



**Ministry of Environment,
Government of Pakistan**

Draft

PAKISTAN'S APPROACH TO TOTAL SANITATION

1.0 Background:

In 2006, Pakistan hosted the second South Asia Conference on Sanitation (SACOSAN II) which brought the sanitation agenda on the national level debate. Key stakeholders continuous efforts resulted in formulation of National Sanitation Policy which was approved in 2006 by the Federal Government. The policy highlights social mobilization as a key component in addressing sanitation issues at the household level especially in the rural areas. The National Sanitation Policy envisions creation of an open defecation free environment with safe disposal of liquid and solid waste and the promotion of health and hygiene practices in the country. The National Sanitation Policy of Pakistan also provides broad guidelines and support to Federal Government, Provincial Governments, Federally Administrated Territories, the Local Governments and development authorities, to enhance the sanitation coverage in the country through formulation of their sanitation strategies, plans, programmes and projects. It has been mentioned in the Policy that the Component Sharing Model will be adopted for villages of 1,000 and above population. For villages of less than 1,000 populations the Total Sanitation Model will be adopted.

The National Sanitation Policy aims also to promote the Community Led Total Sanitation approach. The Community Led Total Sanitation “CLTS” process in Pakistan was initiated in 2004 and followed a “learning by doing” process. The total elimination of open defecation holds promise of major gains in enhancing the wellbeing of women, children and men in achieving health and sanitation MDGs. CLTS is a participatory approach that started in Bangladesh in year 1999 and has spread to many countries of South Asia and Africa.

The CLTS in Pakistan’s context has been explicitly defined in the approved Baluchistan Sanitation Strategy of 2008. It has been described as a model which concentrates on empowering communities to analyze extent and risk of environmental pollution caused by open defecation and to construct toilets without any subsidies or external support. This approach measures the success on the basis of final impact (elimination of open defecation) instead of the final output (construction of toilets). With CLTS, facilitation of communities’ own analysis occurs and collective action leads to a behaviour change to achieve the “open defecation free” status. Compared to the traditional brick and mortar approach, CLTS relies on behaviour change, a key component of which is not to provide household subsidy to achieve open defecation free environments.

Under the Policy instruments provided in the National Sanitation Policy of 2006, it is mentioned that the Total Sanitation model for the provision of sanitation will be formalized and the procedures and regulations for its implementation will be developed.

A CLTS core group was notified by the Government of Pakistan in August 2008 with the objective to operate as a "Think Tank" to advance common understanding of the issues related to scaling up Community Led Total Sanitation in Pakistan. The CLTS core group was requested by the Ministry of Environment to propose a Pakistan specific strategy to achieve "Total Sanitation" in Pakistan.

2.0 Total Sanitation:

The term "Total Sanitation" has been perceived and projected by many stakeholders differently. The CLTS approach, introduced by NGOs (WaterAid and VERC) in Bangladesh in 1999, is also perceived as the Total Sanitation approach. In this context it is recognized that sanitation is both a public and a private good, and that individual hygiene behavior can affect the whole community if your neighbors defecate in the open, then your children risk excreta-related diseases even when the members of your own household use a sanitary toilet, wash their hands, and practice good hygiene¹.

The "Ten Steps to achieve Total Sanitation" as highlighted by Water Aid² also draws attention on attaining the ODF status by the communities.

The global scaling up sanitation project of Water and Sanitation Program (WSP), called "Total Sanitation and Sanitation Marketing" recognizes the term "Total Sanitation" synonymous to "CLTS" when it refers to applying total sanitation and sanitation marketing approaches. The project is being initiated at scale in three countries including Indonesia, India and Tanzania. The project aims to generate sanitation demand and increase the supply of sanitation products and services at scale. The Global Scaling up Sanitation Project builds on promising approaches in Community-Led Total Sanitation (CLTS) and Sanitation Marketing³. It is a large-scale undertaking to meet the basic sanitation needs of the rural poor who do not currently have access to safe and hygienic sanitation. The project is testing state of the art approaches to create demand for sanitation and to use marketing techniques to improve the supply of sanitation-related products and services. Together, CLTS and Sanitation Marketing can help

¹ "Scaling Up Rural Sanitation" in South Asia, WSP Report, May 2005

² www.wateraid.org/uk/about_us/newsroom/6613.asp

³ www.wsp.org/index.cfm?page=page_disp&pid=1585

generate household and community demand for sanitation facilities in addition to a set of improved sanitation behaviors that comprise total sanitation and promote the development of a self-sustaining demand and supply mechanism.

