009-2010 study included household surveys.² The study team leader, Suzanne Hanchett, previously had visited four of the nine unions in 2000-2001 while doing evaluation studies for CARE and UNICEF on water and sanitation.

These places represent some of the best possible sanitation cases – places where most leaders and ordinary residents have been committed to disease prevention for some years through household toilet use. But change is one of the only constants in human life. So these cases deserve close scrutiny, to help us understand how and why ‘success’ does or does not stand the test of time.

In 2009-2010 we found that a chairman’s level of commitment influenced sanitation outcomes in his union. All except one of the chairmen interviewed in 2015 had been newly elected after that original study, so we were interested to see how these new chairmen compared to those we had met five years earlier.

¹ This 2015 study was funded by the CLTS Knowledge Hub, Institute for Development Studies, Sussex University, with support from the Swedish International Development Agency (SIDA). We did interviews with ten chairmen, but one was not suitable for inclusion in this report, because the chairman was not residing in the union and not informed about sanitation progress. Two of the nine interviews discussed here involved field visits, and seven were done by telephone, though field visits had been made earlier.
² Our 2010 household surveys were conducted by Pathways Consulting Services Ltd., a Dhaka company, Mohidul Hoque Khan, Executive Director. The survey team did general observations in unions not visited by the authors of this paper, supplementing and harmonizing information on study unions. We focused both household surveys and in-depth studies on three randomly selected villages in each union: one centrally located, one moderately distant from the union headquarters, and one far from the union headquarters. Approximately 60 randomly selected households were interviewed in each selected village. In-depth researchers did focus group discussions, transect walks, social mapping, household observations, and key informant interviews. In one of the nine unions (Bisharkandi) no household survey was done. Field workers used rapid rural appraisal methods to learn about the situation.
The Union: Its Place in Bangladesh Government and Its Social Characteristics

A union is the smallest administrative unit in Bangladesh government. Several unions make up a subdistrict, which is run by a subdistrict administrator; and several subdistricts are grouped into a district, which is overseen by a district administrator. There are 64 districts in Bangladesh, whose capital is the city of Dhaka. Union governance is a responsibility of the Ministry of Local Government, Rural Development, and Cooperatives (MLGRD,C). Unions are divided into nine wards and governed by councils of 12 elected members (typically nine men and three women), who work under a separately elected chairman. Each union has an office with a small staff that includes an appointed union secretary and possibly others.

The union is the lowest Bangladesh administrative level, but it is not a small or socially homogeneous place. The average Bangladesh union has a population of 25,000 and includes a number of different grām, which have an average population, of 2000 (a grām translates approximately into village). Each grām is further subdivided into pāRās (which translates roughly as neighborhoods). Social class, ethnicity, and religion often vary from village to village, but neighborhoods tend to be more socially coherent communities.

These ‘neighborhoods’ are similar to what might be called ‘villages’ in other countries, in the sense of being functional communities. One of our study unions (Kusumba), includes 17 named grāms and 85 pāRās. Its population was approximately 30,000 to 40,000. In 2010 populations of our nine study unions ranged from 18,000 to 53,000.

When asked in 2015 how their unions had changed in the past few years, all nine chairmen said that infrastructure had improved, and they had better physical communication with surrounding areas than in the past. They also said that their populations were prospering more than before, and that houses were of better quality. Electricity was more available. The environment was cleaner. Improved roads had provided access to economic opportunities in subdistrict headquarters or larger urban centers. One union chairman (in Rajabari) said that his union was beginning to feel more urban and less rural. A garment factory and other industries had been established by outsiders who came in and bought land, and more families were living in rented houses than in previous decades. Rental housing is not common in Bangladesh rural areas.
Bangladesh has a centralized governmental system, so chairmen’s and councils’ resources and authority are limited. They are perceived by their constituents, however, as leaders with problem-solving power. And outside groups running rural development programs depend on them for local contacts and coordination. It can be said that the union has more responsibility than authority, not always an ideal position. For example, national policies require each 12-person council to organize some ten committees to manage problems with maternal and child health, arsenic in drinking water, water and sanitation, and other nationally recognized priorities.

Union chairmen may or may not live inside the union. Some reside elsewhere in the district, or even in Dhaka. All union chairmen, however, are expected to work in their unions, and also to attend monthly meetings organized by their subdistrict administrators. During our 2010 study we tried to assess the various chairmen’s levels of enthusiasm and effectiveness in local sanitation promotion. Based on conversations with the chairmen, comments of others, and our general observations, we assigned to each chairman a rank of either 1 (enthusiastic and effective), 2 (moderately so), or 3 (not much interested or effective).

In 2010 Bangladesh started electing subdistrict chairmen and councils. But the relationship between the elected bodies of union and subdistrict levels was not clearly defined at the time of this study. In 2015 we asked union chairmen’s views of their subdistrict chairmen’s interest in sanitation issues. Most answers were vague but positive. At that time subdistrict chairmen had few resources and only minimal decision-making power. They were struggling to define their roles and responsibilities vis-à-vis subdistrict administrators.

Unions receive tax revenue from local markets and may earn interest on leased-out property or cash investments, but there are few local funding sources. Chairmen have access to Annual Development Programme (ADP) funds from the central government. Some 20 percent of these funds were required to be spent on sanitation promotion at the time of the most recent national sanitation campaign. Although this is no longer a firm requirement, two of our chairman interviewees said that they still use ADP funds to help people with latrine repairs or replacement parts. Sanitation projects also may get funding through the Local Governance Support Project (LGSP).

Despite their limited ability to mobilize funding for sanitation, we found most chairmen and council members to be proud of their unions’ sanitation histories and eager to sustain or improve on their unions’ achievements, and/or solve any new problems. When asked, ‘How
does sanitation in your union compare to that of neighboring unions’, seven chairmen said that theirs was the best, or better than the neighbors, emphasizing the greater public ‘awareness’ in their unions as compared to neighboring unions. One said that all of the neighboring unions were good like his. Only one (Rajabari) said that his union was merely ‘average’, neither better nor worse than the neighboring ones.

**Defecation in the Context of Living Arrangements**

People living in neighborhoods (pāRās) are typically well known to each other. They often share a common ethnic or religious identity, and/or they tend to be socioeconomically similar. For example, one often finds Hindu neighborhoods in otherwise Muslim villages. Or the majority in a poor neighborhood may depend on day labor for their livelihoods.

We have seen a number of unions in which all but one neighborhood was using household latrines, sometimes a very poor neighborhood or that of an indigenous minority group. People in the same neighborhood generally have similar defecation habits and opinions about proper behavior – although it is common to find here and there a strong-willed household head who chooses to differ from all the others. Community latrines are sometimes built in neighborhoods where household latrine use is not the norm.

Defecation habits need to be understood in the context of perpetually shifting kin relationships and the social tensions they produce. In every neighborhood there are multi-family residential compounds called bāRī. Multiple rooms surround a bāRī’s courtyard. The two-to-ten families sharing such a compound are almost always related to each other as members of the same patrilineal kin group (goshti or bongsho) – *i.e.*, brothers or paternally related ‘cousin-brothers’, their parents, and their wives and children. They are likely to share some resources, such as a pond, a tube well, or agricultural lands. Compounds expand and shrink as patrilineal groups grow and divide their households and property. Separate households within a compound usually are called ‘families’ (poribār) or ‘stoves’ (chulā), because they cook and eat separately from each other. A household typically has one or more brothers, members of a joint family, who eventually marry and may set up their own separate dwellings in the compound or outside of it as their families grow.³

³BāRīs in rural southeastern Bangladesh tend to be larger and more complex than those of other regions.
Within the residential compound latrine sharing can be very complicated. It is likely to change as families expand and divide. Arguments among sisters-in-law about latrine cleaning are frequent, when two different households share a toilet; and when families expand, latrine pits can fill up quickly. There is no firm requirement to install a toilet when a new house is built, and (often strained) sharing arrangements may be necessary after joint families divide. A return to open defecation can happen under such conditions.

**Pit Latrines and Other Models**

The typical, moderately priced household toilet installed is a single-pit latrine -- either direct pit or offset -- with a concrete slab, or squat pan, set over the pit or drain pipe, and a water-seal in the center of the pan. Some also have vents. The pits mostly were (and still are) lined with concrete rings. More innovative ecological sanitation (eco-san) toilets, twin-pit models, and septic systems also are found nowadays in many unions. Regular pit-emptying — by people called Sweepers in South Asian English (usually called methor in Bengali) — is essential to continued use of this model, of course, and historically low status Sweepers have found new employment opportunities as the idea of household toilet use has caught on.

The union chairmen and others we interviewed mostly use the term ‘sanitary latrine’ (shāsto sāmato paikhāana in Bengali) to identify an acceptable household model. This is not a clearly defined term, but it means, at least, that feces are contained and there is a secure cover on top of the pit and some kind of enclosure.

**Intensive and Extensive Sanitation Promotion in Bangladesh**

Between 2003 and 2006 the Bangladesh government (which was ruled by a different political party than the present government is) waged a massive, nationwide sanitation campaign. This campaign did much to inspire and reward union chairmen who actively promoted household toilet installation and use. Awards were given to chairmen of unions achieving 100 percent

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4 Recently wealth inequalities within bāRis have influenced latrine infrastructure differences among households. Within a bāRis some may have pit latrines in different states of repair. International remittances have led to the establishment of septic systems in some cases. (Tofazzel Hossain Monju’s observation.)

5 The term Sweeper refers in South Asian English to people with responsibility for cleaning up human feces. Sweepers traditionally are members of the lowest ranked castes.

6 In the Bangladesh government’s official definition, a ‘sanitary latrine’ must have an unbroken water-seal, although breaking the water seal is common, because it reduces the amount of water needed to flush. Another strict government requirement is sharing by no more than two households.
household latrine coverage.

The 2003-2006 sanitation campaign was not the first one in Bangladesh, but it was the most thorough one, and it covered almost all parts of the country. Since the 1960s specific places in Bangladesh had been targeted by intensive campaigns, which included various degrees of coercion, public education, and/or technical demonstrations. Two of the most well-known and relatively successful programs were CARE International’s SAFER programme (in the southeastern districts of Chittagong and Cox’s Bazaar) and UNICEF’s Social Mobilisation Programme (most effectively implemented in the southern district of Barisal). One of our nine study unions was a SAFER location, and three were in the Social Mobilisation Programme areas. Danida funded NGOs gave close, continuous attention to sanitation in southeastern districts from the 1980s onward.

**Multiple Sanitation Promotion Histories**

Five of our nine study unions experienced intensive sanitation promotion using some version of the participatory, ‘total sanitation’ approach, for example, Community Led Total Sanitation (CLTS) or Dishari, during the 2003-2006 national campaign.7 One of these CLTS unions (Banshbaria) is the same one where SAFER had been implemented in the 1990s. The Dishari variation trained local leaders to facilitate community participation, rather than having a Non-Government Organization (NGO) facilitate ‘triggering’ and other total sanitation steps. The total sanitation approach was not always implemented in all villages of a union during the campaign. Scaling-up occurred in some places after the national campaign ended.

After the national sanitation campaign, five of these nine study unions benefitted from follow-up sanitation promotion services. In our 2010 study we found follow-up intervention to substantially improve a union’s chances of sustaining a high level of household toilet use. Five study unions were receiving regular services from full-time NGO sanitation promoters at the time of our 2015 interviews. In two of these unions donors (Plan and HYSAWA) were funding full-time staff positions in the union office itself. In four study unions, however, no special follow-up services were underway. Sanitation education or promotion, if any, was provided only by the Department of Public Health Engineering or by government schools. Private businesses were found to be selling latrine parts at local markets in nearly all places covered by our original

7 In two of these five, the Dishari version of total sanitation was implemented.
study. Some of these businesses originally got started with subsidies during the national campaign.

The people of some of these study unions and their leaders, then, had experienced one or more waves of intensive sanitation promotion in the 10 to 20 years preceding our 2015 interviews. (See Table 1 for details)

**Current Sanitation Status and Challenges**

Our 2015 interviews with nine chairmen centered on the following questions. In some cases information from a chairman was supplemented by another person, such as a union secretary, a council member, or an NGO staff member.

- Have there been any major changes in your union during the past five years?
- Please describe this union’s sanitation history: campaigns, NGOs, and so on.
- What is the present sanitation situation: your general assessment?
- Are sweepers available to do pit cleaning?
- Please describe current sanitation initiatives, if any.
- Are there presently any union staff or volunteers working on sanitation?
- Do NGOs help with sanitation problems?
- Do local police officers (*chowkidārs*) or others monitor sanitation in the union?
- Does the subdistrict administrator (*upazila nirbahi* officer/UNO) request information about sanitation?
- Does the topic of sanitation come up in regular subdistrict meetings?
- Did you participate in last year’s (2014) National Sanitation Month activities?
- Do poor families ask for help with latrines? Does the union try to help poor households with latrine parts or supplies?
- How are complaints handled, for example, among neighbors about bad smells, leakage, and so on?
- What are the main sanitation challenges at this time in your union?
- Do NGOs help with sanitation?
- How does the sanitation situation in your union compare with that of neighboring unions?
We have tried to summarize our survey information from 2010 (along with some 2015 observations), to rank the sanitation success status of the nine study unions as either high, medium, or low. This is an approximate measure, based on weighted values assigned to our survey and other findings (Open Defecation (OD), cleanliness of latrines, numbers of households using, presence of convenient hand washing stations, observations of soap, and roof on the superstructure). The over-all rank of each union’s sanitation situation in 2010 is indicated in Table 2. We also have considered institutional and social supports for sanitation in the nine unions, according to information collected in 2015 interviews. Thus we have summarized findings on local checking and problem-solving, observance of National Sanitation Week/Month, collaboration with other union chairmen, present support from NGOs, and other topics, described in Table 4. These are rough computations, meant only to give a sense of how sanitation work is progressing in the various unions. As Table 5 shows, some (but not all) of the places with the weakest sanitation performance have been getting substantial attention in the years since our 2009-1010 study.
Detailed Union Comparisons

Detailed comparisons can provide insights into the processes that support or challenge a union’s Open Defecation Free (ODF) status. These processes are multiple and interact in complex ways. Comparing cases cannot provide the same precision that statistical analysis can. But this qualitative type of analysis can suggest useful leads to factors that could be isolated and studied on a larger scale using quantitative methods.

The nine unions are divided into four broad groups, based either on their campaign histories or their current approaches to sanitation. Comparing the unions within each group can demonstrate points of contrast that would be less visible if the whole group of nine were considered at once. Our four groups are (A) Gunaigachha (Case No. 1) and Laharkandi (Case No. 2), where local government leaders are prominent in sanitation programming; (B) Noudabas (Case No. 3) and Rajabari (Case No. 4), which reached 100 percent household latrine coverage through the Dishari approach to total sanitation; (C) Nizampur (Case No. 5), Kusumba (No. 6),
and Banshbaria (No. 7), which went through the CLTS process; and (D) Saliabakpur (No. 8) and Bisharkandi (No. 9), both in Banaripara Subdistrict, famous for its Social Mobilisation for Sanitation Programme in the 1990s, and which both also reached 100 percent household latrine coverage in the National Sanitation Campaign of 2003-2006.

**Group A. Local Leaders in Charge**

**Case No. 1: Gunaigaccha Union**

Gunaigaccha Union achieved 100 percent household sanitation coverage in 2004 during the national campaign without any support from NGOs or outside sanitation promotion programs. The chairman at that time enthusiastically promoted household toilet use, and his successor seemed equally proud of the union’s sanitation achievements in 2015. The former and present chairmen both live inside the union. After the national sanitation campaign two or more NGOs (one supported by UNICEF) did follow-up work to make sure that the gains were sustained. In 2015 two NGO-sponsored programs were still working locally on sanitation issues.

Our information sources on this union include a 2010 household survey in three villages, a union profile done by the survey team, and our 2015 telephone interview of the Union Chairman.\(^8\) The Union Secretary also provided information.

This is a relatively small union, having a population of 13,450 (3840 households) in 2010. Our sample survey at that time found 52 percent of households to be poor. A relatively large number of area residents leave the union to find seasonal employment in agriculture or other sectors. Compared to other unions, this one receives few migrant laborers or other ‘floating populations.’ Located in the western Bangladesh district of Pabna, the union’s 15 villages have less water than they feel they need. But this is not a disaster-prone area.

Between 2007 and 2010, the union had not distributed any latrine parts (rings, slabs, etc.) to residents. Our household survey found 98.3 percent using improved latrines, including some shared by more than one household.\(^9\) Only 1.7 percent of household latrines were found to be

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\(^8\) This interview was conducted by Ms. Shireen Akhter, a Senior Associate of Planning Alternatives for Change.

