Supporting the Poorest and Most Vulnerable in CLTS Programmes

CLTS KNOWLEDGE HUB LEARNING PAPER

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unicef
for every child

CLTS Knowledge Hub
Strengthening and broadening
Community-led Total
Sanitation at scale

Sida

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Front Page Image: Toilet built by disabled man and family in a village outside Tacloban, Philippines.
Credit: Jamie Myers

1. Introduction

Since the development of Community-Led Total Sanitation (CLTS) almost 20 years ago, it has spread to over 60 countries and resulted in millions of people across the world living in open defecation free (ODF) communities. The approach was a departure from subsidy-driven sanitation programming, which often led to uneven construction and only partial use; however, since the implementation of CLTS at scale, a number of challenges have appeared. Emerging evidence is suggesting a need to better support those least able to provide accessible, sustainable and hygienic sanitation facilities for themselves.

Taking this into consideration, the CLTS Knowledge Hub, based at the Institute of Development Studies, and UNICEF convened a workshop looking at ways to support the poorest and most vulnerable in the Asia region. From the 24th–28th May 2017, participants with experience of working across the Asian continent met in Tagaytay, Philippines.

Why Now? Why Asia-focused?

The Sustainable Development Goals state that we must, 'By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.' This global agreement commits us to leave no one behind.

Sustainability studies have shown that slippage is a serious risk and that it is most likely amongst those least able to build and maintain sanitation facilities by themselves (Cavill et al., 2015).

As CLTS has scaled up, implementation has spread to communities that do not meet the favourable conditions listed in the CLTS Handbook (Kar with Chambers, 2008). Challenges faced include:

- Challenging environments: high water tables, coastal communities, rocky or sandy soils, and areas prone to flooding.
- Social challenges: heterogeneous, multi-caste, -faith, -class communities; conflicted communities with low social capital.
- Institutional challenges: human resources are not always strong enough to facilitate a sufficient standard for CLTS pre-triggering, triggering and follow-up to achieve sustainable sanitation outcomes for all at scale.

Under these unfavourable conditions, and even in more favourable conditions, we cannot assume spontaneous intra-community support is happening or that available community resources are always sufficient to overcome sanitation challenges.

Why focus on Asia? National sanitation policies, especially in certain Asian countries, set high standards for latrines that are often very difficult for the least able to afford and build themselves. This means maintenance and emptying services are also likely to be required with additional associated costs. Although the workshop and the experiences drawn upon focused on Asia, the principles, considerations and recommendations are applicable for programmes in Africa and other parts of the world.

Over the course of five days, participants shared lessons from existing experience and examined the opportunities and trade-offs of different approaches to supporting those most in need. The discussion

focused mainly on ways to strengthen existing CLTS programmes and to better facilitate inter-community support, as well as ways to introduce support mechanisms from outside the community.

1.1 Terminology

The Least Able

In the workshop title, the term 'poorest and most vulnerable' was used. As the workshop progressed, however, it was felt that using the term 'least able to provide sustainable and accessible sanitation for themselves' was more appropriate, since those who are poorest and most vulnerable are not necessarily those struggling to build and maintain toilets.

This term is also problematic, however, especially when shortened to the 'least able'. It was agreed that non-WASH actors with more specialised knowledge would be contacted for their views. A number of disability organisations were approached and responded.

The issue with the term 'least able' is that it focuses on what people are unable to do, rather than what they can do. It also implies a hierarchy among the able and least able that could unintentionally separate the least able from the rest of society, potentially reinforcing the misconception that these people are helpless and must have assistance, as in the charity model of disability/inclusion.

Nevertheless, it is important to note that inclusivity should not be restricted to those with disabilities, as they may not be the least able to provide themselves with safe and sustainable sanitation.

When deciding on preferred terminology, it was highlighted that terms should be country-, context- and language-specific, involving consultation with groups of people to be defined in order to put the person first (House et al., 2017a and b).

This warrants further discussion and consultation, therefore, with a range of different organisations. For this report, we have decided to use the term 'least able' in the context of the longer definition stated above. Moving forward, another term will likely be needed.

Support

'Support' is used as opposed to 'subsidy' in order to include a wider range of options, such as technical guidance/assistance, and facilitating access to land/space/communal resources. It was felt that the term 'support' was much broader than 'subsidy', which is often equated with external financial or material support with little community involvement.

Though not definitive, there are two broad categories of support:

1. *Facilitating and strengthening intra-community support*, including free manual labour; technical support from skilled workers; collection and provision of purchased materials; loans or grants from communal savings, savings groups or wealthier individuals; mobilisation of cash or material donations; and negotiating permission to use space.
2. *Support provided from outside*, such as contracted service providers; vouchers; consumer/supplier rebates; conditional cash transfers; and subsidised credit or subsidised transport costs.

This report documents the workshop discussions while identifying some emerging principles, research priorities and next steps. What is written here is not exhaustive or definitive; rather, it is the beginning of a longer process of enquiry and engagement for the CLTS Knowledge Hub, UNICEF and other interested sector partners.