The Government of India's Programme on Total Sanitation Campaign "TSC" objective is to eradicate the practice of open defecation. It advocates a demand driven and people centered approach and follows a principle of "low to no subsidy" (against the principles of CLTS) where a nominal subsidy in the form of incentive is given to rural poor households for construction of toilets. TSC gives strong emphasis on Information, Education and Communication (IEC), Capacity Building and Hygiene Education for effective behaviour change with involvement of Panchayat Raj Institutions (PRIs), Community based organizations (CBOs), and Non-Governmental Organizations (NGOs) etc. The key intervention areas are Individual household latrines (IHHL), School Sanitation and Hygiene Education (SSHE), Community Sanitary Complex, Anganwadi toilets supported by Rural Sanitary Marts (RSMs) and Production Centers (PCs). To give fillip to this endeavor, GOI launched Nirmal Gram Puraskar to recognize the efforts in terms of cash awards for fully covered PRIs and those individuals and institutions who have contributed significantly in ensuring full sanitation coverage in their area of operation.⁴

The Community Approaches to Total Sanitation (CATS), an umbrella term developed by UNICEF Sanitation practitioners in 2008 encompass a wide range of community-based sanitation techniques. These community approaches share the goal of eliminating open defecation; they are rooted in community demand and leadership, focused on behaviour and social change, and committed to local innovation. The essential elements are a framework for action, providing a common foundation for work in the sector while allowing for broad variation in the way programmes are applied and translated locally⁵. The Community Led Total Sanitation (CLTS) is one of the community approaches alongwith other approaches such as School Led Total Sanitation (SLTS), Total Sanitation Campaign (TSC), Sanitation Marketing (SM) etc

The approved strategy for Baluchistan Province in Pakistan has defined "Total Sanitation" approach having the following expected outcomes:

- Open Free defecation (Excreta)
- Solid Waste Management
- Foul water disposal
- Hygiene Promotion

⁴ http://ddws.nic.in/tsc_index.htm

⁵ UNICEF Filed Note "Community Approaches to Total Sanitation" , Division of Policy and Practice, UNICEF New York 2009

The approved Azad Jammu and Kashmir (AJK) Sanitation Policy and Strategy of 2008 defines the 'total sanitation approach' as approach achieving the "sanitary success" as:

- 'Excreta Free' Unions /Wards (i.e. excreta free fields/drains/hands)
- 'Litter Free' Unions/Wards
- 'Foul Water Free' Unions/Wards
- The 'Cleanest' Unions/Wards

In Pakistan, the CLTS approach was conceived as an entry point, tied to a 'sanitation ladder' encompassing four aspects of total sanitation including open defecation free communities, solid waste management, improved drained and sewerage and hygiene promotion to achieve "Total" sanitation. However, it appears that CLTS application in Pakistan paid limited attention to certain aspects that did not allow the CLTS approach attain or sustain the ODF status though it was piloted in many areas all across Pakistan.

3.0 CLTS REVIEWS:

Robert Chambers (the founder and champion of the PRA approach) has defined the following basic principles of CLTS approach⁶:

- No external individual household hardware subsidy
- Communities install their own latrines or toilets with their own resources. Those who are better off help those who are too weak or poor to help themselves
- No standardized top-down designs. People decide for themselves.
- Facilitation, not teaching or preaching. Appraisal and analysis are facilitated.

He mentioned the following two further principles that can be inferred from effective practice:

- Creativity and innovation in approach.
- Review, reflection, learning and change.