\(^9\) Our study included shared latrines in the ‘‘improved’’ category, if feces were adequately contained, although multi-household sharing disqualified a latrine from this being considered ‘‘improved’’ according to the WHO/UNICEF Joint Monitoring Program criteria at the time.
shared by three or more households. In 59.3 percent, only one household used the latrine. And 61 percent were found to be clean, a larger percentage than in most other study unions. Of the poor households covered by the survey, 96.4 percent were using improved/shared latrines. Soap was observed near the latrine in almost one-third (32 percent) of all survey households, but only 8.5 percent had water for hand washing available within three meters of the latrine.

When asked about the current sanitation situation, the Chairman and Secretary told us in 2015 that a survey of 3299 households had been done sometime within the past few years. Some 73 percent were found to have sanitary latrines, and 27 percent were damaged but still useable. There were no enclosed, open defecation spaces or unlined/uncovered pits (kacca latrines); nor were there any ‘hang latrines’ dropping feces onto fields or water bodies. The Union Secretary estimated that, ‘at least 95 percent of the households are using ‘sanitary latrines’.’ As a result of the national campaign, the Secretary said, ‘100 percent ODF became a model of this union’.

While open defecation has stopped, the Chairman said, most families do not maintain or repair their latrines because of money problems. People are generally aware of the health benefits of household toilets, however, so the entire situation is better than it was in the past, he added. Sweepers come from the district town when they are called, but hiring a sweeper is considered to be expensive. Some poor families clean out their own latrine pits. Others dig a new hole nearby, lining the pit with three or four concrete rings. The new hole may (or may not) be connected to the original latrine with a pipe.

The union is trying to help those who need support, according to the Chairman, and staff funded by two organizations (HYSAWA and OSAKA) arranged community meetings to motivate people to use latrines, keeping the Chairman updated on their activities. They also help poor families to construct pit latrines and train school children about hand washing and toilet use. This union is one of only two in our study that has a full-time staff person -- a female Community Mobilizer in this case – working on sanitation in the union office with support from a national NGO funded by HYSAWA.11

In 2010 this union got a grant of 50,000 Bangladesh taka (US$625) from the LGSP, which they used to pay a contractor to install free pit latrines in poor people’s homes. Each family got three concrete rings and one slab from the union, but the families themselves had to

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10 Our study criteria for ‘‘cleanliness’’ were: (a) Latrine pit not leaking profusely, and/or (b) Feces not visible on the latrine floor, pan, or water-seal.
build their latrine housing. In 2012-2013 the union used its own funds to provide ring-slab sets to 50 poor families. Council members went door-to-door, to determine need and create awareness. In 2014 the union did not have sufficient revenue to do its own program, but it did receive 100,000 taka (US$1250) for latrine construction. Poor people cannot afford to repair or replace latrine parts when they break, the Chairman said, ‘So they come to us demanding new latrines’.

The Chairman described a relatively well coordinated system for problem solving and sustaining latrine use. Local police (chowkidārs), he said, do not go house-to-house checking on latrines, but they do follow up on complaints. They may inform NGO workers and union council members or staff if problems are complicated. Local complaints about bad smells are not common nowadays because ‘NGOs are taking responsibility for raising public awareness’. Ward commissioners (union council members) and other community leaders also work to bring families together to negotiate any disputes that arise. The subdistrict administrator (UNO) ‘always encourages better sanitation practice and instructs union chairmen to follow up on problem situations’. But discussions about sanitation are not as frequent in monthly subdistrict meetings as in the past, he said.

The principal barrier for ‘continuing latrine use in a hygienic way’ is poverty. Poor families cannot afford to repair broken latrine pans. They may break the water seals on their slabs and let bad smells spread, said the Chairman. ‘We actually try to give these families all kinds of support for changing latrine parts, or even cleaning out the pits’.

An important learning point from the union’s household latrine construction programs, according to the Chairman, is that, ‘People prefer to buy their own, better quality and larger latrines. Most of those constructed with union funds remained unused’. Higher income families buy latrine parts from private businesses.

The union constructed two public toilets in 2012-2013 -- one in the market place and one in the local hospital -- plus one community latrine elsewhere.

National Sanitation Month\(^\text{11}\) ‘is never observed at the union level’, but many programs go on in the subdistrict headquarters town. School children participate in rallies. Last year the Chairman did not participate; rather, he sent his women council members.

Three of the neighboring unions have one problem not faced by Gunaigaccha. They are

\(^{11}\) HYSAWA (Hygiene, Sanitation and Water Supply) is a funding organization.
on very low land, and they almost ‘drown’ during the rainy season. Latrines are mostly damaged, and feces and bad smells spread all over. The environment becomes dirty and unhealthy. Another reason for problems in neighboring unions is said to be ‘lack of awareness’. People are not as serious about ‘hygienic latrine use’ as we are, said the Chairman. ‘In our union the awareness level is high, and water doesn’t flood us during the rainy season’.

Case No. 2. Laharkandi Union

![A middle income woman shows her clean latrine](image)

Laharkandi Union achieved 100 percent latrine coverage in 2005, during the national sanitation campaign. Local efforts were supported by NGOs participating in a DPHE-Danida sanitation program. These NGOs discontinued their work at the end of the campaign, leaving local leaders and official staff with the responsibility to sustain sanitation achievements. This is the only one

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12 Bangladesh observes National Sanitation Month every October. Some localities devote one week during this time to rallies and other awareness promotion activities.
of our study unions with the same Chairman in charge since the time of the campaign. He was first elected in 2003 and still in office during our 2015 interview.\textsuperscript{14} He lives inside the union. During our 2010 study, we assessed his effectiveness as a sanitation promoter to be ‘moderate’. He is a member of the opposition party (BNP), which was in power during the national sanitation campaign but out of power during our 2010 and 2015 studies.

The Chairman reported proudly to our team in 2010 that his union had raised latrine coverage rapidly (from 40\% to 100\%) during the campaign, which stimulated healthy competition among the leaders of neighboring unions to be ‘declared’ as fully covered and get a reward from the government. ‘Most families had open defecation spaces in front of their homes or practiced open defecation elsewhere’, he told us in 2015. ‘But all are using latrines now. We did hard work for it, and we were successful’. The Chairman told us that he received ‘one crest, one certificate, and 200,000 taka in cash’ at a Dhaka ceremony, in recognition of his accomplishments during the national campaign\textsuperscript{15}. Health benefits were immediately evident. ‘Since 2005 not a single child has died from diarrhea’, he told us in 2015. ‘This is my achievement’.

Our background information on Laharkandi includes a household survey and six days of in-depth interviews and observations, by a team of three persons,\textsuperscript{16} who did key informant interviews, focus group discussions, structured household observations, case studies, and transect walks.

Laharkandi is located in the southeastern part of Bangladesh, a coastal belt environment characterized by sandy soils, river erosion, and frequent storms. Water for household purposes is moderately available, with seasonal shortages. Arsenic contamination of drinking water is a local problem. The 2010 population of the union was approximately 50,000. Sixty-two percent of the households covered by our survey were found to be poor. There are some nomadic Bede families living in the union.

In the rush to meet the national campaign’s goal, this union provided a large number of concrete rings and slabs to local families (two rings and one slab to each household), but the

\begin{flushleft}
\textsuperscript{13} DPHE is the Department of Public Health and Engineering, which worked closely with UNICEF on water and sanitation issues with support for many years from Danida. The UK aid agency, DFID, continued general support of UNICEF and DPHE after 2000.

\textsuperscript{14} This telephone interview was conducted by Kazi Rozana Akhter in May 2015.

\textsuperscript{15} We were not able to verify this claim. Tk. 200,000 would be an unusually large award.

\textsuperscript{16} Kazi Rozana Akhter (Field Team Leader), Partha Sarathee Ghosh, and Zohurul Islam
\end{flushleft}
products were not of high quality. Our household survey found 98.3 percent to have improved/shared latrines, but only 27 percent were clean. Some 69 percent were used by only one household, and sharing by three or more households was 5.1 percent. The in-depth study team found many concrete rings and slabs to be broken or cracked, especially in poor households, and users’ maintenance habits to be poor. The rushed supply had the effect of spoiling people’s trust in suppliers. In 2010 there were three private businesses providing latrine parts and services in or near to the union. In 2015 the Chairman told us that the union now had 15 shops selling latrine parts.

We checked for evidence of open defecation (OD) during our 2010 study and found the practice to be continuing at a ‘moderate’ level, comparable to Rajabari Union. That is, there was still some OD, but not as much in other places, such as Noudabas.

Almost 90 percent of households covered by our 2010 survey were found to have hand washing stations associated with latrines. Only 18.6 percent, however, had these stations within 9 meters of the facility. Soap was observed at 28.8 percent of the hand washing stations.

The Chairman said in 2015 that, ‘The work is not yet done’. In a recent count, around 90 percent of households were found to have functioning latrines, he told us. But 10 percent of the union’s households, he commented, do not maintain their latrines properly. These are mostly poor families. Latrines have broken. They leak and emit bad smells. He said this is his ‘main concern’. Sweepers, who live in the nearby city of Lakshmipur, go from door-to-door to ask people if they need latrines cleaned. Sweepers are both male and female, the Chairman said, and both Hindu and Muslim.

(Muslim pit cleaners)
Poor people request help with latrine parts and repairs, he said, but ‘demand is low’. In 2015 the union distributed ten ring-slab latrine sets, and in 2014, 15 sets. ADP funds have been spent on education and other purposes, not on sanitation.

The union does not conduct any other special sanitation promotion activities now, but the Chairman still hopes to make his union ‘a model union in terms of sanitation’. He hopes to continue courtyard discussions (uthān baithāk) to motivate people to improve sanitation and hygiene habits. No NGO is presently working on sanitation in this union. ‘But family planning and health workers help by keeping me informed’, he told us. When they tell him about unhygienic situations, he commented, ‘I take appropriate action’. Local police (chowkidars) also continue to work on sanitation problems, as they did in the past, he said.

If someone complains about a neighbor’s latrine emitting a bad smell, he told us in 2015, ‘I send the council member and the chowkidar to the place, to try to solve the problem. If this is not successful, I go there myself with some concerned elites’. Use of the traditional dispute-resolution process (sālish) is not appropriate, because ‘no one objects to stopping open defecation’. ‘Everybody in my community prefers good sanitation and good hygiene’, he told us.

During the 2014 National Sanitation Week, the Chairman joined a rally and remained present for the whole day. (It was unclear whether the rally was inside the union or elsewhere in the subdistrict.)

Surrounding unions, the Chairman said, are all in ‘the good or medium category’, regarding sanitation. His union, he thinks, is the best one. Union chairmen in the surrounding area, he said, all have good relations with each other. They discuss sanitation in their offices and at village meetings. Sanitation sometimes comes up for discussion in the subdistrict administrator’s monthly meetings, which include all union chairmen. He finds the newly elected Subdistrict Chairman also interested in sanitation issues. The Chairman feels that as a member of the opposition party, he gets less funding than he needs from the government. This is an important challenge he faces. ‘I am a political victim’, he declared. ‘But I try to minimize the odds and work anyway’.

Case Comparison: Gunaigachha and Laharkandi

These two unions both have chairmen who seem committed to promoting improved sanitation practice. They share a common pride in the relatively high levels of sanitation
‘awareness’ of their populations. The physical environment of Gunaigachha is less challenging to sanitation sustainability than is that of Laharkandi. Neither union seems to have a major problem with meeting the sanitation needs of migrant laborers or nomads, although Laharkandi does attract some of these groups during the year. Gunaigachha had follow-up support from an NGO after the national campaign, but Laharkandi did not.

Special features of the Gunaigachha sanitation situation are (1) the use of union funds to help with pit cleaning, as well as rings and slabs, and (2) the presence of a full-time community organizer in the union office. Institutional support for sanitation promotion is satisfactory, with council members and other elite villagers helping to solve sanitation problems and conflicts they produce.

In Laharkandi, the only union in our group of nine with the same chairman in office since the national campaign, government staff (health workers and others) were mentioned as being especially active in promoting hygienic sanitation practice. Laharkandi sanitation seems to have some backsliding, because of the overly rapid distribution of defective latrine materials in the union leader’s rush to reach ‘100 percent’ household latrine coverage during the national campaign. A large number of shops sell latrine parts in the union. Although our team found OD to be occurring only at a ‘moderate’ level in 2010, a large proportion of respondents to our household survey, 46 percent, said that they knew someone who regularly practices open defecation. This survey finding raises questions about public confidence in sanitation progress. (Table 3)

Laharkandi’s institutional and social support for sanitation seems to be somewhat better than Gunaigachha’s. Village police appear to be more active in identifying problems. Continuity of leadership may partly explain the difference. Gunaigachha has a full-time, NGO funded staff member working on sanitation; but this may or may not promote involvement by local leaders in promoting sanitation improvements. Our information on Gunaigachha is not sufficiently detailed to tell one way or the other.

**2010 Sanitation Status Rank:**

- Gunaigachha *Medium*
- Laharkandi, *Medium*
**Group B. Two Dishari Total Sanitation Unions**

**Case No. 3. Noudabas Union**

In Noudabas Union 100 percent of households were declared to be using toilets in 2004, during the national campaign. Sanitation promotion here followed a type of total sanitation method called *Dishāri*. The steps to promote local commitment are similar to those of CLTS, but union staff, chairmen, and council members themselves are trained to manage triggering and other processes leading to full-community coverage, rather than giving an NGO responsibility for facilitation. Sometime after the national campaign, perhaps in 2008 or 2009, an international NGO, Plan, funded a Sanitation Facilitator staff position in the Noudabas Union office. This person worked with locally hired staff and volunteers, who monitored sanitation practice at the village level and held monthly meetings in village houses to promote toilet use, emphasizing the special needs of poor households. Other NGOs, especially BRAC, also have worked locally on sanitation issues. Before the national campaign, this union participated in the Social Mobilisation for Sanitation Programme and a school sanitation program implemented through UNICEF.

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17 The name *Dishaari* stands for “decentralized total sanitation.”
The Noudabas Chairman during and after the national sanitation campaign period was only moderately effective in promoting household toilet use, according to our 2010 team’s assessment. He maintained two residences, one inside the union and one outside. The 2015 Union Chairman, formerly serving as a village doctor, lives 3.5 km. away, in a different union. He was not involved in the national campaign, he said.

Our information on Noudabas sanitation includes a 2010 household survey. More in-depth information was gathered by a team of five persons who spent six days conducting key informant interviews, focus group discussions, interviews with children, transect walks, household-level observations, and inspections of public latrines. The Union Chairman, some council members (male and female), the Sanitation Facilitator, and the Subdistrict Administrator (UNO) also were interviewed in 2010. Information from the Chairman in 2015 was supplemented by comments from the Union’s Sanitation Facilitator.

Noudabas is located in northern Bangladesh, in Lalmonirhat District. The region is regularly threatened with cyclones, flash floods, and severe storms. The area has extensive wetlands, perennially flooded areas called ‘beels’ (biil) in Bengali. The union population was

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18Sixty households in three villages
19In-depth study team members in January-February 2010 were Farid Uddin Ahmed Mia, Shireen Akhter, Emdadul Haque Bhuiyan, Partha Sarathee Ghosh, and Zohurul Islam. Shireen Akhter conducted the 2015 telephone interview with the new Union Chairman.
20,861 in 2010; and 67 percent of surveyed households were found to be poor. Seasonal out-migration of laborers is common.

According to the 2015 Chairman, employment opportunities and salaries for poor people in the region have improved in recent years. There are better roads. Electricity is available now to almost all homes. And there are more high quality houses (concrete or tin) than in earlier years. Unfortunately, he said, national level political conflicts have caused economic problems in the area.

Our 2010 household survey found 100 percent of Noudabas households, families of all income levels, having improved latrines, including shared facilities. Only 3.3 percent of latrines were shared by three or more families. Forty percent were used by only one household. Forty-five percent of household latrines were found to be clean. A unique feature of Noudabas sanitation is the popularity of a locally made, inexpensive bamboo frame, called *duli*, which lines the latrine pit. The top of the pit is covered with a concrete slab or a plastic sheet. This model is replaced when the pit fills up, assuming that a household has enough space to dig a second pit. Because the *duli* model was so popular in 2010, there were no latrine parts suppliers in nearby markets, but some survey households did have ring-slab pit latrines nonetheless.