2. Discussion Topics

2.1.   Strengthening the CLTS Process

In many cases, supporting the least able will involve optimising the CLTS process by ensuring the quality of community outreach, engagement and mobilisation practices. This may include:

- Actively seeking people and groups who may be disadvantaged/vulnerable/excluded and ensuring their participation at each stage of the CLTS process.
- Purposefully listening to and acting upon the voices of people who may be disadvantaged/vulnerable/excluded throughout a sanitation programme.

Below are suggestions on how to strengthen the process and make it more inclusive, organised according to CLTS stages and topics that cut across whole programmes.

The Enabling Environment: conditions needed for programmes to reach all

Practical Suggestions:
- Strengthen national strategies, guidelines and training guides to include/strengthen equity and inclusion (E&I). Alternatively, develop additional guidelines to complement existing ones.
- Be aware of and use different opportunities for introducing E&I in national campaigns and other advocacy efforts.
- Make links with non-WASH organisations/groups that represent disadvantaged groups or have successfully engaged the hardest to reach in the design of programmes at multiple stages, in order to seek advice and support. This could include organisations such as those specialising in social protection, disability, refugees or the deliberately marginalised.
- Decide on optimal community size to facilitate considerations of E&I while triggering; however, note that this is likely to be highly contextual and may differ from region to region.
- Awareness and capacity development is required at every level, from Natural Leaders and CLTS facilitators to government and development partner staff.
- Strengthen the enabling environment for E&I for all rural sanitation approaches; i.e., conduct sanitation marketing.

Concerns:
- Strategies and guidelines often remain unread and unused.
- There is a risk of token involvement from organisations that specialise in particular issues.
- CLTS may not result in safely managed sanitation for all, particularly in challenging contexts; hence, a combination of approaches may be needed.

Examples:
- In Cambodia, the Ministry of Rural Development published a National Guideline on WASH for Persons with Disabilities and Older People (Cambodian Ministry of Rural Development, 2016).

- In Nepal, the National Sanitation and Hygiene Master Plan makes specific reference to the ultra-poor (Government of Nepal, 2011).
- WaterAid Timor-Leste linked with and set-up referral systems to Disable Peoples' Organisations to support programming and communities. This is illustrated in a video, '*Empowering People with Disabilities in Timor-Leste*', which shows staff members in their own workforce and partners' with disabilities, as well as people living with disabilities in communities (WaterAid, 2017).
- The Global Sanitation Fund's (GSF's) Equality and Non-Discrimination study indicated that capacity building is needed for all government and implementing organisational staff, as well as Natural Leaders (House et al., 2017a and b).

Monitoring, Evaluation, Learning (MEL): helping ensure programmes reach and support those most in need effectively.

Practical Suggestions:
- Conduct formative research on specific E&I issues, such as disability, gender, and social inclusion within the government, and feed back to village and district leadership.
- Incorporate E&I in databases, regularly collecting and analysing the data, making them publicly available, especially to relevant groups.
- Model/Test E&I modifications in areas where programmes have demonstrated effective learning and changing.
- Seek and document positive results of local E&I practice within communities. Where these are found, ensure there are opportunities for horizontal learning. Ensure people who are disadvantaged are involved, ideally undertaking the learning as well being given the opportunity to share their experiences.
- Add E&I indicators into organisational and national verification processes.

Concerns:
- There are benefits to keeping things simple. It is important to consider the trade-offs of having too many indicators.
- There is a risk of non-use of complex data and database systems.

Examples:
- SNV, in partnership with the Governments of Nepal and Bhutan, investigated barriers to uptake including disability, gender and poverty (Halcrow et al., 2014)
- SNV have conducted learning events and held online discussion groups on reaching the last mile and achieving total coverage and usage (Murta, 2017).
- SNV Nepal share findings from formative research with community level WASH committees and discuss how it can be used, making recommendations for district strategies.

Pre-Implementation/Pre-triggering

Practical Suggestions:
- Conduct situational analysis on vulnerability, exclusion, poverty issues in different areas and understanding exclusion issues.
- Involve government/district in preparatory work on E&I in terms of prevalent issues in the area and what to look out for.

- Analyse existing national household targeting systems, considering how it may be possible to align with and enhance community-based identification.
- Actively seek least able/excluded as part of pre-triggering process and encourage community leaders to pro-actively ensure everyone is invited to the pre-triggering, including disadvantaged groups.
- Decide whether separate triggering events are needed – such as for women, children, or excluded groups.

Concerns:
- There is a risk in making the processes too heavy. There needs to be a better understanding of who may be disadvantaged/excluded/marginalised etc., as well as the power relations. However, there is a need to ensure that this exercise does not overload the process and that information gathered can be acted upon.
- Difference of opinions: is it enough to use situation analysis findings to judge whether community leaders are reliably able to ensure inclusion and participation of all members of the community, or should external actors also be involved to ensure that people who may be marginalised are invited and encouraged to participate?