In 2009, the members of the CLTS core group (WSP, UNICEF, Plan-Pakistan, WaterAid, Ministry of Environment, UN-Habitat & RSPN) carried out the CLTS review in union council Samaro (District Umerkot, Sindh, Pakistan) to examine and understand on-the-ground realities of CLTS process and to shed light on issues concerning adoption, spread, scale, sustainability and the quality. The review also focused on questions concerning local cultural practices around

⁶ *Going to Scale with Community-Led Total Sanitation: Reflections on Experience, Issues and Ways Forward* by Robert Chambers, March 2009

hygiene and sanitation, social difference and impacts on women and the poorest of the poor through CLTS adoption.

Following are some important learning's from the CLTS review conducted in Sumaro, Sindh:

- CLTS is successful in creating the sanitation demand but this demand recedes if a consistent approach post CLTS triggering is not undertaken
- CLTS approach focuses heavily on the first generation ignition process to create sanitation demand. Communities require post-construction support to ensure sustainable sanitation and hygiene improvements
- There were irregular and inconsistent follow ups with the households
- Communities after attaining the ODF status have weak knowledge on appropriate technology options for latrine construction
- There was no timely guidance to the communities on appropriate indigenous technologies
- Access to appropriate and affordable sanitary hardware by the communities is lacking
- There is limited involvement of other stakeholders i.e. religious leaders, LHWs, notables etc. in sensitizing communities
- No certification and verification mechanism exists to declare villages open defecation free
- CLTS needs a holistic approach ie behaviour change, strong hygiene education and complementing infrastructure at the household and the community/village levels needs special emphasis

Thereafter a two days national workshop was arranged by WSP in collaboration with the Rural Support Program Network (RSPN) and other partners, including UNICEF, WaterAid and Plan-International to take stock of CLTS initiative in Pakistan and to strengthen both practice and policy efforts through focusing on the sharing and learning from each other's experiences. The workshop deliberated upon the diversity of CLTS approach in different contexts. Various rural support programs including AKRSP, NRSP, PRSP, SRSO, SRSP and TRDP etc shared their experiences of implementing CLTS in 22 different districts and discussed various issues and challenges being faced in the implementation process. Additionally seven NGOs (IRSP, LPP, SMART, Sangat Development, SABAWOON, AFB and SSD) also shared their relevant experiences. Interestingly, almost most of the experiences shared by these organizations were in line with the observations made during the CLTS review conducted in Sumaro, Sindh.

During the workshop, WaterAid also shared findings of their CLTS process review which they carried out in three countries namely Bangladesh, Nepal and Nigeria. The highlights of the findings are as follows:

- Open defecation continues
- There is a shift from 'open' OD to 'hidden' OD in Nepal
- Lot of innovations in Bangladesh in latrine designs
- In Nepal around half of 'temporary' latrines had been upgraded or replaced
- In Bangladesh ¼ of households upgraded or replaced the latrines
- The hypothesis is correct – focusing on achieving ODF does tend to promote more sustained and equitable outcomes
- Success is more likely when:
 - ✓ Communities are well defined and are meaningful units for open defecation
 - ✓ There is well developed market for supply of sanitation goods and services; and
 - ✓ There is a system of follow up and support to households and community.

A draft Pakistan's Approach to attain Total Sanitation was later on finalized and shared with the Ministry of Environment. A national level workshop was organized by the Ministry of Environment in coordination with UNICEF, US-AID, UN-Habitat, WaterAid, Plan Pakistan, PIEDAR, RSPN and WSP on June 4, 2010. All provincial/ state governments, representative of the academia and NGOs, CLTS practitioners and the donor agencies participated in this workshop where the proposed Pakistan's Approach to CLTS was discussed as the basis of future sanitation programming in Pakistan.