![Low cost duli latrine pit line. This technology is still in use in 2010 (photo by Anwar Islam)](image)

This was one of 18 unions in which our 2009-2010 team checked for open defecation by doing transect walks. Noudabas Union was one of six found to have ‘high’ levels of open defecation (OD), despite its officially declared ‘open defecation free’ (ODF) status. In our 2010
household survey, 18 percent of respondents said they knew someone who regularly practiced open defecation. (Table 3)

The 2010 survey found hand washing stations associated with 76 percent of household latrines, but in only five percent was the station located within three meters of the latrine. Soap was observed at 37 percent of the facilities.

Plan did a survey of 5392 Noudabas households in 2014 and found 40 percent having sanitary latrines. Fifty-six percent had broken or unhygienic toilets. Some .04 percent (222 households) had no latrine. Very few, only .004 percent (22), were shared by two or more households.

Many poor families demand help with constructing latrines, according to the 2015 Chairman. The union coordinates with Plan regarding latrine construction, giving out approximately 150 ring-slab sets per year to poor households. The Chairman also mentioned spending money from his own pocket for this purpose. Annual Development Programme funds have not been used for sanitation in recent years; nor have LGSP funds. Plan, however, installed a total of 1042 offset latrines between December 2014 and March 2015; and BRAC provides latrines to its own group members. The union recently constructed a public latrine in a densely populated area near a Hindu temple.

Local latrine parts sellers have been trained to produce good quality products. There now are three businesses in or near the union selling latrine parts and supplies, according to the Chairman.

Sweepers are locally available, the Chairman said, but pit cleaning costs have increased. Only those with ‘sanitary latrines’ (he may be referring to septic systems) can afford pit cleaning. Poor people with simple (kacca) latrines or mere pits just cover them with mud and set up new ones when they fill up.

The Chairman said that he ‘informally updates’ the subdistrict administrator (UNO) on the union’s sanitation status at monthly meetings. Plan discusses any issues in detail. ‘We get cordial support from the UNO’, said the Chairman. But the Subdistrict Chairman is not directly involved in any sanitation program.

According to the Chairman, sanitation problems in Noudabas are ‘not very serious’, but many destitute families who want latrines cannot afford even the 320 taka (US$4.00) carrying
and installation fee that Plan charges. The poorest households therefore still use simple, direct pit latrines with the squat-holes covered in plastic.

The number of households has increased in this union, as families have divided. There are not enough latrines for all, he claimed. Complaints about bad smells and so on are now rare. Formerly disputes came before local mediation groups (śālish), but now they are solved informally by neighbors themselves.

According to the Sanitation Facilitator, the hygienic sanitation concept here still is not well understood. Neither poor nor middle income families, he added, use soap regularly to wash their hands. According to another Plan staff member, there is some tension in the union, some mistrust between the NGO and the union staff or officers. Local elites, he said, do not like to see poor people getting good quality latrines, and they ‘pressure NGO workers to hand over the task of distribution to them’. All agreed, that hard-core poor need more support with their sanitation needs than they are getting at present.

The Chairman ended the discussion on an upbeat note. He emphasized the point that ‘Sanitation is important for the union’. Everyone now understands the importance of sanitary latrine use. Self-respect has increased. ‘Now people do not want to defecate in an open place, because it will reduce their respectable position in society. And there are not as many bushes as there used to be. ‘So, even if they are poor, they want to use hygienic latrines’. Diarrhea has reduced, almost disappeared, he said.

NGOs’ role in sanitation, he said, is ‘remarkable’. They are active in the union, raising awareness of the health benefits of hygienic latrine use. And they work on other issues too, including child marriage. Union chairmen in the area compete with each other on sanitation promotion. Other unions’ progress is also good, he said. National Sanitation Week 2014 activities included a public rally and meetings.

**Case No. 4. Rajabari Union**

Like Noudabas, Rajabari Union achieved 100 percent household latrine coverage during the national sanitation campaign in 2003 or 2004 through the Dishari version of total sanitation, that is, with mobilization activities managed by trained union staff and officers. The NGOs responsible for introducing Dishari in this union were Dhaka Ahsania Mission (DAM) and Plan. The 2015 Chairman was a Union Council Member at that time and participated in many ‘useful
activities. He was trained by NGO staff on community mobilization, and he appreciated a sanitation fair organized by DAM and their other community mobilization activities. DAM terminated its program, however, and exited abruptly from the union when its funding ended, according to this Chairman.

Rajabari had the same type of follow-up services that Noudabas had. Plan was doing some monitoring and funded a Union office Water and Environmental Sanitation (WES) position starting in 2004. This person, a woman, was still in her post in 2010. At some point between 2010 and 2015, however, Plan discontinued funding of the WES position, leaving local leaders feeling somewhat confused and disappointed. According to the 2015 Chairman, volunteers trained by Plan staff were not active after Plan left, and a Village Development Committee they formed no longer conducted regular activities. The NGO was continuing a limited number of local mobilization activities, however, in 2015.

In 2010 we assessed the former Chairman as being only moderately effective, in terms of his efforts to promote household level toilet use. He lived inside the union, as does the present Chairman, whom we interviewed in 2015. The Union Secretary – a local man and a professional appointee -- in 2010, however, was quite enthusiastic about the union’s sanitation progress. In 2009 he said happily, ‘This union is like a flower garden now!’ He continued, explaining that no one will agree to marry their child into a home without a latrine, so the union people have created a ‘social revolution’. ‘I feel proud to say’, he exclaimed, ‘that we would continue to improve sanitation on our own whether anyone from outside helped us or not’. The newly elected Chairman said five years later, ‘When I was a Council Member, I declared a penalty against open defecation. The penalty was 100 taka (US$1.25). Any person who caught someone defecating in an open field, a wooded area, or beside a road received a reward. During the Dishari period, in 2004, many people got active about stopping open defecation, and such a declaration was useful’.

Our background information on Rajabari is derived from a 2010 household survey of 60 households, a union profile developed by the survey team, and a one-day rapid appraisal visit by seven team members in October 2009.

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20Our 2015 interviews with this Chairman were conducted by Tofazzel Hossain Monju.
Rajabari Union is located in Sreepur Subdistrict of Gazipur District, in central Bangladesh. The region, known as the Barind Tract, is not subject to severe storms or other natural hazards. It is a rapidly industrializing area with large numbers of in-migrant laborers and ‘floating populations’, such as the nomadic Bede people. Population density is increasing. Rental houses are common. Outsiders have purchased land. Some factories have been established in this union and in nearby areas. According to the 2015 Chairman, ‘Our union is no longer like other rural areas. It has become more like a town’. The amount of cultivable land has declined, so agriculture income is reduced. There are more bus stations and markets than in previous years. Increased population is straining resources, and there are ‘law and order’ problems. All public services are strained.

Our 2010 survey found 100 percent of Rajabari homes to have improved/shared latrines, including some shared by two or more households. A large number, 77 percent, were found to be clean. Sixty-eight percent were used by only one household. Sharing by three or more households was 8.3 percent. One-third of all latrines had a hand washing station less than 3 m. from the latrine, and soap was observed in 40 percent of all survey households. Thirteen percent of survey houses had septic systems rather than pit latrines: this is a sign of affluence, distinguishing Rajabari from our eight other study unions. Four private businesses located in or near the union provided latrine parts and services to the population. The total population of the union in 2010 was 53,110.
Study team members checked in 2010 for open defecation in Rajabari Union. The practice was found to be continuing at a level assessed as ‘moderate’, less of a problem than in Noudabas Union; but open defecation was still evident. According to the 2015 Chairman, the semi-nomadic Bede people staying in the union do not have access to any toilet facilities; nor do migrant laborers. So they use forested areas for open defecation. The Chairman sees this as a challenge to the union’s efforts to maintain its ‘ODF’ status.

In 2013 the Union updated its sanitation information. They found that 29 percent of households had completely sanitary latrines, meaning that the water seal was intact. Another 52 percent were sanitary but water seals were broken. Thus, they concluded, 81 percent of household latrines were functional. In 19 percent of the households, the latrine was broken, overflowing, or otherwise deemed to be non-functional. Union council members and local police (chowkidārs) are ‘watchful’, according to the present Chairman. ‘They are ready to take action if any behavior goes against sanitation norms and practices’, he said. Because ‘there still are pockets of open defecation’, he said, sanitation problems are not actually being solved to a satisfactory extent.

Considering the semi-urban, industrial characteristics of his union, the 2015 Chairman expressed the view that sewerage and ‘better cleaning systems’ are needed to fully address the population’s sanitation needs in this union.

In 2014 the union celebrated National Sanitation Week. Plan and the Union together organized a union-level meeting, awareness raising with school children, and a cultural program. The full subdistrict (Sreepur) is now officially declared to be ‘100 percent’ covered. This union’s sanitation situation is average, said the Chairman, ‘neither the best nor the worst’, as compared to neighboring unions.

**Case Comparison: Noudabas and Rajabari, Two Dishari Unions**

These two unions contrast in important ways, even though both experienced the same sanitation promotion approach during the national campaign. Noudabas is in a disaster-prone, wetland area of rural northern Bangladesh. The Chairman during the campaign did not live full-
time in the union; nor does the 2015 Chairman. The percentage of very poor people (around 67 percent) is much larger than that of Rajabari (10 percent), which is in a centrally located, non-disaster-prone, semi-urban region. Many Noudabas residents leave the area in search of temporary employment, whereas Rajabari attracts migrant factory workers, other laborers, and nomads.

Noudabas has gone through a series of sanitation promotion programs – including Social Mobilization for Sanitation and the national campaign -- and still gets support from an international NGO, Plan, which has posted a Sanitation Facilitator in the union office. Although the Chairman opined that sanitation problems are not serious, our team found OD to be at a high level in our 2010 visit. We found a locally produced, inexpensive latrine type, the *duli*, still to be popular in Noudabas at that time. Our household survey data showed generally poor latrine conditions; and the 2015 Chairman’s comments do not suggest that there has been substantial improvement since then. Unlike other chairmen we interviewed, he felt that local sanitation awareness was not generally high.

Rajabari is physically and socially very different from Noudabas. Crowding in some slum-like Rajabari union settlements limits space for digging and moving pit latrines. Sanitation facilities, however, were found to be stronger and more hygienic than those in Noudabas. Open defecation by migrant laborers is a serious problem, according to the 2015 Chairman. Only five percent of household survey respondents, however, said that they knew someone who regularly practiced OD – a much smaller proportion than the Noudabas respondents’ 18 percent.

Rajabari union leaders have weaker ties to NGOs, but they have developed a better system for handling sanitation problems on their own than Noudabas has. The 2015 Chairman does not seem to communicate with his subdistrict administrator about sanitation problems, but the Noudabas Chairman does. In general, however, Rajabari has a stronger system of institutional and social support for sanitation sustainability than Noudabas does. Local police check routinely for sanitation problems in Rajabari, but not in Noudabas. And local leaders mediate sanitation-related disputes in Rajabari, but not in Noudabas, where NGO staff or neighbors themselves are said to actively mediate. In Noudabas we heard reports of tension between local leaders and the posted NGO workers, who suggested that the leaders were more interested in helping their friends and making money than in promoting public health.
Leaders of both unions participated in intensive training activities organized by Dishari program staff during the sanitation campaign. The goal of these activities was to prepare each union to handle its own sanitation problems without outside support. Even though the Rajabari Chairman in 2015 was annoyed by the abrupt termination of the NGO program, the hoped-for empowering effects of Dishari seem to have taken hold there to a far greater extent than they did in Noudabas. The reasons why are not entirely clear to our team, but they probably have more to do with the existing political-economic conditions of the union than with any NGO intervention effect.

**2010 Sanitation Status Rank:** Noudabas Low
Rajabari, High

**2015 Institutional Support System:** Noudabas, Weak
Rajabari, Strong

*Group C. Three CLTS Unions*

**Case No. 5. Nizampur Union**

Nizampur and Kusumba, Cases No. 5 and 6, were among the first places where the national NGO, VERC, implemented its community led total sanitation (CLTS) approach. VERC started its sanitation work in Nizampur in 2002, according to the 2009 Chairman, who had been elected in 2003. Before this almost all union residents had the habit of defecating ‘here and there’ outdoors. Except for some school latrines provided by DPHE and UNICEF, almost no one had any previous experience with latrine use. In both Noudabas and Kusumba, VERC promoted low-cost latrine models: the *motka*, another type called *chute*, and simple pits with covers.

The national sanitation campaign is well remembered in Nizampur. The Chairman reportedly received two crests and 200,000 taka in 2004 from the government in recognition of the union’s achievements. In 2009 he told us that just after the campaign, around 40 percent of household latrines were the simple, low-cost types, and 60 percent were ring-slab types. By 2009, however, almost none of the low-cost types were still in use, and he estimated that the
ODF household percentage had come down to around 80 percent. Our 2009-2010 team assessed that Chairman’s sanitation promotion effectiveness as only ‘moderate’.

(Awards given to the union Chairman for achievements during the National Sanitation Campaign)

Neither VERC nor any other NGO stayed in Nizampur Union doing follow-up work on sanitation immediately after ‘100 percent’ household latrine coverage was declared. After some time, however, three other NGOs – the NGO Forum for Drinking Water and Sanitation, a national NGO, the Swiss-funded organization, DASCOH, and CCDB22 – resumed work on sanitation in Nizampur. The NGO Forum had formed 18 WATSAN (water and sanitation) committees. In 2015 these NGOs were introducing new models, such as the eco-san toilet to Nizampur households. No staff members were working on sanitation in the union office itself. Several dedicated volunteers, however, were found to be working locally in their sections of the union when we visited in 2009. We also met one VERC-trained ‘sanitation engineer’, a trained mason, functioning as a positive change agent.

The Chairman we interviewed in 2015 (elected in 2010) is an experienced leader who had served an earlier term as chairman, from 1992. Both he and his predecessor live inside the union.

Our background information on Nizampur comes from two site visits and a household survey. In December 2009 a team of four persons23 made a three-day reconnaissance trip. They met with officers and staff in the union office and conducted some group discussions with

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22CCDB, according to village informants, is a membership organization that provides micro-credit and offers latrine materials to its group members.
23Farid Uddin Ahmed Mia, Anwar Islam, Emdadul Haque Bhuiyan, and Partha Sarathee Ghosh
community people. They also did some social mapping and transect walks and interviewed a
group of latrine pit cleaners. Two weeks later another team of four24 spent six days doing in-
depth research: key informant interviews, case studies, child interviews, pocket voting, and other
types of observations in two of the union’s villages.

The Nizampur Union population was estimated at 25,000 in 2009, based on the 2001
national census. Forty-five percent of the households covered by our 2010 survey were found to
be poor; but the union’s over-all estimate was 77 percent poor. The Union’s 58 villages are
located in an arid region of northwestern Bangladesh, in Chapai-Nawabganj District. Seasonal
water shortages are a serious challenge. Much of the agricultural land is in large holdings owned
by absentee landlords who live in the nearby city of Chapai-Nawabganj. They have
sharecropping arrangements with union residents.25

One section (neighborhood/pāRa) of the union is occupied by a group of approximately
1200 Santals, tribal people. They were not reached by the CLTS campaign, according to our
information. The Santals, and some others as well, occupy government-owned land with
permission of union officers, who reportedly take payments from people wishing to settle there.26
The Santals’ claim to village lands is insecure. They live in fear of being evicted.

The union attracts large numbers of in-migrating agricultural laborers every year. They
work to harvest crops. And there was no provision for them to use toilets during our 2009 visit,
when some 500 laborers were said to be staying in Nizampur.

An important economic change occurred in this union during the past decade, as deep
tube wells greatly increased the productive capacity of the land. Production increased from one
crop per year to three. Some forested or bush-covered lands were brought under cultivation. This
change reduced the size of outdoor spaces used for human defecation and helped to motivate
people to use household toilets instead of doing OD.

Our 2010 household survey found 95 percent of Nizampur households using
improved/shared latrines. Sharing by three or more households was at an exceptionally high
level: 33.3 percent. Fifty-six percent of surveyed households did not share a latrine with any

24Kazi Rozana Akhter (field Team Leader), Shireen Akhter, Zohurul Islam, and Farhana Sultana
25Before 1947 most agricultural land was controlled largely by wealthy Hindu land owners (called zamindars or jōdidars), who paid taxes to the British colonial government.
26The Santals’ land may have been their own before 1947, and then captured by East Pakistan and declared to be
government land (khaash) when they left temporarily for India. Being near the Indian border, Nizampur has Muslim
others. Hand washing stations were found associated with 79 percent of latrines; 39 percent of them were within three meters. Soap was observed to be present at 19 percent of the hand washing stations.

