Through this briefing paper Plan Netherlands aims to capture and share challenges and lessons learned from a large regional Community-Led Total Sanitation (CLTS) Programme that was implemented in Ethiopia, Kenya, Uganda, Malawi, Zambia, Ghana, Sierra Leone and Niger between 2010 and 2016. Main Lessons have been to: budget and strategize for sustainability from the beginning, integrate CLTS with sanitation marketing activities, use a phased approach with multiple methods, include a CLTS sensitive baseline, use CLTS as a tool to empower women and girls, ensure that hygiene is a distinct component and improve M&E and sharing and learning of any future CLTS programme. These lessons are of use for other organisations using CLTS and could inform practice of new and existing programmes and contribute to improving the impact of CLTS activities.

**Introduction**

In 2010 Plan Netherlands launched a large Community-Led Total Sanitation (CLTS) programme in 8 countries in Africa. As the program covers both East as West Africa, it was called ‘The Pan African CLTS Programme’. The overall goal of the programme is to contribute to a reduction in infant and child morbidity in Ethiopia, Uganda, Kenya, Malawi, Zambia, Ghana, Sierra Leone and Niger, and empower rural and peri-urban communities. To accomplish this the objective of the programme is to improve the sanitation and hygiene situation for 2.6 million people in 805 rural and 36 peri-urban communities and 742 schools through the use of CLTS. Besides this general objective the programme also aimed to improve the CLTS approach by sharing experiences through learning alliances and action learning and to promote the CLTS approach internationally in order to scale up the approach through more organisations and in more countries. The Pan African CLTS Programme is co-financed by the Dutch Ministry of Foreign Affairs and was implemented between January 2010 and March 2016. The end evaluation will be completed by the end of March 2016.

Throughout the lifetime of the programme the CLTS approach has become an important sanitation approach for Plan and their partners, and almost all the Plan offices involved in this programme are implementing the CLTS approach beyond the Pan African CLTS Programme target areas. Frequently Plan offices are approached to provide CLTS trainings to other organisations such as UNICEF and local governments to train their personnel.

Through this paper Plan Netherlands wants to share the challenges it encountered and lessons learned during the implementation of the programme with the hope that these could benefit other organisations that are planning or are implementing CLTS projects and programmes.

**Budget and strategize for sustainability**

The Pan African Programme has set the ambitious target of facilitating 805 rural, 36 (peri)-urban communities and 742 schools in reaching the Open Defecation Free (ODF) status by the end of 2015. As a result 2.6 million people would gain access to sanitation and improve their hygiene practices.
By the end of June 2015, a total of 1.214 communities and 624 schools have gained the ODF status. As a result 2,518,626 people have gained access to sanitation and have improved their hygiene practices. Progress has been really good and it is expected that the set targets will be reached.

Looking at the sustainability of the ODF preliminary findings of the end evaluation shows that there is a large variation between the different countries and within the countries. In general low slippage was found in Kenya, Malawi and Uganda. In these low slippage countries, the best performing project areas retained almost universal toilet coverage; Mulanje (Malawi) 100%, Luweró (Uganda), 98% and Kilifi (Kenya) 97%. Moderate slippage was found in Ethiopia, Sierra Leone and Zambia, and the highest slippage rate was found in Ghana and Niger (1.).

Between March 2012 and October 2013 Plan Australia, with support of Plan United Kingdom and Plan Netherlands, carried out a research on ODF sustainability in 4 countries where the Pan African CLTS Programme was also being implemented, Kenya, Uganda, Ethiopia and Sierra Leone. This study investigated what percentage of households had remained ODF, what motivated people to attain their ODF status and what were the primary causes of households reverting to Open Defecation (OD) (Tyndale-Biscoe, 2013). Outcomes of this insightful study were presented to all the WASH advisors involved in the Pan African CLTS Programme who included lessons learned from this study in their CLTS projects. As a result, interesting innovations were developed to improve ODF sustainability. For example, in Amhara, Ethiopia, each year communities re-verify and celebrate their own ODF status. The Annual ODF Celebration is done by communities themselves and does not cost a lot of money, but has shown to be an important element to ensure sustainability. Another example is from Malawi, where a Care Group (CG) model has been developed that consists of 10-15 clusters of households where father and mother figures were given the responsibility to follow up with a certain number of households which they are already acquainted with, to ensure that they attain their ODF status. Before only one of two natural leaders were responsible for this (Bekker, 2015).