In his opening remarks, the honorable Federal Minister for Environment appreciated the efforts of the CLTS Core Group and showed his extreme interest in the formalization and finalization of the total sanitation model at the earliest and sharing it with the Ministry of Environment for further promotion, sharing with the provinces and making it a part of a nationwide programme on sanitation in order to achieve the MDGs. He expressed that by moving away from methodology-based approaches, and using principles as the basis of programming approaches, the federal and provincial governments can enable greater programming flexibility in adapting context specific solutions as well as the opportunity to engage in meaningful discourse and exchange of experience across provinces. The following Approach has now been finalized in accordance with the recommendations of the workshop.

4.0 Pakistan's Approach to "Total Sanitation"

Following is the proposed "Pakistan Specific Approach to attain Total Sanitation" to advance the community led process in Pakistan and attain the desired MDG goals.

- A. **Integrated Total Sanitation:** The Pakistan specific approach seeks to follow the following components for attaining total sanitation:
1. *Sanitation Demand Creation for ODF Communities:* through Information, Education and Communications (IEC) Campaign, Community Led Total Sanitation (CLTS), School Led Total Sanitation (SLTS), Marketing of hand washing etc
 2. *Sustaining the Demand through Supply Side Interventions:* through "Marketing Sanitation" , supply chain mechanisms, training of masons, construction of environment friendly latrines for demonstration of technical solutions, trainings of sanitation entrepreneur and sanitation enterprises, facilitation to develop linkages with the microfinance institutions and incentivizing outcomes
 3. *Participatory Hygiene Promotion :* through IEC material on active health and hygiene key messages, behaviour change communications, usage of mass media campaign and IEC campaigns promoting low-cost appropriate and informed sanitation solutions etc
 4. *Attaining 100 % Adequate Drainage and Wastewater treatment*
- B. Community Led Total sanitation (CLTS) methodology is an entry point to achieve "total sanitation" and not a total sanitation in itself. CLTS is an effective approach for triggering action to change defecation behaviours at the community level and to create demand for improved sanitation facilities. Sanitation, as a whole is an entry point for greater social change and community mobilization. The steps identified under CLTS includes:
- I. Pre-triggering: selecting community and developing a better defined sense of community
 - II. Triggering: educating the community regarding the consequences of living in a fecally contaminated environment until they come to the realization that they are eating, washing in, and drinking each other's faeces. Some of the triggering activities include defecation area transect, mapping of defecation areas, calculations of faeces and medical expenses, triggering disgust and ignition. The "ignition" captures the moment when the community becomes mobilized to

take collective action to stop the ingestion of each other's faeces and improve their poor sanitation.

- III. Post-triggering: Once communities typically pledge to improve their sanitation by either becoming open-defecation free or by adopting improved sanitation technologies there is a danger that these pledges do not come to fruition without follow-up work. Follow-up activities include immediate follow-up and encouragement, community action follow-ups i.e engaging with communities to agree furthering action plans to achieve other sanitation outcomes including external systems, participatory monitoring and indicators setting, verifying and certifying ODF status, celebrations and the monitoring and sustaining of ODF status
- C. Under the Pakistan Approach to Total Sanitation, key triggers for behaviour change will be understood and compiled and accordingly a country wide communications campaign will be launched to develop a national "culture" or social norm of latrine usage, latrine sustainability and hand washing
- D. The certification mechanism, to monitor the ODF status at any point in time, will be devised which shall take into account the annual renewal of the commitment for maintaining ODF status
- E. International and in-country partnerships will be created with key development agencies and organizations such as UNICEF, WSP, WaterAid, WSSCC, PLAN, RSPN, UN-Habitat and IRSP etc to harmonize and coordinate support to federal and provincial governments for conceptualizing and rolling out the large scale rural sanitation programs
- F. Both male and female activists will be identified and trained on sensitizing communities on the adoption of improved sanitation and safe hygiene practices. They will be oriented in their assigned roles and responsibilities and can work on a service against fee for making their assigned area open defecation free. These activists could be further transformed, through imparting trainings, into behavior change consultants and then into small entrepreneurs and can help expand the capacity of the market to supply services and products
- G. Capacity development of small entrepreneurs and micro financiers will be supported to develop a range of technologies and options for environmental sanitation.