Open defecation in Nizampur was found to be occurring at a very high level, comparable to Noudabas and Kusumba, by our 2009-2010 study team members, who checked village lanes, ponds, and bushy areas for evidence of OD.

In 2010 we were told that the union had distributed 750 ring-slab sets to local households in recent years, but there was some question about who actually received them. One or two groups of villagers hinted that the union was either taking bribes or giving latrine sets to relatives and elite families, rather than giving them to the poor. (We were unable to verify these claims.) In any event, the 2015 Chairman told us that no latrine distribution had been done in the preceding two years, except for households with elderly or disabled members, and Santal households. He said that requests for help with latrine construction or repairs were not common. ‘Without water’, he said, ‘people tell us, “We can’t go to the latrine, so please arrange water supply for us.”’ Demands for household water supply are increasingly frequent. The Chairman said that NGOs estimated that 90 percent of all latrines in the union were functional; but he thought that only 50 percent of the union’s households were still using properly ‘hygienic’ latrines. ‘To me, a functional latrine is useable in form and structure’, he said. ‘At least 10 percent of latrines in this union need major repairs. Others may not be in the worst condition, but they still need repairing and improvement’. The number of local businesses providing latrine parts was said to be ‘two or three’. It had been two during our 2009-2010 study. Two Sweeper families are available to clean latrine pits, but some families clean their own pits. Or they seal the old pit when it fills up and dig a new one.

Sanitation problems in this union are not yet solved, according to the 2015 Chairman. ‘Poverty and low educational levels’ are the reasons he gave. The seasonal decline in availability of household water makes it difficult to maintain good sanitation and hygiene. Many poor people cannot afford to improve their simple pit latrines; and ‘Low levels of hygiene still exist, because attitudes and behavior haven’t changed enough’, he said.

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residents who rushed across from India, to occupy lands abandoned by Hindus who left during the partition of India and East Pakistan in 1947 and during some years afterwards as well.
Despite all the problems, he said, ‘People in this union have no doubt about the necessity of a good latrine. Everyone wants good latrines, but the poor cannot afford them’. Our group discussions in 2009 indicated that levels of awareness were indeed high, even when practices were less than ideal.

In 2009 our team learned of one case in which a neighborhood dispute about bad latrine smells and leakage was handled through the formal dispute-resolution process called sālish. The 2015 Chairman said that such disputes had formerly been handled through sālish, but nowadays, ‘People know to take preventive action, so they do not have to face public criticism for creating sanitation problems’. These sorts of complaints rarely come directly to him, he said. Village police (chowkidārs) formerly helped NGO workers check on latrine problems, but they no longer are involved, he suggested. Problems now are handled by union council members, village leaders, or NGO committees. Responsible persons ‘visit the homes and discuss with violators, giving notice and supporting latrine repairs’. Serious problems may be discussed in union council meetings.

Routine subdistrict meetings, he said, were temporarily halted because of political conflict. But the subdistrict administrator and others (DPHE officers, or representatives of various ministries) request information about sanitation from union officers. The subdistrict administrator recently gave a speech about ‘sanitation problems and the way to improvement’ after a rally, where the Member of Parliament was present. The subdistrict chairman is encouraging, but he does not have resources to help with sanitation problems.

In 2014 National Sanitation Week was celebrated together with the NGO Forum and Sharique Swadesh, an NGO implementing activities in support of women’s empowerment, health and hygiene awareness (including hand washing), and other social development issues. School and village meetings were organized. Union council members participated fully. The Chairman gave a speech about improving sanitation practices in the union.

‘In our NGO’, said the 2015 Chairman, VERC and other NGOs are our sanitation teachers. VERC first did a lot of work here. I supported their program. I think that ‘CLTS’ in English means that people manage their own sanitation arrangements and do not become dependent on government or NGOs to do it for them’. This union is ahead of others, he said. ‘We
have successfully eliminated OD, not just in declaration, but also in practice, throughout the whole union. No other union has done such a thorough job of becoming ODF\textsuperscript{27}.

![Image of a latrine being checked by a member of the community.](image)

**(Team member Farid Uddin Ahmed Mia checking latrine of a poor family, 2009. The latrine is surrounded by a palm leaf fence)**

**Case No. 6. Kusumba Union**

The national NGO, VERC (Village Education Resource Centre), started working on sanitation in Kusumba in 1996 and supported the union’s sanitation progress with use of CLTS methods. As it was one of the first CLTS unions in Bangladesh, Kusumba residents – leaders, trained volunteers, and others -- are proud of their achievements and the community spirit they developed. The union has become a CLTS showplace, attracting visitors from far and wide. Several Kusumba residents have gone out to other parts of Bangladesh to give advice about improving sanitation and hygiene.

Unlike most other Bangladesh unions, Kusumba’s ‘100 percent’ latrine coverage in 2004 was achieved with no financial support from the union or NGOs, although VERC carefully facilitated the process and helped with technical advice. The CLTS anti-subsidy approach demanded that families figure out how to get toilets into their homes, and that they pay for them with their own money. At first many household built their own latrines on a model called

\textsuperscript{27}ODF means ‘open defecation free.’
These lasted only seven or eight months. Some then tried bamboo-lined pits (*duli*) or other inexpensive arrangements. Once the union’s population was mostly all convinced of the importance of household toilet use, families started investing in ring-slab direct pit latrines or other types, such as offset pit latrines. Between 2006 and 2010 Kusumba Union supported household latrine installation in the amount of 600,000 taka (US$7500), providing equipment and supplies to 710 households.

After the initial campaign was over, sanitation promotion was continued by follow-up programs of VERC alone until 2006, and together with another NGO, EECHO, until 2011.

Our background information sources on Kusumba Union include a December 2009 reconnaissance visit by three team members, who collected basic facts about the union and its villages and did some preliminary interviews and observations. We also conducted a 2010 household survey. Three team members did an in-depth, five-day study in April 2010, which included focus group discussions, latrine observations, transect walks, and key informant interviews. In late 2015 the VERC headquarters office kindly hosted a group of CLTS volunteers from multiple locations, including Kusumba, and Kazi Rozana Akhter, Anwar Islam, and Suzanne Hanchett did a focus group interview with them.

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28The *motka*, invented by VERC staff, is a low-cost latrine. The pan is made of tin and set onto the top of a hole. Two bricks are placed on top of the pan for squatting. The hole is connected to a pit dug a little distance from the squatting platform, creating an offset type of arrangement. A hollowed-out piece of bamboo wrapped in plastic (polyethylene) is used as a vent pipe.

29In 2010 one team member (Emdadul Haque Bhuiyan) visited one village neighborhood, populated by very poor families that became motivated to use household latrines during the initial campaign. They did not want to invest in low-cost technology that was not durable. They somehow managed to purchase concrete rings and slabs, digging the pits themselves. They were able to continue using these latrines for many years. Almost all of the families clean the pits themselves when they fill up. Both men and women do this. Some families cannot afford to pay Sweepers to do this for them.

30VERC was funded by WaterAid’s ASEH program to do this work.

31Anwar Islam (Field Team Leader), Emdadul Haque Bhuiyan, and Partha Sarathee Ghosh

32Kazi Rozana Akhter (Field Team Leader), Emdadul Haque Bhuiyan, and F.M. Zohurul Islam
In 2010 our study team assessed the then-Union Chairman, who had been in office for more than 20 years, as ‘very effective’. He was a resident of the union, as is his successor, whom Kazi Rozana Akhter interviewed by telephone in May 2015. In 2004-2005 the Chairman used his government prize money to construct public latrines in five of the union’s gathering places, four markets and one club. In 2006 he visited two states in India, Kerala and West Bengal, to observe progress of sanitation and health programs. VERC, was closely involved in all aspects of Kusumba sanitation promotion, management, and monitoring during our 2010 study and for some time after that. We observed that union officers and staff relied heavily on VERC’s support, information, and advice. The current Chairman was living in the union at the time of the national campaign and CLTS program. He participated in campaign activities and is acquainted with many VERC staff and volunteers. During this time he arranged meetings in his village and participated in some rallies and meetings, he said.

In 2015 there were five NGOs working in Kusumba Union, but none was dedicated to sanitation issues. Neither volunteers nor union staff were funding sanitation, the Chairman told us. But some do provide technical support and training for women and children on hygiene. NGO-led courtyard discussions had been very helpful in the past, he said, and he wishes these could continue. He also said he would like help with local and regional workshops where community members, leaders, and even government officers could learn about sanitation, environment, and hygiene. ‘It was due to assistance from VERC that we succeeded in becoming
an ODF union’, he said. ‘We were able to achieve the dignity and prestige that comes with proper utilization of latrines’.

Kusumba is located in the northwestern part of Bangladesh, in Manda Subdistrict, Naogaon District. The region is relatively arid, meaning that there are seasonal water shortages. But it is not frequently hit by cyclones, tornadoes, deep floods, or severe storms. In 2010 the Union Chairman told us that the population was 40,000, but VERC’s estimate was 28,889. The 2015 Chairman said that the total population was approximately 60,000. Sixty-five percent [CHECK THIS NUMBER] of our household survey sample were poor. The 2015 Chairman mentioned a survey by HYSAWA that found 51 percent of all households to be poor.

Our 2010 household survey found 86.2 percent to be using improved/shared household latrines, 31 percent of which were clean. Fifty-eight percent were used by only one household, and in 5.7 percent one latrine was shared by three or more households. A roof was lacking on 63 percent of surveyed household latrines, making them vulnerable to damage during the rainy season. (Table 2) Our team found the latrine in the union office to be the cleanest and best maintained of any union we had visited.

Ninety-four percent had hand washing stations associated with household latrines, and 60 percent of them were located within three meters of the latrine. Soap was observed at 25 percent of the hand washing stations. Thirty percent of respondents mentioned having acute water shortages (ponds and tube wells lacking water) during the dry season.

Checking for evidence of open defecation (OD) in 2010, our team members found OD to be at a high level, a problem comparable to that in Noudabas. Reasons for this were said to include difficulties with latrine sharing and breakage, and also the presence of ‘floating’ populations. Some groups of nomadic Bede settle temporarily in a Kusumba bazaar area every year for four months just before the rainy season. During the harvest season a large number of agricultural laborers stay in Kusumba Union. In 2009 approximately 300 were staying in the union temporarily and practicing open defecation. Temporary residents had no regular access to toilets during our 2010 study, but the Chairman said he was planning to construct some for their use.

In 2015 the Chairman told us that he does not consider the sanitation work to be completed in his union. He estimates that only 40 percent of all households have functioning toilets.
Household toilets, he said, are especially important to women. ‘Women will not do OD, because they need to protect their dignity and honor, to avoid shame’. There is an increasing demand for separate male and female household toilets, he said. ‘People are generally conscious’, but the number of households ‘is increasing day-by-day’.

A large section of poor households still need help with latrines, but demand is only “medium,” compared to the past, according to the Chairman. During the past fiscal year the union distributed 400 ring-slab sets to poor households. (Some of these reportedly also went to non-poor relatives of the Chairman.) Good quality latrines, he said, are still considered too expensive for most households. He mentioned a price of 15,000 taka (US$187.50), but did not explain the type he was referring to. And, he admitted, there are still places where open defecation is happening.

He said that he hopes to construct two or three public toilets in the near future, but that money is a problem. And in one indigenous neighborhood, where open defecation still is the norm, the subdistrict is planning to construct five or six community toilets for use by approximately 500 people.

Hindu Sweepers – ten men and five women – are available to clean latrine pits in Kusumba Union year-round. They also work in neighboring areas, and even some distant places.

His four principal challenges are: a) Poor people stopping latrine use because of financial problems and/or weak motivation; b) Need for more training of community people, government officials, everyone; c) Absence of NGO-led courtyard discussions to motivate people to use toilets; and d) Damage and leakage of household latrines during the rainy season.

The 2015 Chairman said that his twelve local policemen (chowkidars) watch for problems with village toilets, as do union council members. Most complaints – about polluted water leaking out or broken pans creating bad smells -- come during the rainy season. While there is much less conflict than there was ‘when the OD rate was high’, the Chairman, union council members, and local elites visit homes with problem latrines and ‘try to make people understand the bad impact of these situations’.

During National Sanitation Month in 2014 there was a three-day program in the subdistrict headquarters town, the Chairman said. He participated in that program. Sanitation comes up at two kinds of official meetings: 1) the monthly steering committee meeting of the union council, and 2) a semi-annual meeting of council members, local leaders,
teachers, the imam, and some female NGO group members. At a semi-annual council meeting lists are prepared of households needing help to get or repair latrines. Union chairmen from the surrounding area, the subdistrict administrator, and other subdistrict officers – all ask him for information and suggestions about improving sanitation. The subdistrict chairman also asks ‘many questions’ about sanitation. At monthly subdistrict meetings, however, sanitation problems only come up for discussion during the rainy season, because there is much latrine damage and leakage at that time.

![Latrine parts production centre](image)

The Chairman told us that Kusumba Union is more advanced than others, because of VERC’s work there. But the situation in the four neighboring unions is also very good, more or less the same as Kusumba’s. Union chairmen and council members visit each other’s unions to discuss and observe local sanitation issues.

**Case No. 7. Banshbaria Union**

‘Banshbaria was the first union in Bangladesh to achieve 100 percent sanitation coverage’, the then-Chairman, a retired engineer, told us in 2010. ‘We were pioneers. We began before the central government did’, he told us in English. ‘The government has a 2010 sanitation target, but we reached it in 2004’.
The international NGO, CARE, and a partner organization, CODEC, promoted household latrine use in two of this union’s 18 or 20 villages\(^{33}\) over a ten-year period, from 1991 to 2001 under the SAFER\(^{34}\) Program with enthusiastic support from the same Union Chairman. SAFER was one of the earliest and most innovative sanitation promotion programs in the country, and probably the only one at the time that did not provide any latrine materials or supplies. It was about ‘software’ (education, training, and participatory development), not ‘hardware’.

A couple of years after the end of SAFER the national sanitation campaign began. The union started work under the campaign on its own, and sometime later the national NGO, VERC, came in to help scale up sanitation coverage to the full union with support from WaterAid’s ASEH program. VERC worked in close collaboration with the already well-informed Union Chairman, members, and staff. After the campaign three NGOs (BRAC, VERC, and YPSA) provided follow-up sanitation promotion services in some parts of the union.

The Union Secretary told us in 2010 that during the national campaign, ‘We gave sanitation our full attention. We did nothing but that’. There were 55 WATSAN committees in the union. Imams, other local leaders, and ‘even women’ were in these committees. ‘We persuaded them to start using latrines, to prevent diarrhea and cholera’, he said. The then-Union Chairman said there were many meetings, dramas, and other educational activities. If union residents needed certificates, having a household latrine was required. For example, around five or six notices were given refusing help with inheritance certificates, documents needed for emigration, and so on, until a household latrine was installed. ‘We told them, “This doesn’t just affect you. You’re causing trouble for the whole community if you do not have a sanitary latrine.”’ On 12 December 2004 the Minister came and declared the union officially ‘100 percent’ covered.

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\(^{33}\)Banshbaria has three named sections that they call ‘villages’ (graam): North, Central, and South. Within these are 18 or 20 smaller communities called ‘neighborhoods’ (paaRa), which are similar in composition to villages in other parts of the country.

\(^{34}\)The program changed its name from SAFE to SAFER after the pilot project was completed. See Bateman et al. 1995 and Hanchett et al. 2001 for a detailed review of techniques and outcomes.
The government sent the then-Union Chairman to West Bengal to observe latrines, and he participated in the annual, five-country South Asia Sanitation Conference (SACOSAN) in Pakistan in 2006.

Banshbaria Union is located in southeastern Bangladesh, in Sitakunda Subdistrict, Chittagong District, at the base of the Chittagong Hill Tracts. The western part of the union is affected by high tides and frequent floods, and the eastern part, by flash floods from the nearby hills. CARE first decided to work there after a 1988 devastating hurricane and flood destroyed a number of houses. Residents of this union have more formal employment opportunities than do those in some other regions, because factories (jute mills, for example), ship-breaking companies, and other industrial enterprises are nearby. The port of Chittagong is the most active in the country. Agriculture also provides employment and income. Migrant laborers come into the union during harvest times.

The 2010 Banshbaria Union population was 33,545, according to a WaterAid census. Approximately 48 percent of the union’s approximately 4000 households were poor, according to the Union Secretary.