Plan has learned that sustainability is dependent on different factors. The quality of the triggering and the follow up are two essential elements. A challenge within this programme has been that conducting a successful CLTS triggering session is an art and simply cannot be done by everybody. In all project areas government officials were trained and often they were also the ones conducting the triggering sessions. However, government officials are often more used to teaching a message and not used to facilitating a change process. Follow up activities were done by local sanitation committees and government officials or health workers. Experience has also learned that especially government officials are overburdened and often do not have time to conduct the follow up activities on a regular basis.

Therefore, a lesson learned was that more time and budget is needed to make a very thorough selection for the right CLTS facilitator. Also more budget is needed to conduct follow up training of government officials and to ensure that sufficient trainers of trainers are available within the government to train replacements, as they are often replaced. Lobby is also needed to ensure that CLTS activities are embedded within government system so that it is prioritized and sufficient resources are allocated to ensure a sustainable rollout and follow up of CLTS activities. It is also essential to develop tailor made local CLTS follow up systems that can be sustained. In Uganda this was done by embedding CLTS within the Village Health Worker (VHW) systems. Village Health Workers are local volunteers who already go round the villages to provide health messages, they were trained to conduct CLTS follow up activities as this fitted within their mandate perfectly.

**Integrate CLTS activities with sanitation marketing activities**

One of the targets of the Pan African CLTS Programme was that local entrepreneurs would be active in helping households to climb the sanitation ladder. In all 8 countries sanitation marketing activities have been undertaken. In Ethiopia, natural leaders had established 2 sanitation markets which focus on the production of good quality latrine slabs and hand washing facilities. In Uganda the construction of latrines was included in the training materials of masons and masons were stimulated to become members of Village Saving and Loans Associations (VSLA). This enabled them to mobilize credit when buying materials but also gave them access to a group of potential customers with access to credit. Integration of CLTS/sanitation marketing activities with VSLA groups have also been a success in other countries including Malawi.

A challenge has been that the sanitation marketing activities within this programme have been limited and did not include large scale marketing campaigns as is the case in pure sanitation marketing projects. In
reality, successfully implementing CLTS activities is already complex enough and not enough budget and time was allocated to also conduct comprehensive sanitation marketing activities.

A lesson learned is that sanitation marketing activities can complement CLTS activities and can enable households to climb the sanitation ladder and contribute to sustainability. However, they are two different fields of expertise and will need different skills and thus often other project managers. In the future Plan Netherlands aims to develop programmes in which both elements are available, implemented by two teams that work together closely.

Another lesson learned was to ensure that sanitation products, trained masons and capital is available for households to climb the sanitation ladder. Within this programme the link with VSLA has been very effective. In new projects Plan will investigate other credit options further.

Implement a phased approach with multiple methods
The Pan African CLTS Programme was very ambitious and aimed to implement four different approaches within one programme simultaneously:
- the Community Led Total Sanitation (CLTS) approach in rural areas.
- The Urban Community Led Total Sanitation (UCLTS) in urban areas.
- The School Led Total Sanitation (SLTS) approach in schools and
- Sanitation Marketing in all areas.

In all 8 project countries the CLTS and the SLTS approach have been used. UCLTS has only been implemented in Uganda, Ethiopia and Kenya. In Kenya, the UCLTS approach was implemented at the largest scale in the slums of Mathare, Nairobi and has generated many lessons which Plan is now also utilizing in other urban projects (IDS, 2014). As already mentioned above sanitation marketing activities have been implemented in all 8 project countries but their scope has been limited.

The challenge was that when the Pan African Programme started the CLTS approach was still relatively new and Plan staff still needed to be trained on it. Also to implement 4 different approaches across 8 countries at the same time within one programme was too ambitious especially when looking for the budget that was available (2). This was also one of the conclusions of the Mid-Term Review (MTR) “The inclusion of SLTS, UCLTS component in the programme has over-stretched project capacity and resources. The bulk of the project capacity and resources are required by the CLTS activities and that the diversion of time, energy and capacity to SLTS and UCLTS has distracted attention from the main project component and made life harder for the project teams” (Robinson, 2013).

An important lesson learned is that in any future projects/programmes Plan will favour a phased approach in which not all methods are used at the same time. Another possibility worth investigating further will be that the different project elements are implemented by different project teams with their own capacity, skills and budget, but they work together closely. Currently Plan Netherlands works together with Plan Ethiopia to implement an integrated WASH and Food and Nutrition Security (FNS) programme which builds on the results and experiences gained from the Pan African CLTS project in Ethiopia. Within this project two project teams have been selected. One to implement the WASH activities and one to implement the FNS component. The two teams work together closely within the same project and ensure that water systems constructed will serve both water for consumption and water for production. So far the progress has been good and both teams are delighted to work together and join their forces within one programme. Lessons learned from this combined project will help Plan to determine which approach is best to implement projects with different approaches and expertise in the future.