- H. An enabling environment will be developed at the local, provincial and the national level through strong evidence based advocacy to ensure that programmatic approaches and the sanitation development initiatives are well understood, supported, financed and contributed to long term sustainability
- I. The communities will be sensitized on sanitation through hygiene promotion messages through locally designed IEC material. The messages imparted will be reinforced from time to time
- J. The Approach provides for and put the emphasis on the following important **guiding principles in order to further strengthen the CLTS process as a part of attaining the Total Sanitation outcomes in rural communities** :
 - I. Emphasis on “Total” and “Behavioural Change” while using Total Sanitation approach to change behaviours (stopping open defecation) on a community-wide bases i.e. achieving 100 % open-defecation free (ODF) status and working through with the communities after achieving the ODF status to stimulate and sustain the sanitation demand to achieve the remaining total sanitation outcomes (sustainability of ODF, usage of sanitation facilities, provision of affordable and informed indigenous solutions, promotion of health hygiene, introduction to community sanitation ladder initiatives, provision of 100 % drainage facilities with the aim to minimize exposure to human excreta, wastewater management & the solid waste management)
 - II. Emphasis on putting “Communities” at the centre of any planning process for collective action, behaviour change, application of triggers, follow ups, certification, celebration and the institutionalization of behaviour change process
 - III. Emphasis on “Intense engagement” (not considering CLTS/ SLTS as one off activity) with communities including households, schools, health centres, religious gatherings, and other traditional leadership structures to attain the remaining outcomes of the Total Sanitation after declaration of the ODF status
 - IV. Emphasis on “no provision of subsidies at the outset” in any forms to the households
 - V. Emphasis on community rewards, subsidies and incentives only when an outcome based collective action to achieve “total sanitation” is undertaken and verified and/or sustainable “usage” of sanitation facilities is maintained.
 - VI. Emphasis on “Usage” of sanitation facilities and not only the construction works. Communities should be enabled to take decisions on the materials and designs which work best for them

- VII. Emphasis on looking into options for safe final “Disposal” of human excreta through affordable and appropriate technology
- VIII. Emphasis on “Hygiene ladder” along with the “sanitation ladder” in any of the Total Sanitation program designs, to maximize the impact, through carefully sequencing the hygiene promotion components, especially “Hand washing” based on the local context and through behaviour change communications
- IX. Emphasis on “marketing the sanitation” component, after attaining the ODF status, through involvement with the local market and local entrepreneurs to further stimulate and sustain demand at the household level in order to move up the sanitation ladder through improved sanitation products and services supply
- X. Emphasis on a “support mechanism” to provide communities with the informed and indigenous choices of sanitation technologies and other infrastructure post CLTS/ SLTS triggering. The support mechanism should also take into consideration the provision of guidance for the infrastructure needs through designated community activists/ barefoot consultants and building the capacity of masons/ local artisans to work on technology options with the communities
- XI. Emphasis on strengthening the capacity of the local private sector to offer a wide range of sanitation products and services that are consumer-responsive (through conducting a formative research) and affordable to a wide range of household incomes including the poor
- XII. Emphasis on “quality facilitation” and “local capacity building”, to ensure sustainability and scale up, through training a critical mass of master trainers, community facilitators, resource persons, activists and natural leaders, and , the local masons/ artisans
- XIII. Emphasis on developing a “rigorous training program” for “CLTS trainers” and the “Local Government institutions” on the methodologies and the philosophical aspects of the approach, i.e. behavior change, subsidies and the benefits of attaining ODF
- XIV. Emphasis on ensuring the local government participation from the outset for enhancing the effectiveness of the CLTS Process and M&E and exploring potential for scale-up through undertaking their capacity building in a wide range of areas
- XV. Emphasis on the introduction of a participatory ‘sanitary’ baseline into CLTS/ SLTS processes to develop baseline data to help monitor the impacts post CLTS triggering

XVI. Emphasis on “results based monitoring and ODF certification processes” to sustain behaviors and rewarding outcomes through the involvement of Local Government Institutes