Our information on Banshbaria comes from three field visits and a household survey. Suzanne Hanchett visited the union in 2000 with a team working on behalf of UNICEF and again in 2001, while doing a final evaluation study of the CARE SAFER program. In 2010 a team of six spent approximately one week there during our study for the World Bank. In 2015 Shireen

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Former SAFER participant and Nathpara resident, Dilip: ‘They reminded us weekly about sanitation. It went on for a long time. We remembered what they said. People visited here to see our achievements’.

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35Shireen Akhter (Field Team Leader), Suzanne Hanchett, Anwar Islam, Emdadul Haque Bhuiyan, Farhana Sultana, and Zohurul Islam.
Akhter interviewed the new Union Chairman, who was elected in 2011. Both he and the previous Chairman live inside the union.

Our 2010 survey found 93.3 percent of households to have improved latrines (including shared facilities). Fifty-five percent of households did not share with any others. And 7.2 percent of latrines were shared by more than three households. Hand washing stations were found at 86 percent of the household latrines, but only 20 percent were located within three meters of the toilet. Soap was observed for hand washing at 41 percent of the hand washing stations. Open defecation was found to be occurring at a moderate level, 36 when we did transect walks in three villages in 2010.

In the three locations where we did the most intensive field investigations, we found important differences in sanitation attitudes and practices. In one Hindu community (Nathpara), where CARE SAFER staff once worked directly, there seemed to be few if any problems with latrine use or maintenance. This was a small and socially unified settlement. The adults we spoke with remembered very well their SAFER messages, and they were proud of their village’s good smell and low rates of diarrheal disease. ‘A latrine is the beauty of the house’ was a local saying.

(Public latrine in Jhelepara, a Hindu fishing community, only used during an annual festival)

36The OD problem was comparable to those of Laharkandi and Rajabari, but not as serious as those of Nijampur, Noudabas, or Kusumba.
In another Banshbaria location (Jelepaara), however, one occupied by much poorer people—mostly professional/caste Hindu Fishermen—we found more sanitation problems: evidence of substantial OD and several broken latrines. This community was on less good terms with the Chairman, who they felt was preventing them from getting electricity. The Fishermen also were burdened by debts from large money lenders who financed ship building and repairs. This community, we observed, was not as socially unified as Nathpara. Like Nathpara, however, it had been covered by the SAFER program, through a partner NGO, CODEC, which does advocacy work on behalf of fishing communities. Concern about sanitation was evident despite the problems. We met one active volunteer, who had worked for many years on sanitation. The union had installed a good quality public latrine for use of visitors attending an annual festival; and all village latrines were said to be cleaned thoroughly at least once a year, in order to purify the village before the festival.

A third Banshbaria place (Doalipaara) we visited had more middle class residents than the previous two. VERC had spent considerable time in this community of some 100 households. ‘Flies and mosquitoes have disappeared from our village now’, a local woman told us. Latrines were said to be repaired promptly when they broke, and upgrades were common. Tube well water is available year-round. Pit cleaners are hired to clean pits. They bury latrine contents after emptying them.

In all the Banshbaria places we visited it was agreed that it had taken time to make the changes. Not all had accepted the new habit of latrine use at first.

Pit cleaners were and are readily available to manage latrine waste. Some are private entrepreneurs, and others are union employees. We interviewed a group of Muslim pit cleaners, poor men who found that this occupation paid better than rickshaw-pulling or day labor jobs, now that latrine use was so widespread. In Nathpara, formerly covered directly by CARE SAFER we found that several Hindu householders routinely cleaned their own pits by running drain pipes into nearby storage holes. In 2015 there were two businesses selling latrine parts and supplies in the union.

During the national campaign and afterwards the then-Chairman had his village police watching out for open latrines and other sanitation problems. In 2010 a village policeman told us that he had served notice on at least 300 people who violated the union’s ‘invisible or undeclared’ rules against OD. It was expected that people with complaints against sanitation
violators would inform either the village police, their ward representative (union council member), or even the Chairman. The week before our visit, for example, someone with an otherwise good latrine was found to have some broken concrete rings, which allowed latrine pit contents to leak out. Chickens were gathering to walk on and eat the feces. This upset the neighbors, who told the village policeman. He went to the home and told them to fix the latrine within seven days, or he would file a case against them. He was giving them some time to solve the problem when we spoke with him. In another case the Chairman went to a village to settle a dispute between two brothers, one of whose latrines was draining onto the property of the other. The Chairman threatened to file a case against the offender at the subdistrict headquarters town, but the offender said he could not afford to do the needed repairs. So the Chairman gave him five rings and a concrete slab, and he hired one laborer to help him dig the pit and did the rest of the installation work himself.

In 2015, however, the new Chairman told us that the village police no longer check up on people’s latrines. (It is possible that detailed field research might reveal more cases, however.) He also had participated in the national sanitation campaign. ‘Many committees were formed at the neighborhood (pāRa) level’, he said. ‘Well-off people donated their labor and money for the community’s development. I also gave money from my own pocket to fulfill the union’s total ODF goal’.

Like his predecessor, the present Chairman sells or gives ring-slab sets to poor households. He told us in 2015 that the union had distributed 50 or 60 sets of three rings and one slab during the past six months. He said that he used union revenue funds, as no ADP funds were available for that purpose nowadays. In 2010 we heard several reports that the quality of union-provided latrine materials was not high; but we were unable to check this point in 2015.

The present situation is not ideal, according to the 2015 Chairman. Many latrines are broken and unusable, he said. ‘The 100 percent ODF situation has changed’. Poor people cannot afford good quality latrines, so they use broken ones. And they cannot pay to clean pits. There are no more of the old, unhygienic types of latrines, however. And there is not as much outdoor space available for open defecation as there used to be, he said. Anyway, ‘People are more conscious. Everyone knows’. But water seals are usually broken. In 2014 there was a survey of latrines in the union’s 4442 households: 86 percent were found to be hygienic, and 14 percent, to have broken pans, no water, and to be unclean.
Any complaints about bad smells, leakage, and so on, are first handled by union council members within their wards. But these matters can come up during formal dispute resolution sessions (sālish), where many people are present. ‘We give advice, but if a conflict worsens, we have the parties come to the union office for help in solving the problem’.

His principle challenges are: 1) Poor people getting free latrine materials that are not of good quality, and which have to be replaced after a year or two; 2) The high cost of pit cleaning, making it unaffordable for poor families; and 3) Latrine rings being damaged by pit cleaners. NGOs help with awareness-raising and micro-credit.

Sanitation issues and projects still are discussed at subdistrict meetings, according to the present Chairman, and the subdistrict administrator (UNO) ‘always talks about the importance of sanitary latrine use’. But he does not prepare formal reports on local sanitation progress to the administrator. He did not tell us whether he participated in National Sanitation Month/Week activities in 2014.

Despite the many challenges, the current Chairman said, ‘We are trying to continue this program’. Other unions lag behind this one, in his view, because they have less active union chairmen, less NGO support, and less public awareness. ‘We are proud to keep our union ODF’, he proclaimed.

**Case Comparison: Nizampur, Kusumba, and Banshbaria, Three CLTS Unions**

These three unions are trail-blazers, widely recognized in Bangladesh as the first to achieve ‘100 percent’ latrine coverage without subsidies, using the internationally known participatory change approach known as community-led total sanitation (CLTS). Sanitation awareness in all these unions is visibly high, and leaders and populations alike are quite proud of their achievements in cleaning up their environments and boosting social dignity. Leaders, volunteers, and ordinary people like to describe their important sanitation advances under CLTS as ‘revolutionary’ changes in their community life.

The three unions’ environments and economies differ. Nizampur is more remote than the other two, i.e., located farther from any urban center. Both Nizampur and Kusumba are located in the arid northwest of Bangladesh, where seasonal water shortages interfere with hygienic sanitation practice. Banshbaria, however, is in the stormy, sandy southeast, where flash floods and other natural disasters regularly threaten man-made structures, such as latrines. Nizampur
and Kusumba are both agrarian regions. Kusumba has brick fields, where outside laborers live and work without access to toilets. Nizampur has a large population of share-croppers working the lands of absentee landlords and living on publicly-owned plots of land leased (perhaps illegally) from local elites. New irrigation methods have allowed triple-cropping of fields, increasing work opportunities for migrant laborers -- and creating sanitation problems. Many Banshbaria residents, on the other hand, find employment in factories, ship-breaking, and businesses connected to Chittagong District ports.

Both Kusumba and Nizampur have large settlements of Santal people, an indigenous, ethnic minority group with insecure rights to the lands they occupy. These settlements have had some personal difficulties joining with others to participate in total sanitation activities. Because of their minority status, they seem to be wary of other villagers and not to feel fully a part of union social life. They have had, and continue to receive, special sanitation interventions by NGOs and union leaders.

Their three sanitation program histories differ as well. Nizampur was an early site of sanitation promotion by the national NGO, VERC, whose approach evolved over the years into full-scale CLTS. Kusumba reached its sanitation goals – moving from almost full-scale OD to general latrine use entirely through use of CLTS community mobilization techniques. Nizampur villages, on the other hand, had gotten latrines from early programs without much participatory motivational intervention. In both Kusumba and Nizampur use of local, low-cost technology was still found in our 2010 study, although many had graduated to concrete ring-slab pit latrines by then. Banshbaria Union had a longer history of participatory, non-subsidized sanitation programming, as some of its settlements went through the CARE’s SAFER program in the 1990s. VERC came to Banshbaria during the national campaign and built on already-high levels of local sanitation awareness. Kusumba and Banshbaria got follow-up support from VERC and other NGOs after the national campaign ended, but Nizampur did not. Union chairmen of Kusumba and Banshbaria were more active in promoting sanitation improvements during our 2009-2010 study than was the Chairman of Nizampur.

Of the three unions, Kusumba was said in 2015 to have the most shops selling latrine parts: eight.37 Nizampur reportedly has only two or three, and its remote location suggests that

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37In 2009-2010 our team identified only four latrine parts sellers in or near to Kusumba.
this might not be enough, if there were a high level of demand for such equipment. Banshbaria also has two businesses in the union, but getting latrine parts from other places is not difficult.

Comparing our in-depth studies of both places, our sanitation study team in 2010 concluded that Nizampur was somehow less effectively promoting sanitation improvement than Kusumba was. We discussed the possible reasons for the apparent differences at the time, and the following points came out: 38

a) Triple-cropping in Nizampur attracts large numbers of agricultural laborers, who are not allowed to use land owners’ latrines. ‘It is a matter of protecting the honor of the women of the landlords’ houses’, according to local reports.
b) Road travel is more convenient from Kusumba. Kusumba is close to its subdistrict headquarters town, but Nizampur is far. The economic situation of Kusumba people seems to be generally better than that of Nizampur residents.
c) Nizampur has many residents living on government-owned land, or they are waiting for the government to give them land on which to settle. Many are confused and upset, not feeling secure. They defecate on the paddy lands of large land owners who live in the distant municipality of Chapai-Nawabganj.
d) The Santal people in Nizampur have a poor sanitation situation.
e) Nizampur is a union with much land. Settlements are far apart and not densely populated. Kusumba is more densely populated, so there is less space for open defecation.
f) The Kusumba Chairman gave strong leadership during the national campaign, and all are proud that theirs was one of the first unions in Bangladesh to become ODF. Even now, Kusumba union leaders are working in a more integrated and dedicated way on sanitation. Nizampur’s elite appears to be more corrupt, though we did not probe deeply on this matter.
g) The NGO that supported Nizampur ended its program there after the national campaign was over, but Kusumba got follow-up support from VERC.
h) The subdistrict administrator in Manda Subdistrict was very supportive of union efforts to improve sanitation.
i) Low-cost latrine technology in Kusumba, introduced by VERC, was maintained, but similar equipment in Nizampur was not.

In our 2010 household survey, however, neither Kusumba nor Nizampur came out with high scores for sanitation. (See Table 2) Both had high levels of OD, relatively weak scores for cleanliness, and inadequate water for hand washing; but Kusumba was better than Nizampur, in having less latrine sharing, more convenient hand washing stations, and more soap observed. Banshbaria, in contrast, was found to have a relatively good sanitation situation: a higher proportion of clean latrines, more soap at hand washing stations, and less OD than the other two. Nizampur had the largest proportion of latrines shared by three or more households (33 percent) of all nine study unions. Responses to our 2010 household survey questions about OD generally supported findings from transect walks. In both Nizampur and Kusumba relatively large percentages (33.3 percent and 40.4 percent) said they knew someone who normally defecated openly. But in Banshbaria, only seven percent said this. (Table 3)

The institutional and social supports for sanitation in 2015 were strongest in Kusumba, despite (or perhaps because of) its continuing need for sanitation improvement. In Nizampur and Banshbaria, on the other hand, these supports were only moderately strong, though perhaps for different reasons. In neither place were the village police said to be actively checking for sanitation problems, but local council members and other leaders helped with negotiations in cases of conflict. Both were supported by subdistrict administrators interested in sanitation progress, and both used some union funds to help poor households with latrine materials and so on. The Banshbaria Chairman in 2015 did not perceive sanitation as a priority, as he claimed that many problems had been solved. He also continued to have a cordial relationship with a supportive NGO (VERC). The Nizampur Chairman was not supported in the same way and seemed generally less concerned with sanitation issues.

**2010 Sanitation Status Rank:**
- Nizampur, *Low*
- Kusumba, *Low*
- Banshbaria, *High*

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38Source: Suzanne Hanchett notes on January 2010 discussion among the following team members: Anwar Islam, Partha Sarathee Ghosh, Emdadul Hoque Bhuiyan, Farid Uddin Ahmed Mia, Kazi Rozana Akhter, Shireen
2015 Institutional Support System: Nizampur, Medium
Kusumba, Strong
Bansshbaria, Medium

Group D. Two Barisal District Unions Formerly Covered by the Social Mobilisation for Sanitation Campaign (SOCMOB)

Case No. 8. Saliabakpur Union

Canals and rivers abound in the coastal areas of southern Bangladesh. These are the places where the mighty Ganges and Jamuna (Brahmaputra) rivers drain to the sea – places where the ebb-and-flow of the tides brings salty water in and out of settled lands. Riverbanks erode. Cyclones regularly threaten man-made structures. No settlement is far from a canal, a river, or a large water body. Until the mid- to late-1990s a traveler along these waterways would have seen every 20 feet or so, a five- or six-foot high wooden frame on stilts, its bottom extended out over a steep canal or river bank, its sides covered with jute cloth, leaves, or plastic. This was the ‘hang latrine’ (jhulonto paikhana or tatti in Bengali), from which human waste dropped into flowing waters. Farther inside the villages one found ‘open’ types of latrines (khola paikhana) – bare earth patches enclosed by mats, plastic sheets, or hanging leaves – set near the boundaries of most residential compounds. Bamboo groves or other wooded areas were popular open defecation places, people often sitting to defecate among the sprawling, above-ground roots of local trees, which came to be called ‘tree latrines’ (gāch paikhāna).
By 1999, this scene had changed dramatically. Most of the hang latrines were gone, replaced by neatly stacked piles of cement rings which confined waste that dropped from the familiar wood-framed structures. This change resulted from a tumultuous and sometimes violent campaign, Bangladesh’s first attempt at national-scale sanitation problem solving, the Social Mobilisation for Sanitation campaign (SOCMOB).

Saliabakpur Union is part of Banaripara, a southern Bangladesh subdistrict that became famous in the 1990s during this campaign. SOCMOB was started in 1993 by the Department of Public Health Engineering (DPHE) and a group of NGOs in partnership with UNICEF. UNICEF launched a national publicity campaign, placing ads and features on radio and television about the health benefits of latrine use and hand washing. District and subdistrict administrators were energized and trained to give sanitation special attention. DPHE and NGOs set up many ‘village sanitation centres,’ where latrine models were on display. The NGO Forum for Drinking Water and Sanitation, leader of a coalition of NGOs, took responsibility for 20 subdistricts; and DPHE implemented the program directly in approximately 420 others.\(^\text{39}\) School children in all parts of Bangladesh saw videos and had classes on the importance of latrine use and hand washing. Banaripara subdistrict, one of the NGO Forum’s most intensive working areas, was widely

\(^{39}\) There are 492 subdistricts altogether in Bangladesh, as of 17 December 2017.
recognized for its aggressive, largely successful approach to sanitation change. Brigades of school children, led by their teachers, roamed the countryside in search of ‘hang’ or ‘open’ latrines, setting fire to their leafy enclosures or breaking their walls. Village police and other sanitation zealots joined in and formed their own vigilante-type groups to enforce new standards and protect waterways from pollution.