Include a CLTS sensitive baseline
The programme has the overall goal to contribute to a reduction in infant and child morbidity in the target areas. However, it became clear during the life span of the programme that health data is very difficult to monitor and often hard to attribute to a particular intervention, due to the complex and inter-related factors that influence health outcomes. Despite this difficulty health data was collected and analysed as much as possible during the MTR in 2013. In general, the review found that there was widespread anecdotal evidence of health improvements due to project activities but the individual country projects were insufficiently linked with the available health systems. The fact that no baseline was conducted for the programme made it even more difficult to measure the health impact (Robinson, 2013).

One of the challenges was that no comprehensive baseline was conducted before the project started. This was a deliberate decision as it was thought that conducting a baseline in the target communities would
negatively influence the impact of the CLTS approach. The triggering process focuses on overwhelming people with the visual evidence of the negative impact of OD. A certain element of surprise is essential and might have been lost if data from all households’ sanitation situation and OD was already collected before the start of the triggering session. It was also assumed that a strict baseline would ensure that the programme focusses too much on latrine counting instead on measuring sustainable changes in sanitation behaviour. After the MTR was conducted Plan Ethiopia, on the advice of the consultant Andy Robinson, re-incorporated the collection of baseline sanitation data in the implementation process. Two years later incorporation of baseline data has not shown any negative impact on the CLTS process. It actually ensures a thorough post-triggering phase but does demand a lot of extra time of natural leaders, government and Plan staff.

A lesson that Plan Netherlands has learned is that within any future CLTS projects/programmes baseline sanitation, hygiene and health data will be collected but only after a triggering session is conducted. In this way the triggering process will not be disturbed and essential data which is needed for evidence based reporting can be collected. In the baseline qualitative data on hygiene practices should also be incorporated to ensure that monitoring is not only limited to counting latrines. Measuring health impact however will always be very difficult and Plan is still not sure if in any future project this should be incorporated or not.

**Use CLTS as a tool to empower women and girls**

Besides attaining access to sanitation and improve hygiene practices for 2.6 million people, the Pan African programme also aimed to empower rural and peri-urban communities through the CLTS approach. Throughout the lifespan of the project it became very clear that CLTS has the ability to empower people. It has empowered local communities to develop and implement their own sanitation action plans which state how they want to ensure that everybody in their communities owns and uses a latrine and conducts good hygiene practices. In some projects, communities that were empowered by the CLTS activities have also taken up other activities as a community. For example, in Ghana, after achieving the ODF status some communities have developed and jointly implemented a plan to clean the village and prevent future littering. Some communities in Ethiopia, who were mobilized through the CLTS activities, started to lobby the district government to attain a water point in their village. Their argument was that they could not practice good hygiene practices without it. Plan has also observed that due to the fact that everybody in a community needs to be involved in the CLTS activities for it to be a success, CLTS had a positive impact on the position of women and girls.

Plan believes that targeted investments in the promotion of gender equality can improve the quality of programmes and significantly contribute to poverty reduction and the realization of women and girls’ rights. Gender has therefore been a crosscutting theme in the programme. Within the implementation emphasis is put on the fact that women, men and children are equally involved in all project activities. However, the Pan African Programme was not originally used as a tool to improve gender relations in the targeted communities and no gender analysis was conducted during the inception phase of the programme. In 2011 Plan Uganda conducted a research on the impact of gender on CLTS processes. The study found that overall the CLTS approach can inspire a shift in the gender division of labour related to sanitation and hygiene at the household level. Also, the increased cooperation of women and men due to the CLTS activities has improved the status of women and girls within the family and to some extent contributed to reducing domestic violence (Plan Uganda, 2012). Within the lifespan of the Pan African CLTS Programme more emphasis has been placed on the role of women and girls. However, the CLTS approach could have been used stronger to improve gender relations in the target communities.

An important lesson learned is that within any future CLTS programme Plan Netherlands will first conduct a gender analysis and will include gender training of all Plan staff and its partners. A gender study component will be included to learn more on how CLTS can be used most effectively to improve gender relations and what the impact of this is on ODF sustainability. Also gender advisors should be involved within all projects and work closely together with the WASH advisors to ensure that the focus on gender isn’t limited to counting the number of women active in CLTS activities. Another lesson learned during the lifespan of the project is that including a Menstrual Hygiene Management (MHM) component within any CLTS activity is crucial to ensure that women and girls are facilitated to fully participate in social and economic activities and are not limited by practical obstacles, taboos, shame or inconvenience.
Develop better M&E tools
Within the Pan African CLTS programme an old reporting system was used, consisting of narrative and financial reporting. The MTR found serious weaknesses in the programme monitoring and evaluation systems. Due to the scale of the programme, the partner NGOs and Plan had insufficient resources to make regular visits to all the project communities and relied heavily on community based M&E systems which was not always that reliable. To improve the M&E of the programme, the consultant that conducted the MTR was requested to develop a benchmark monitoring system. This benchmark system was implemented in 2013 and was useful, however sometimes Plan country offices found it difficult to use, as they were not familiarized with it from the start of the programme. In the lifespan of the programme more enhanced and effective monitoring tools have come available. As part of the end evaluation household surveys were conducted with the use of smart phones.