The official purpose of SOCMOB was to ‘promote behavioral development’ at the community level, not to do service delivery. The emphasis was on motivating people to build household or community latrines. UNICEF designed the program with three principles in mind: (1) partnerships with other organizations, (2) a national communication campaign, and (3) involving private businesses.

In one southwestern district, Jhenaidiah, an NGO developed mobile village sanitation centers, which shifted from one bazaar to another during the year, to create demand. ‘Some small entrepreneurs in the countryside are now feeling encouraged to start business of producing ring-slab’, said one report.40 (Hasan 1997:57) Women were trained in latrine manufacture and tube well maintenance in several other places. (Ibid: 17-18)

Though it was a national-scale program, some designated regions got special attention in an ‘accelerated district approach’. One of these was the southern coastal belt region, and within it, Barisal District, especially Banaripara subdistrict and all of its unions, including Saliabakpur’s 13 villages. SOCMOB continued in force until 1996, officially ending in 1998.41

Union chairmen were at the center of all SOCMOB activities, just as they were in the next wave of sanitation promotion, the government-led National Sanitation Campaign of 2003 to 2006. In 2010 our study team found the Saliabakpur Union Chairman, a resident of the area, still to be working actively and effectively on sanitation issues. He told us that the union council, other village leaders, NGOs, imams and others (family planning staff, village police, and local organization representatives) held a joint meeting in March 2005 in response to the government’s November 2004 declaration that all households in the union should have sanitary latrines. They resolved to achieve the goal. ‘All meeting participants took an oath and kept our hands to each other’, the Chairman told us.

40The mobile sanitation centre was a 1995 project of the Association for Integrated Socio-Economic Development for Under-Privileged People/AISEDUP.
ADP funds were used, together with 100 voluntary contributions from union residents, to purchase ring-slab latrine sets for distribution to poor families. The union was divided into 41 working ‘units’, and responsibility for motivating people, collecting information, and so on, was given to ‘unit members’. The 2010 Chairman explained, ‘They did a survey to identify open latrines and identified poor families who could not afford to pay for improved latrines. They burned and broke down sub-standard latrines and gave poorer households three rings and a slab as a replacement’. He observed students and the village police burning more than 200 open latrines. People welcomed this activity, he said, because it was being done for the common good. The Chairman personally gave more than 50 ring-slab sets to destitute families, because, he said, ‘One open latrine victimizes one lakh of people’. ‘This was a big revolution’, he said. Since that time, ‘People understand everything about latrines and not defecating in the open. Their consciousness is high, and ‘social internal pressures’ affect family life. Before settling a marriage arrangement, for example, parents check on the bāRī’s latrine’. There was no special NGO follow-up on sanitation issues in Saliabakpur after the National Sanitation Campaign ended.

Our information on Saliabakpur Union comes from three field visits (in 2000, 2010, and 2015), a 2010 household

‘Nowadays no one comes to do anything about open latrines. My wife and I are very annoyed with our neighbor, Mujib*. A few weeks ago, I called the village elders together and told them that Mujib’s open latrine is affecting my family and my children. Women can’t cook because of the bad smell. So he must arrange a proper latrine. How he does it is not my concern, but he can no longer defecate in his open latrine, or I will bring a case against him. We threatened him, but in vain. He still has not installed a good latrine. This is frustrating. We have tried to make him understand. We threatened him. The last remaining thing is to beat him up, but that is not possible’.  
– Comment by a participant in a group discussion, Krishnapur Village, Saliabakpur Union, 9 November 2000 (Laila Rahman notes)  

*Pseudonym

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41Background information on SOCMOB was kindly provided by Ms. Dipa Sen, UNICEF Program Officer, in July 1997, and M.S.A. Rashid, Executive Director of the NGO Forum for Drinking Water and Sanitation in September 2000. (Suzanne Hanchett notes)
42This is the only subdistrict in which we heard reports of such activity during the National Sanitation Campaign. Apparently local people felt it was appropriate to use tactics that had been effective during SOCMOB.
43A lakh is 100,000
survey, and a 2015 interview by Anwar Islam with the present Union Chairman, who was first elected in 2011.44

In 2000 Suzanne Hanchett led a team studying sanitation in Saliabakpur on behalf of UNICEF.45 This team met with villagers, the then-Union Chairman (recently elected), who told us that the union had a large percentage of ‘educated people’, possibly 80 percent. We also met with DPHE engineers, school teachers, and health workers. Memories of the heady days of SOCMOB still were strong, and almost all of those we met said the movement had a positive effect on health and the environment. Spot-checks on some household latrines and group discussions showed that people, especially in a poor community, were still becoming accustomed to latrine use. A simple pit covered with a log served as a latrine in some village houses. Such facilities were causing problems among neighbors, who had learned from TV and radio that unhygienic facilities put everyone at risk for diarrheal diseases. Some ring-slab latrines already had been replaced several times because of storm or flood damage. The union had built two public latrines in bazaars. Comments on latrine burning and destruction by students, village police, and others were mostly positive. One man in a poor village (Krishnapur) said he felt bad at the time they were burning household latrines, but, ‘Now I think it was a good thing’. Another man in the same group discussion said, ‘It was good. Because of that, the environment has gotten better. People are now on the right track. It wasn’t done for anyone’s personal interest. It was for the interest of the country… of all families’. A woman living in the union’s central village, Saliabakpur, said that very few households had latrines when she first moved there as a young bride. ‘Most of the people just defecated on the open ground’. But SOCMOB activities motivated many households to install latrines. ‘Some of the families who did not install latrines at that time, after a while they did install latrines, because their neighbors influenced them’. People in another village (Shakharia) remembered campaign slogans: ‘Break the hang latrine and build a hygienic latrine’, and ‘Open defecation causes diarrhea’. Before SOCMOB, this group said, 90 percent of the households used hang latrines. Since then, more and more ring-slab types were gradually introduced, but there still were a few simple pit latrines to be seen here and there.

44Anwar Islam did multiple interviews, during a 2015 field visit and, later on, by telephone.
45Laila Rahman was the principal field interviewer and focus group facilitator.
In 2010 a group of four researchers spent five days in Saliabakpur doing in-depth interviews and observations during our World Bank sanitation study. In 2015 two of these same team members returned to Saliabakpur by boat, to follow-up on earlier observations. They also visited Bisharkandi, a more remote union in the same subdistrict during this field trip. (See Case Study No 8 below.) National political conflict in 2015 made other types of travel dangerous, so our field visit possibilities that year were limited.

(Former OD site with a latrine now in it)

In 2010 the Saliabakpur population was 21,281, around 25 percent poor, according to union data. This is a smaller percentage of poor people than in our other study unions. Poor people were said to be clustered in three specific villages, but these were not covered by our household survey. Our survey in Saliabakpur found 93.3 percent of all households to have improved/shared latrines, 39 percent of which were clean. Eighty-two percent of the latrines were used by only one household. Sharing by three or more households was only 2 percent. Seventy-five percent of the latrines had hand washing stations; 32 percent of them were within three meters of the latrine, and at 12.5 percent soap was observed. There was no evidence of open defecation in the three Saliabakpur villages visited by study teams in 2010. Some agricultural laborers were said to be defecating in open places elsewhere, but we did not observe this.

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46 Tofazzel Hossain Monju (Field Team Leader), Kazi Rozana Akhter, Emdadul Haque Bhuiyan, and Anwar Islam
47 Anwar Islam and Tofazzel Hossain Monju made this field visit with support from the CLTS Learning Hub, Institute for Development Studies, University of Sussex.
The union was distributing ring-slab latrine sets to poor families at the time of our 2010 study, but several local people, including one union council member, remarked that they broke too easily, because of the low-quality of their concrete. A few people had been injured when latrine pans cracked, and some even fell into latrine pits.

The 2015 Chairman told us that every year the union provides 100 ring-slab sets (three concrete rings and one slab) to ‘ultra-poor’ families recommended by council members, local police, or elite union residents. Twenty-percent of ADP funds are used for replacing household latrine parts and for installing or upgrading latrines in bazaars or mosques, he said. ‘Everything is clean’, he assured us. ‘There are no houses without ring-slab latrines’. ‘Almost half the well-off households have installed proper (pucca) latrines like those in towns, ever since the most recent campaign. Before that, he estimated, only 10 percent of the elite families had such facilities. (He may have been referring to septic systems, but his meaning was not clear.)

Three or four Sweepers are available to clean latrine pits in Saliabakpur. According to the 2015 Chairman, there are not enough pit cleaners to meet local demand. The union has not appointed anyone to manage public latrines, he said.

‘If a latrine breaks for any reason, I don’t wait’, he told us. ‘Sometimes incessant rain or storms damage latrine structures. I immediately allocate funds from the ADP without taking permission from the subdistrict. After the work is done, I take permission’. In our 2010 field interviews, we also heard a number of reports of home owners rapidly repairing damaged latrines after storms, which frequently afflict Saliabakpur houses. His local police ‘always watch out for broken latrines or the unhygienic, old ‘open’ types’. The previous Chairman also had told us, in 2010, that the union practices ‘continuous checking’; and after two recent, devastating cyclones, Sidr (November 2007) and Aila (May 2009), many poor households reverted to using ‘lower-level’, simpler types of latrines.

In all Saliabakpur bazaars and mosques, he reported, there are double-pit, five-ring public latrines. Thirteen of these ‘DPHE model’ public latrines were installed in the union in 2014 with funds from the subdistrict.

Many latrines still are installed on the banks of canals that run through Saliabakpur. The Chairman said these are convenient, as many houses are set along the roads or footpaths set alongside canals. The latrines are ring-slab types, of course, but leakage is always a risk. Now there is a wall to prevent latrine contents from seeping into the canal. During high tides,
however, seepage from latrine pits still is difficult to avoid. This is a particular sanitation challenge the union faces, according to the 2015 Chairman. He repeated a serious concern expressed in some of our 2010 discussions with villagers, namely, the importance of latrines’ not polluting canal water. One boy had told us, for example, that he did not worry anymore about bathing in canal water. ‘Canal water is now clean’, he said. ‘Five or six years ago we saw a lot of feces floating in the canals, but now there are none’.

The 2015 Chairman said that all the neighboring unions, like his, are ‘very cautious about latrine leakage problems’. They discuss sanitation at monthly meetings with the district administrator, who ‘gives much attention to sanitation issues’. If local conflicts occur about neighbors’ latrines, the village police, union council members, and the Chairman sometimes discuss the situations at ‘resolution meetings’, he told us.

The most serious sanitation problems facing his union, he said, were (1) possible seepage of latrine contents into the canal and (2) insufficient numbers of household latrines for expanding and dividing families.

Saliabakpur Union has been observing the government-declared National Sanitation Month every October for many years, according to the 2015 Chairman. Programs are organized ‘at all levels, from central government, to districts, to subdistricts, unions and wards’. In 2014 Saliabakpur observed one day with a rally, discussions, and so on. ‘We talked a lot about the bad consequences of open latrines and leakage problems’, he said. The subdistrict administrator, the Civil Surgeon, students, NGOs, council members, imams, and community people – all participated in this event. Saliabakpur, he concluded, ‘is the best union in a very good subdistrict’.

Case No. 9. Bisharkandi Union

Like Saliabakpur, Bisharkandi Union is part of Banaripara Subdistrict, famous for its 1990s SOCMOB campaign. Unlike Saliabakpur, however, Bisharkandi is located far from the subdistrict headquarters town or any other municipal center. As a physically remote area, Bisharkandi has been less thoroughly affected by sanitation programs and projects over the years than Saliabakpur. The union was declared to be ‘100 percent’ covered by latrines in 2007 after the National Sanitation Campaign, when DPHE-Danida funded NGOs (Ahsania Mission and LTN) to work there.
This union was settled by a group of fishing families approximately 100-150 years ago, when it was nothing more than a group of empty islands scattered across a watery landscape. ‘From then we started to struggle with nature’, a group of villagers told us in 2000. Wetlands (beels) and canals are all around, and the Belua River runs through the union. Boats are the main form of transportation in and out of the union, and even within it, although in recent years a few roads and bridges have been built, making it somewhat easier for residents to travel from village to village. A 15 km. road was under construction in 2015. This road would one day connect the union to the subdistrict headquarters town, Banaripara, but it took us three hours by trawler plus one hour on the road to make the trip in 2015. Hurricanes, severe floods, and excessively high tides regularly affect villages in the region, though settlements are protected to some extent by embankments. Bisharkandi residents frequently must deal with natural disasters that destroy man-made structures, including latrine stalls.

(Boat used for ‘transect’ observations of Bisharkandi Latrines)

In 2010 Bisharkandi had a population of 21,253, distributed across six villages. The majority of the population is poor. Union staff estimated the poverty rate to be 70 percent during our first visit. People’s shabby clothing and numerous crudely built houses with thatched roofs suggested that this estimate might be correct. Early settlers tried rice cultivation, but it was too difficult in this landscape. The main livelihoods are agricultural labor, fishing, fish trading, and
vegetable cultivation. During the time we have known this union, it has become a significant provider of vegetables to Bangladesh markets. Migrant laborers come to Bisharkandi twice a year\textsuperscript{49} to plant and harvest crops. In 2009 local people estimated that some 500 had come during the past year. Rising vegetable prices have created some degree of local prosperity. One vegetable farmer told us in a 2015 group discussion, ‘In the past five years our economic situation has improved. Our children are going to school’. He and another farmer in the group both said, ‘We don’t starve anymore... we can arrange three meals every day’.

Our information on Bisharkandi comes from field visits in 2000, 2009, and 2015. In November 2000 Suzanne Hanchett led a team of five persons,\textsuperscript{50} who did focus group discussions, key informant interviews, and structured observations on sanitation and water use for four days in three Banaripara unions: Saliabakpur, Baishari, and Bisharkandi. Bisharkandi was also visited by a reconnaissance team of four\textsuperscript{51} during our 2009-2010 sanitation study. We did not do a household survey in Bisharkandi in 2010. In 2015 two members of the original sanitation study team, Tofazzel Hossain Monju and Anwar Islam, visited Bisharkandi and Saliabakpur again. Tofazzel Hossain Monju interviewed the Chairman personally during that visit and later on, by phone.

Because we did not have any household survey information on Bisharkandi, we used a rapid appraisal technique to check on the condition of local latrines in February 2015. Tofazzel Hossain Monju moved through the union according to the ‘transect’ method, but in a boat in the Balu River, not on land. Moving down the river and along canal networks, he searched for latrines to observe along the river/canal banks and nearby paths of two different villages, Bisharkandi and Morichbunia. He did structured observations at a total of 22 latrines, stopping to discuss equipment and latrine use issues with local people near to each latrine. Twenty of those he surveyed were household latrines, and two were public latrines in bazaars. Half of the household latrines had been installed during the previous five years (2009-2014), and half, earlier, between 2004 and 2009. The two public latrines both had been installed in the earlier

\textsuperscript{49}Poor households are, however, distributed unevenly around the union. One village, where the 2015 Chairman lived, was said to have only 40% poor households, when our 2009 reconnaissance study was done.\textsuperscript{49}August-September and November-December
\textsuperscript{50}This study was done under contract with UNICEF and the London School of Hygiene and Tropical Medicine (Joy Morgan, Program Officer). Study team members were Laila Rahman, Kamal Ahmed, Dilruba Begum, Hemayet Hossain, and Shahnaz Akhter Khanun. A UNICEF Program Officer, Ms. Shirin Hussain, accompanied the team during the November 2000 visit.
\textsuperscript{51}Farid Uddin Ahmed Mia (Field Team Leader), Anwar Islam, Emdad Hoque Bhuiyan, and Partha Sarathee Ghosh
period. All of the household latrines had been improved and maintained to an acceptable standard. Pits had been cleaned in eight. Superstructures (stall-housing) had been repaired in 11, and pans and water seals, in nine. All 20 household latrine owners said that they had done repairs in order to prevent leaking-out of pit contents. The owners also said that it was important to use extra water, to keep the latrines clean and prevent spread of bad smells. The latrines are installed along waterways next to village lanes where people often walk, and ‘People no longer tolerate bad smells. If a latrine is not clean, it is not only the owner who is criticized’, they said, ‘but also the whole neighborhood (pāRā) and village’. Public latrines in bazaars were both old. Neither had been upgraded or otherwise improved since installation, but both had had pits cleaned and pans and water seals repaired. These observations indicated that the sanitation situation was generally positive.

The SOCMOB and national sanitation campaigns both reached Bisharkandi, but sanitation promotion activities were less vigorous here than in Saliabakpur. We discussed SOCMOB with local people during our first visit, in 2000. The adults we met at that time all remembered the campaign, but its impact was not yet fully clear. One union council member told us at that time, that the campaign ‘was designed for the unions where communication is good’, not for a place like Bisharkandi. ‘No real sanitation program or Social Mobilisation Program, or whatever you call it, actually took place in Bisharkandi Union’, he said. One group told us that intense pressure against open or hang latrines had ended. Approximately five NGOs were providing micro-credit and doing some sanitation awareness raising at that time.

According to local reports on SOCMOB, the union had been visited only once by government officers (DPHE staff) from Banaripara during the campaign. But Family Welfare Assistants (on a nutrition project) and Family Welfare Visitors (health and family planning) were frequent visitors, and they regularly urged everyone to stop using ‘hang latrines’ or defecating openly on tree roots and to start using better toilets. Ordinary people were happy to entertain the Union Chairman and union council members, at that time. Such visitors had never before come to their villages, they said.

The most memorable message of the SOCMOB campaign in Bisharkandi was that open defecation polluted canal water, which was used for all household purposes. People recalled hearing messages, mainly on radio and TV, about toilet use and hand washing with soap. Some housewives told us that diarrhea was less common than before, because they now understood the
connection between illness and sanitation. Models of ring-slab pit latrines were demonstrated at the union headquarters. Many hang and open latrines -- possibly as many as 1200, according to local people -- had been burned by teachers and their student brigades or by village police. ‘They did not just burn the latrines of poor people’, a union council member said. ‘Some middle class and rich people’s latrines also were destroyed’. People were warned that subdistrict police would come and arrest them if they did not install household toilets. Nonetheless, there still were a few hang latrines visible in 2000. And at least two members observed otherwise ‘sanitary latrines’ draining out into canal or river waters.52 One was told, ‘There are more than 1500 ring-slab latrines in the union now, but most of them are connected with the river or canal somehow’. A simple pit latrine with bamboo sticks covering the hole, however, not the ring-slab type, was the preferred, low-cost option chosen to replace hang or open latrines at that time.

In 2009, when our second team visited Bisharkandi, the national sanitation campaign had come and gone. Many home-made pit latrines had been upgraded to ones with concrete rings and slabs. Transportation was still a problem. The Union Chairman at the time, elected in 2002, appeared to have little or no interest in sanitation promotion. He maintained a residence in the union, but he reportedly kept his family elsewhere and was not on duty every day.

When the national sanitation campaign began there in 2003-2004, the implementing NGOs found some 20 percent of the households to have simple pit latrines. They also observed many hang latrines along waterways. Under a previous DPHE-Danida water supply and sanitation project, all households benefitting from deep tube wells (20 households per tube well) were required to install ‘sanitary latrines’. This requirement had stimulated construction of many household latrines. After the campaign ended, the union continued to distribute latrine materials (three concrete rings and one slab each) to ‘deserving poor’ households.

Maintaining the existing latrines was said to be a challenge in 2009. And some unknown number of families were breaking latrine rings and letting contents run out into ditches or canals when pits filled up, as they had during our earlier visit. Simple pit latrines were still in use as well: the union estimated these at 35 percent of all households. Two severe storms had hit the area in recent years, Sidr (in 2007) and Ayla (in 2009), reportedly destroying around 30 percent of all latrines. Union staff reported that ADP funds were used to replace or rebuild them. Businesses in three nearby markets were providing latrine materials, but pit emptying costs were

considered unaffordable for the majority poor population. The team observed evidence of a moderate amount of open defecation in bamboo groves and along canal or river banks. Informal discussions produced an estimate that around 10 percent of people were defecating openly. Two public latrines were found to be poorly maintained and dirty. Walking in one market, a team member encountered two young men who expressed anger at the Bazaar Committee for allowing public latrines to ‘always spread bad smells around and pollute the atmosphere’. One of the caretakers had quit his job because he found it degraded his family dignity.

Improvements were noted in our 2009 visit: an increase in the number of ring-slab latrines, better latrine maintenance, installation of latrines in almost every newly built home, and the complete absence of hang latrines.

In 2015 Tofazzel Hossain Monju met with the current Union Chairman. His family lives outside of the union, but he said that he stays in the union most of the time, however. He expressed pride in the union’s clean environment. He said that there were few or no extremely poor people now, because of increased employment opportunities for young women in the garment industry and improved vegetable cultivation techniques.

The most critical sanitation issue in his union, he told Monju, had never been open defecation on land. Rather, it was hang latrines polluting the water of canals, river, and wetlands. All hang latrines are now gone, he claimed. But he and his council members estimate that only 50 percent of household latrines are functional – meaning, not dirty or broken. The easiest sanitation problems have been solved, but ‘Now we must ensure 100 percent hygienic installation and latrine use. We have not adequately discussed how this second stage goal will be achieved’, he said.

NGOs, he said, had been helpful with sanitation in the past, but those now present are emphasizing micro-credit and not working on sanitation. He opined that the absence of NGO support was ‘slowing down the progress of sanitation in our union’.

While there are no NGOs working on sanitation anymore, the Chairman said, ‘progress is on’ because of changed standards of social life. ‘If you have a bad latrine’, he said, ‘you cannot invite anyone. You will be isolated. Previously people were used to bad smells. Now their noses have become sharp’.

Although the Chairman said there were ‘no staff or volunteers’ working on sanitation in Bisharkandi in 2015, Monju did meet a man who had worked as a sanitation promotion volunteer
before and during the national campaign. He was now serving as a union council member, and he felt that sanitation was very important. This ‘natural leader’ had much to say about promotion of hygienic latrine use, which he called ‘my favorite issue’. He had been president of a village committee formed by the DPHE-Danida program after 2000; and he said he still has ‘a good relationship with Caritas’, an international NGO active in the region.

This man has observed a great change in attitudes during the past three or four years. Local people, he claims, are improving latrine-use habits on their own ‘without much institutional support’ from the union or other sources. ‘Some poor households consider a good latrine to be essential, so they are not waiting for free latrines from the union council’. ‘People in their own way have decided that open defecation is bad for them, and that a bad latrine demeans their dignity. So they have stopped crude/open (kacca) latrine use and started to share hygienic latrines with close relatives, such as a brother or an uncle’. The movement is ‘more informal and social than formal or institutional’. The use of ring-slab latrines with intact water seals is ‘improving slowly and steadily’. Construction quality, design, and installation techniques also are greatly improved, he said. But pit cleaning is still done manually by Sweepers, with no particular changes in technique.

Natural hazards -- floods and storms -- constantly afflict this union. Formerly people just defecated in open water at such times. ‘In the past people perceived fast water flow to be so dynamic, that feces [and pollution] would move away. But now I think people’s minds are free from these old ways of thinking. They want to have latrines that are safe even during floods and storms. So they build latrines in high places, where storms or floods cannot affect them’, he said.

He likes to spread good sanitation ideas from one place to another. ‘Sometimes it is very difficult to stop leakage or overflow from latrines’, he explained. ‘But once I found a latrine owner who had placed a mat next to his latrine. It served as a buffer to stop leakage. I advised others to put such buffer walls near their latrines, and now my whole ward is doing this’.

Bisharkandi Union continues to distribute concrete rings and slabs, even though the neighboring unions have stopped doing so. The 2015 Chairman says that without such a distribution the union would ‘become ineffective and non-involved’ in sanitation promotion. He said there is high demand for the union to distribute free latrines to poor households. But there also is some question about whether those making the demands are as poor as they claim to be. ‘Low income is not the only criterion, however. We also give to widows and female-headed
households’. The Chairman did not have a count of the numbers of latrines distributed. ADP funds are used to pay for this service. People without good latrines face ‘social pressure from both relatives and the community’, he said. ‘So demand is genuine and reasonable’.

The 2015 Chairman observed that in the past few years Bisharkandi has moved from being ‘officially ODF’ to being ‘actually ODF’.53 Gaps, such as open defecation and crude latrines, have been taken care of. ‘Now you don’t find any feces, not even on isolated paths. Nor do you notice any bad smells or leakage of latrine pit contents’. Repeating a comment made by the union council member, he said ‘A bad latrine and bad sanitation degrades your status’. There are three latrine sellers in nearby markets, two inside this union and one in a neighboring union.

In the past village police collected information and informed people about union rules on sanitation, according to the 2015 Chairman. But they are not checking regularly now. Union council members respond to complaints about bad smells or leakage. Poor households are directly reprimanded and warned, but rich and influential families are contacted only ‘through middle-men’. Sanitation problems have not come up in formal dispute resolution (sālish) sessions.

No Sweepers live inside the union, but they come when called. Poor people, the Chairman said, do not use Sweepers to clean their latrine pits. Rather, they clean them themselves, usually late at night, to avoid being seen doing this polluting work. ‘Every house uses a pit latrine, and they do fill up’, he pointed out. He suggested that some kind of pit-cleaning vacuum or other machine from the subdistrict would be very helpful. Because land is so scarce here, digging new pits is not feasible. ‘We need to concentrate on this issue’, he said.

His principal challenges are: 1) Increasing installation of hygienic latrines and promoting hygienic use of them. Water seals are broken. Latrines are not clean; and 2) The absence of union policies, resources, or action plans to address sanitation problems.

The subdistrict statistics office occasionally requests information from the union on latrines and tube wells. The Chairman said he had not attended monthly meetings in recent months because of political conflicts in the area, but subdistrict meeting discussions mostly concern ‘ministry instructions and budget allocations for public latrines in markets, things like

53ODF means ‘open defecation free.’
that’, he said. The subdistrict administrator, however, ‘advises us to continue spending money on sanitation, because this is a remote and backward union’.54

During National Sanitation Month 2014 there were meetings in schools and a rally in the subdistrict headquarters town. The Chairman and union council members joined in these activities, but the union does not have funds to conduct events at the union level. The Subdistrict Chairman came forward during Sanitation Month last year, but he is not otherwise working on this issue, according to the 2015 Chairman.

Compared to neighboring unions, Bisharkandi is more or less similar, said the 2015 Chairman. ‘But we are ahead, in terms of free latrine distribution. Others have stopped, but we continue. Considering that we are surrounded by water, we are doing very well. Hang latrines are all gone’.

Case Comparison: Saliabakpur and Bisharkandi, Two Barisal District SOCMOB Unions.

Like Banshbaria and Noudabas, the information promulgated during the national sanitation campaign in these two unions was not news to most residents. All four unions had experienced a sanitation project or program during the 1990s, though with different degrees of

54This is the same subdistrict administrator as that of Saliabakpur.
intensity and scale. Sanitation awareness seems to be higher in this subdistrict than in most others.

Environments, economies, and social life in Saliabakpur and Bisharkandi differ considerably. While both are in the southern district of Barisal and subject to regular cyclones, floods, and other extreme weather events, Saliabakpur is more centrally located and has more access to urban amenities than does Bisharkandi. The leadership seems to be better connected with the subdistrict and other government structures. The need for a three-hour boat ride to get to or from a town severely limits Bisharkandi residents’ livelihood options. After settling in the area 150 years ago, Bisharkandi people struggled with extreme poverty until they devised ways of efficiently cultivating vegetables to feed national demand. Changes in the local economy since our initial contact with this union have been dramatic and visible.

Despite their differences, both unions experienced the rush to eliminate hang and open latrines during the 1990s, when teachers led gangs of students to burn or break them down, and village police and others joined the fray. By the time of our first visit in 2000 most (but not all) crude latrines had been replaced by ring-slab sets, and people were happy to tell us that their canals and river waters were no longer polluted by human feces. Like all rushed campaigns, however, SOCMOB and the national campaign left unfinished business that is still being dealt with.

As is true in the CLTS unions, social dignity in this region is very strongly associated with having satisfactory latrine arrangements. Although its location is remote, we found in Bisharkandi a local leader who had been trained as a volunteer sanitation promoter by a DPHE-Danida supported NGO during the national campaign. This man, now a union council member, continues to feel inspired, and to deal with sanitation problems such as pit leakage. He does what he can to spread good ideas around his union. The Bisharkandi Chairman’s proud comment that his union has moved from being ‘officially ODF’ to ‘actually ODF’ reveals his genuine interest in sanitation and its benefits. In Saliabakpur memories of SOCMOB and the national campaign are likely to be more frequently shared by the more centrally located people and their leaders.

These are the only unions in our group of nine where we have not ourselves observed evidence of open defecation, although some was mentioned in our Saliabakpur household survey (and also by a few people in personal interviews). A large proportion of Saliabakpur survey households (82 percent) had only one family using the latrine and hand washing stations with
water available (82 percent). Soap, however, was observed in only 13 percent of the facilities. (Table 2) Compensating for our lack of survey data, observations during our ‘transect’ boat ride through Bisharkandi indicated that the majority of latrines are in good condition. Unlike the other unions in our study group ‘open defecation’ (OD) was not entirely a problem on land in Saliabakpur and Bisharkandi. It also was a problem of hang latrines’ allowing human feces to pollute cherished waterways. Both 2015 chairmen expressed serious concern about continuing to prevent leakage of latrine contents into waterways.

These are the only two unions in our group of nine that continue to use ADP funds to provide latrine supplies to the population. The Bisharkandi Chairman suggested that this was because of the union’s remote location, but both unions share vulnerability in the face of natural disasters. Poverty rates seem to be very different in the two unions. Bisharkandi data was not available, but we have found substantial evidence of poverty there. Saliabakpur’s population is said to be only 25 percent poor.

Like Laharkandi and some of our other study unions, Saliabakpur distributed latrine parts made with poor quality concrete, and these broke down soon after installation.

Social and institutional supports for sanitation improvement differ in the two unions. Saliabakpur has a stronger system of checking for problems, and apparently a closer connection to the supportive subdistrict administrator. Both of the chairmen are proud of taking initiatives to help their populations with latrine repairs and replacement. But Saliabakpur seems to be more involved in sanitation discussions with government and other elected officials. Saliabakpur also organizes its own rallies and other events during National Sanitation Month, while the Bisharkandi chairmen mentioned participating only in events at the subdistrict headquarters town.

**2010 Sanitation Status Rank:** Saliabakpur, *High*  
Bisharkandi (no survey), *Medium (?)*

**2015 Institutional Support System:** Saliabakpur, *Strong*  
Bisharkandi, *Weak*
Conclusions

Summary Findings on the Nine Unions

Each union is unique. And Bangladesh has its own structures and systems. But many of the human processes that carried these places to full sanitation coverage and beyond are similar to those in other places and countries. We expect that any reader concerned with sanitation issues will see commonalities with their own experiences in at least some of these local stories.

Each of the nine unions has its special history and circumstances. They do not represent a statistically representative sample. They help us to understand possibilities, not probabilities. Case studies are useful because they shed light on the processes and dynamics that underlie statistical trends. Having visited all of the places one or more times, systematically using rapid rural appraisal study techniques together with statistical surveys, we have been able to gain useful insights into local processes and dynamics.

Each of these cases shows some backsliding, but this is not to be taken as a sign of failure or early implementation mistakes. Rather, it shows how very difficult it is to continue and expand satisfactory sanitation practices on a large scale. As mentioned earlier, the union is a relatively large, socially diverse working area. Economic and demographic changes affect it. Gaps, slippage, and unfinished business are inevitable.

Open defecation, found to be a serious problem in three unions (Noudabas, Nizampur, and Kusumba), is, of course, a cause for concern. It was found to have various causes: e.g., overuse of household latrines, no provision for toilet needs of migrant labor groups or nomads, and weak motivation to use toilets. Saliabakpur is the only one out of these study unions\textsuperscript{55} where we did not observe any evidence of open defecation during our field visits; nor was it mentioned by Saliabakpur survey respondents. (A few survey respondents in the other unions did mention household members’ defecating in the open.)

These cases contrast in several ways – environmentally, economically, and programmatically. Five of the chairmen we interviewed in 2015 had fairly current information

\textsuperscript{55}We did not do transect walks in Bisharkandi in 2009-2010 during our original study, but we did search for signs of open defecation in a 2015 field visit and found none. We did not do any detailed observations on OD in Gunaigachha.
on their unions’ household latrine coverage, and four did not. The approaches first used to reach full latrine coverage also contrast. (Table 1) For five unions in this group, the national campaign was most people’s first introduction to the idea that defecating outdoors causes diarrhea and other health problems, but four others had already experienced multiple sanitation campaigns, programs, or projects.