In any future CLTS programmes a smart phone monitoring system will be used and more thought will need to be given on how local actors can be trained and guided to contribute to regular and accurate M&E updates.

Enhance the learning and sharing component of the programme
The programme also had a strong learning and sharing component to learn while doing and to improve the CLTS approach in general. For this reason Plan partnered with IRC and the CLTS Knowledge Hub at the Institute of Development Studies. Annual review meetings were organised where all the involved Plan staff came together in one of the programme countries to exchange challenges and lessons learned. The MTR found that “these annual review meetings were perhaps the single most appreciated aspect of the programme. All stakeholders reported that these meetings provided an opportunity to reflect on progress and an open platform for the discussion and sharing of lessons learned, innovations and best practices”.

In any future programme of this size Plan will for this reason surely include annual review meetings. The sharing and learning between these annual review meeting could possibly be facilitated even better. At this moment Plan Netherlands is investigating an online learning tool which will enable peers within a certain programme to share and document lessons learned on a daily/ weekly basis. In this online tool peers could communicate directly together by chat, placing questions and answers and publications of interest to the group. If this tool proves to be effective Plan will use it in future programmes. The CLTS Knowledge Hub has been used frequently by the different countries for cross-learnings and sharing of successes. Another lesson learned is that although Plan staff was able to participate in international conferences to share their lessons learned and some articles have been written on the different country projects, a clear communication strategy and budget on the programme level was lacking. In any future CLTS programme Plan will include a stronger communication strategy to enhance the learning and sharing component of the programme.

Ensure that hygiene is a distinct component
Within the programme hygiene was an integrated component but overall more emphasis was put on ensuring that people construct, use and maintain their households latrines. Often after communities had attained the ODF status, more attention would be given to improving the hygiene knowledge and practices of community members. The challenge within this programme was the same as within any other WASH programme, that changing people’s behaviour is very difficult and changing people’s sanitation practices does not automatically mean that people will also sustainably change their hygiene practices. The Frontiers for CLTS, How to Trigger for handwashing with soap, published by the CLTS Knowledge Hub in 2013, indicated that triggering methods could also be used to ignite a change in handwashing behaviour (Maulit, 2013). In some countries this technique was used but not in all the countries.

In any future CLTS programme hygiene/ handwashing (including menstrual hygiene management) should be incorporated as a distinctive component which could include different tools like triggering for good hygiene practices, to ensure a sustainable improvement in hygiene behaviour.

Conclusion
This paper described the challenges and lessons learned from the Pan African CLTS Programme of Plan. It has shown that the programme was able to achieve great results despite the fact that the programme objectives and different approaches used was overambitious. Through the lifetime of the programme, Plan has gained great expertise on CLTS at scale and useful lessons have been learned on how to improve future
CLTS projects and programmes. It has become clear that implementing CLTS is not easy and definitely not a silver bullet. However, the CLTS approach has proven to be an important tool to empower people to look beyond NGO or government support and join forces within a community to improve their living conditions with resources available to them. At the same time it can also give them a voice to demand that their local, district and national government also take their responsibility. In the future Plan Netherlands hopes to build on the experiences gained from the Pan African CLTS Programme and incorporate all lessons learned.

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References
BEKKER, J. 2015 Annual Progress report 2014: Pan African CLTS Programme, Plan Netherlands. The Netherlands,
IDS 2014 Update UCLTS Mathare, Nairobi, Kenia: http://www.communityledtotalsanitation.org/resource/update-uclts-mathare-nairobi, IDS website. UK,
MAULIT, J.A. 2013 How to Trigger for Handwashing with Soap. Frontiers of CLTS: Innovations and Insights 2. IDS publication. UK,
PLAN UGANDA 2012 Research on the Impact of Gender on CLTS Processes, Plan Uganda. Uganda,
ROBINSON, A. 2013 Mid Term Review of the Pan African CLTS Programme, Plan Netherlands. The Netherlands,

Note/s
1. More detailed slippage rates can be provided after completion of the end evaluation by end of March 2016
2. The country project budgets ranged from €500.000 to €900.000

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