All of the union chairmen mentioned problems with breakage and leaking of pit latrine rings and/or slabs. The concrete is vulnerable to storm damage, especially when not protected by roofs. And the concrete in some low-cost latrine parts (often those distributed for free to poor households) is too fragile to last for more than a year or two. The absence of a roof on the structure over the latrine increases risk of damage during storms or even in normal monsoon rains. But the percentage of household latrines with roofs was found to vary widely among the eight unions covered by our 2010 household survey: ranging from 15 to 85 percent. (See Table 2)

Challenges mentioned by the 2015 union chairmen are associated with social or economic factors and technical ones, as much as with climate or environment, challenging though the environment is in some unions. In places such as Barisal District, where cyclones and serious floods regularly damage homes, families committed to household toilet use seem to make repairs on a timely basis, even if they cannot afford to replace expensive equipment. Social and economic circumstances, however, seem to be even more important to the sustainability of good sanitation practices. Family growth and the household division that accompanies it is a perpetual, ongoing process related to latrine-sharing (temporary or permanent) and struggles to maintain hygienic conditions.

In some of these cases the local economy draws in migrant laborers every year to harvest crops, and in no case has the union devised a satisfactory way to accommodate their defecation needs. The urbanization of Rajabari Union is happening in other unions throughout Bangladesh, or at least in parts of some unions, where poor populations live in congested settlements and latrine sharing and pit-filling pose serious health challenges. Two of these study unions are camping locations for the nomadic peoples called Bede, who may live in tents on the outskirts of

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56Those with current information were: Gunaigachha, Rajabari, Kusumba, Noudabas, and Banshbaria. Those without were Nizampur, Laharkandi, Saliabakpur, and Bisharkandi.
the union for part of each year. Bede may also live in boats, if their seasonal migration routes involve wetlands areas.

None of the eight unions for which we have household survey data was doing well enough with hand washing and soap. (Table 2) In 2010 we found soap at only 13 percent to 41 percent of hand washing stations, although 75 percent to 94 percent did have hand washing stations associated with latrines. In only one union were more than half of the hand washing facilities located within three meters of the toilet (Kusumba, with 60 percent). We were not able to update this information in 2015, but it deserves further attention in almost all cases.

The Roles of NGOs and Local Government

NGOs have a more prominent sanitation promotion role in Bangladesh than in some other developing countries. During the national sanitation campaign around half of the unions achieving 100 percent household latrine coverage did so with support from NGOs. Some (e.g., BRAC) set up their own programs in the unions. Others (e.g., VERC) worked under contract with international NGOs, such as WaterAid. Others worked under contract with donors and their governmental counterparts, such as the Danida-DPHE program. Some NGOs stopped working after the campaign finished, but others (e.g., Plan and VERC) continued. Plan in 2015 was still funding sanitation promoter positions in some union offices.

The relationships between NGOs and local government vary from place to place. They may be harmonious, with union offers participating actively, as in the case of Kusumba. Or local government leaders may delegate the tasks of public education and facilitating behavior change to NGOs without taking much responsibility themselves. Relationships can be tense, if local leaders perceive NGOs as adversaries, or if NGOs accuse officials of malpractice – e.g., giving free latrines to friends and relatives instead of to poor households. There may be misunderstandings. One of our 2015 chairmen (in Rajabari), for example, expressed confusion and disappointment about the sudden departure of an NGO that had been working in his union for a long time.57

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57 We were not able to learn the NGO’s point of view, the reason for their cancellation of the local program.
Despite such complexities, we have found NGOs’ role to be mostly creative and constructive. In our 2009-2010 study we found that follow-up NGO support significantly improved the chances of a union’s long-term sanitation success. During the three-plus decades of increasing the general public’s sanitation awareness, a local cadre of committed and experienced professionals also was formed. They staffed and continue to staff several relatively stable organizations committed to sanitation problem solving. They have supported and encouraged local volunteers with leadership skills. Some of the larger organizations (e.g., Water and Sanitation Collaborative Council, or WSSCC) participate in policy-making committees alongside academics and government officers.

At the end of the day, however, it is up to local people and their leaders to manage and sustain sanitation improvements and to change related social practices in their own ways. No outside body, however dedicated, can do it for them. Given the ethnic, economic, and political diversity within and between unions, it is inevitable that some will do better than others.

As Bangladesh has a centralized governmental system, all unions depend on the national government of most of their funding. And union leaders also want respect and recognition from the government. (In a parliamentary system such as this, membership in an opposition party can be problematic.) The 2003-2006 national sanitation campaign showed that governmental priorities can strongly influence union priorities. Routines such as celebration of National Sanitation Month (October) help to remind one and all of the importance of sanitation, whatever the local social and political circumstances.

The situations described here are constantly changing, as professionals and other try to tackle further sanitation challenges, such as fecal sludge management and working in ‘hard-to-reach’ areas, as we have discussed elsewhere. (Hanchett 2016) New organizational approaches, such as the semi-governmental Policy Support Unit, are developing, to ensure continuity and improvement.

A common theme in all of our interviews and observations is the social importance of good sanitation practice. This much-changed cultural value is at the heart of all ongoing work on sanitation in Bangladesh. It happened gradually over a period of a decade or more. The national campaign ended in 2006 with a change in political party control, but subdistrict administrators continue to urge union chairmen to attend to sanitation needs. Local chairmen (new and old) are
very proud of the health and social benefits of improved sanitation in their unions, and most seem willing to do what they can to sustain positive changes.
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Ahmed, Shafiul Azam

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Hanchett, Suzanne

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Hanchett, Suzanne, Laurie Krieger, Craig Kullman, and Rokeya Ahmed


Hanchett, Suzanne, Tofazzel Hossain Monju, Kazi Rozana Akhter, Shireen Akhter, and Anwar Islam


Hanchett, Suzanne, and Shireen Akhter


Hasan, Qazi Mahbubul, ed.


Howes, Mick, Enamul Huda, and Abu Naser


Kar, Kamal, and Robert Chambers

Annexes
Union Chairmen and Other Helpful Interviewees

The authors of this study gratefully acknowledge the help of many union chairmen and other staff, very busy people, who gave generously of their time. We interrupted their other work multiple times, as we sought to understand the special circumstances of sanitation promotion in their unions. We recognize their valuable contributions to this study.

**Table 1. Union Profiles: General Characteristics (2010)**

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</tr>
</thead>
<tbody>
<tr>
<td>1. Gunaigachha</td>
<td>West (Pabna, Chatmohor)</td>
<td>13,450</td>
<td>52%**</td>
<td>Not disaster-prone; Seasonal water shortages</td>
<td>No</td>
<td>Active [In]</td>
<td>Gvt-only</td>
<td>No</td>
<td>Yes</td>
<td>No info</td>
</tr>
<tr>
<td>2. Laharkandi</td>
<td>SE (Laksmipur, Lakshmipur Sadar)</td>
<td>50,000</td>
<td>62%**</td>
<td>Coastal belt: sandy soils, river erosion, frequent storms</td>
<td>Some</td>
<td>Moderate [In]</td>
<td>NGO (DPHE-Danida)</td>
<td>No</td>
<td>No</td>
<td>Moderate</td>
</tr>
</tbody>
</table>
# Table 1. Union Profiles: General Characteristics (2010)

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>3. Noudabas North</td>
<td>(Lalmonirhat, Hatibandha)</td>
<td>20,861</td>
<td>67%*</td>
<td>Wetland area; Cyclones, flash floods, severe storms</td>
<td>No info</td>
<td>Moderate [Both]</td>
<td>Dishari</td>
<td>Yes (SOC-MOB)</td>
<td>Yes</td>
<td>Much</td>
</tr>
<tr>
<td>4. Rajabari Central</td>
<td>(Gazipur, Sreepur)</td>
<td>No info</td>
<td>10%**</td>
<td>Barind Tract, industrializing area, not disaster-prone</td>
<td>Many</td>
<td>Moderate [In]</td>
<td>Dishari</td>
<td>No</td>
<td>Yes</td>
<td>Moderate</td>
</tr>
<tr>
<td>5. Nizampur NW</td>
<td>(Chapainawabganj, Nachol)</td>
<td>25,000</td>
<td>77%**</td>
<td>Arid [remote]</td>
<td>Many</td>
<td>Moderate [In]</td>
<td>CLTS</td>
<td>No</td>
<td>No</td>
<td>Much</td>
</tr>
<tr>
<td>6. Kusumba NW</td>
<td>(Naggaon, Manda)</td>
<td>40,000 (?)</td>
<td>65%**</td>
<td>Arid; not disaster-prone</td>
<td>Many</td>
<td>Active [In]</td>
<td>CLTS</td>
<td>No</td>
<td>Yes</td>
<td>Much</td>
</tr>
</tbody>
</table>
Table 1. Union Profiles: General Characteristics (2010)

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>7. Banshbaria</td>
<td>SE (Chittagong, Sitakunda)</td>
<td>33,545</td>
<td>48%**</td>
<td>Hurricanes, high tides, flash floods</td>
<td>Small number</td>
<td>Active [In]</td>
<td>CLTS</td>
<td>Yes (SAF-ER)</td>
<td>Yes</td>
<td>Moderate</td>
</tr>
<tr>
<td>8. Saliabakpur</td>
<td>S (Barisal, Banaripara)</td>
<td>21,281</td>
<td>25%**</td>
<td>Wetlands, cyclones, floods, high tides</td>
<td>Small number</td>
<td>Active [</td>
<td>NGO (DPHE-Danida)</td>
<td>Yes (SOC-MOB)</td>
<td>No</td>
<td>No OD</td>
</tr>
</tbody>
</table>

*HH survey data **Union office information (2010)
### Table 2. Union Sanitation Status Information

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>HH Uses</td>
<td>Single HH Uses</td>
</tr>
<tr>
<td></td>
<td>Imp/S</td>
<td>Clean</td>
</tr>
<tr>
<td>1. Gun. (n=59)</td>
<td>No info</td>
<td>98%</td>
</tr>
<tr>
<td>MED.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Lahar. (n=59)</td>
<td>Mod.</td>
<td>98%</td>
</tr>
<tr>
<td></td>
<td>2015 Comments</td>
<td></td>
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<tr>
<td>----------</td>
<td>---------------</td>
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</tr>
<tr>
<td></td>
<td>Imp/S</td>
<td>Clean</td>
</tr>
<tr>
<td>3. Noud. (n=60)</td>
<td>Much</td>
<td>100%</td>
</tr>
<tr>
<td>LOW</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Raj. (n=60)</td>
<td>Mod.</td>
<td>100%</td>
</tr>
<tr>
<td>HIGH</td>
<td></td>
<td></td>
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<tr>
<td>---------------</td>
<td>---------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td></td>
<td>Imp/ S</td>
<td>Clean</td>
</tr>
<tr>
<td>5. Niz. (n=57)</td>
<td>Much</td>
<td>95%</td>
</tr>
<tr>
<td>LOW</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Kus. (n=52)</td>
<td>Much</td>
<td>86%</td>
</tr>
<tr>
<td>LOW</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>7. Bansh. (n=56)</td>
<td>Mod.</td>
<td>93%</td>
</tr>
<tr>
<td>HIGH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Sal. (n=56)</td>
<td>No OD</td>
<td>93%</td>
</tr>
<tr>
<td>HIGH</td>
<td></td>
<td></td>
</tr>
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<td>---------------</td>
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<tr>
<td></td>
<td>Imp/ S</td>
<td>Clean</td>
</tr>
</tbody>
</table>
Table 3. Open Defecation (OD) in Eight Unions: 2010 Survey Responses and Direct Observations

<table>
<thead>
<tr>
<th>Union</th>
<th>Q: Without naming someone, do you know of any person who defecates in the open? A: Yes (%)</th>
<th>Q: Does it ever happen that you or any member of your household needs to defecate in the open, other than in flood time? A: Yes (%)</th>
<th>Transect Walk &amp; Boat Observations: Evidence of OD (2010, Other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gunaigachha</td>
<td>6.8%</td>
<td>3.4%</td>
<td>No info</td>
</tr>
<tr>
<td>2. Laharkandi</td>
<td>45.8%</td>
<td>6.8%</td>
<td>Moderate</td>
</tr>
<tr>
<td>3. Noudabas</td>
<td>18.3%</td>
<td>5.0%</td>
<td>Much</td>
</tr>
<tr>
<td>4. Rajabari</td>
<td>5.0%</td>
<td>1.7%</td>
<td>Moderate</td>
</tr>
<tr>
<td>5. Nizampur</td>
<td>33.3%</td>
<td>28.1%</td>
<td>Much</td>
</tr>
<tr>
<td>6. Kusumba</td>
<td>40.4%</td>
<td>25.0%</td>
<td>Much</td>
</tr>
<tr>
<td>7. Banshbaria</td>
<td>7.1%</td>
<td>1.8%</td>
<td>Moderate</td>
</tr>
<tr>
<td>8. Saliabakpur</td>
<td>1.8%</td>
<td>0%</td>
<td>No OD found</td>
</tr>
<tr>
<td>9. Bisharkandi</td>
<td>No survey data</td>
<td></td>
<td>No OD found (2015 transect observations from boat)</td>
</tr>
</tbody>
</table>
Table 4. Institutional and Social Supports for Sanitation

<table>
<thead>
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</thead>
<tbody>
<tr>
<td>1. Gun.</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Not mentioned</td>
<td>Yes</td>
<td>2010 LGSP</td>
<td>Yes</td>
<td>Med. (1.4)</td>
</tr>
<tr>
<td>2. Lahar.</td>
<td>No</td>
<td>Yes</td>
<td>Yes - gvt workers too</td>
<td>No info</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>2012-13 Union funds</td>
<td>No</td>
<td>Strong (1.5)</td>
</tr>
<tr>
<td>3. Noud.</td>
<td>Yes</td>
<td>No</td>
<td>No (NGO does more, or neighbors)</td>
<td>No info</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Public toilets inst.</td>
<td>Yes</td>
<td>Weak (1.3)</td>
</tr>
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<tr>
<td>4. Raj.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes (NGO+Union)</td>
<td>No info</td>
<td>No info</td>
<td>No</td>
<td>No info</td>
<td>No</td>
<td>No</td>
<td>Strong (1.5)</td>
</tr>
<tr>
<td>5. Niz.</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No info</td>
<td>No info</td>
<td>Yes</td>
<td>Union funds</td>
<td>Yes</td>
<td>Med.</td>
<td>(1.4)</td>
</tr>
<tr>
<td>6. Kus.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No info</td>
<td>Yes, 3 days</td>
<td>Yes (much)</td>
<td>No info</td>
<td>Union planning community latrine inst. in Adivasi area &amp; other public latrines.</td>
<td>Some</td>
<td>Strong (1.8)</td>
</tr>
<tr>
<td>7. Bansh.</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No info</td>
<td>No info</td>
<td>No</td>
<td>Yes</td>
<td>Union funds, or Private donations</td>
<td>Yes</td>
<td>Med. (1.4)</td>
</tr>
<tr>
<td>8. Sal.</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>ADP</td>
<td>No</td>
<td>Strong</td>
<td>(1.6)</td>
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</table>
**Table 4. Institutional & Social Supports for Sanitation**

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<tbody>
<tr>
<td>9. Bish.</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>No (?)*</td>
<td>ADP</td>
<td>No</td>
<td>Weak (0.8)</td>
</tr>
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*Same subdistrict as No. 8 (Sal.). ** Score = Weighted total divided by number of answers
Table 5. Union Comparisons: Summary

Information

2010 Sanitation Status, Compared with 2015 Assessments of Institutional and Social Supports*

<table>
<thead>
<tr>
<th>Over-all Sanitation Status</th>
<th>Institutional and Social Supports for Sanitation Improvement (2015)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rank (2010 household survey)</td>
<td>Strong</td>
</tr>
<tr>
<td>High</td>
<td>Strong</td>
</tr>
<tr>
<td>4. Rajabari</td>
<td>2. Laharkandi</td>
</tr>
<tr>
<td>7. Banshbaria</td>
<td>4. Rajabari</td>
</tr>
<tr>
<td></td>
<td>8. Saliabakpur</td>
</tr>
<tr>
<td>Medium</td>
<td>Medium</td>
</tr>
<tr>
<td>1. Gunaigachha</td>
<td>1. Gunaigachha</td>
</tr>
<tr>
<td>2. Laharkandi</td>
<td>5. Nizampur</td>
</tr>
<tr>
<td>Low</td>
<td>Weak</td>
</tr>
<tr>
<td>6. Kusumba</td>
<td></td>
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</tbody>
</table>

*Based on information in Tables 2 and 4