Examples:
- As part of the GSF programme in Cambodia, the Executing Agency Plan International conduct Participatory Social Assessment Mapping (PSAM) which is then used to inform a range of different programmes including their CLTS work (Dumpert and Ung, 2017).

Triggering

Practical Suggestions:
- More emphasis on facilitating intra-community support by asking questions that could trigger support, such as:
  - Who might not be able to construct a latrine?
  - What will the community do about this?
  - Who can help?
- Keep attendance records at triggering events to identify who was and was not there.
- When identifying Natural Leaders, consider encouraging members of marginalised groups to take on one of these roles, or include them in WASH committees. This could happen either during initial identification or at later stages.

Concerns:
- Questions remain about how to integrate E&I into a CLTS triggering process.
- It will be necessary to ensure that CLTS triggering is not overloaded and remains an activity a small team are able to conduct.

Examples:
- CLTS+ research in Malawi conducted capacity building of CLTS facilitators, which included the pro-active involvement of people with disabilities at the triggering stage. As a result, they decided to set up their own Disabled Persons Organisation (DPO) at community level to enhance mutual support and organise further activities (Jones et al., 2016).
- WaterAid Timor-Leste have supported the Government to add a one hour 'toilet game' activity to the CLTS process where people imagine they are pregnant or have a disability and try to use the toilet. This is done either during triggering or as a follow-up activity.

Post-Triggering Follow-Up

Practical Suggestions:
- Prioritise the most disadvantaged in the follow-up process, including in monitoring.
- Hold follow-up meetings to discuss who may need support, and subsequently discuss with those that are identified or self-identified.
- Technical support on latrine designs/construction may be needed, particularly regarding accessibility and in areas with more challenging environments where sustainability problems are likely to be more frequent.

Concerns:
- There are strong differences of opinion on how to identify those in need of support and whether this should be done publicly. One argument suggests that the community should be able to decide without identifying criteria and conducting analysis against them; they will simply know and be able to say who needs support. An alternative argument emphasises the need to identify criteria/wealth-ranking with external support.
- There are differences of opinion on how to document those who need support. This may be done in the form of a public map or a register. Sensitivities/stigma must be considered, along with what is likely to encourage action.

Examples:
- In Mali, there were 56 communities triggered by UNICEF and its partners in 2011 that did not convert to ODF status, and were therefore targeted for remobilisation. The remobilisation process starts with a more intense community assessment of the specific bottlenecks to ODF conversion. The most consistent issues identified were:

  1) Social cohesion, where the WASH committee was not trusted and suspected of corruption.
  2) Poor leadership that led to marginalisation of certain groups within the community.
  3) Technical challenges with the type of ground, making it more difficult to build simple pits.

  Community action planning was conducted to address these specific bottlenecks, alongside frequent monitoring of the planned activities. It has since been reported that 49 of these 56 communities later converted to ODF status (UNICEF, 2017).

Post-ODF

Practical Suggestions:
- In communities that are already ODF but are at risk of slippage because poorer and disadvantaged households are only able to build simple latrines, or are using materials not likely to withstand time and hazards, consider post-ODF triggering to facilitate E&I as a collective action issue. Develop plans together to prevent slippage.
- Introduce additional support (internal/external) to improve sustainability of ODF and latrines for people who are disadvantaged.

Concerns:
- The risk of damaging community solidarity exists if external support is given directly to individual households without transparency and participation in decision-making.

Examples:
- Though UNICEF programmes in both Mali and the Philippines have not explicitly set out to address E&I in their programming, post-ODF activities have ensured that ODF status is sustained or maintained, which can often capture those that would potentially revert to open defecation.
- UNICEF in Mali has written protocols for post-ODF follow-up. Patterned to CLTS processes, these activities include community self-evaluation, re-activation of the WASH committee and updating of community action plans to address areas in need of improvement.
- Similarly, in Grade 2 (G2) of the sustainable sanitation component of the Phased Approach in the Philippines, regular sustainability monitoring was integrated in the verification criteria. This means that G2 certification will not be granted unless the community can show proof that they have local ordinance or monitoring records post-ODF, to ensure that collapsed latrines and other issues of sustainability are addressed. The pathway to G2 status provides a focus for the community to continue improvements in their sanitation status collectively (UNICEF, 2017).

2.2. Identifying and Targeting

This section highlights some of the issues involved with identifying and targeting those who may need support. Government mechanisms for identifying and targeting those most in need were not designed specifically with sanitation in mind. Consequently, those who fall under some government criteria may not, in fact, struggle to build and maintain a hygienic toilet, while others in genuine need of support may be missed.

The table below presents a range of targeting mechanisms. They have been divided into those less and more relevant to the sanitation sector.

Less relevant:	More relevant:
Monetary poverty targeting: based on those with the lowest financial resources.	Geographic targeting: based on multi-dimensional, WASH-focused poverty indicators, such as districts with low sanitation, high stunting/diarrhoea rates and areas with particularly challenging environments for toilet construction.
Self-targeting: for example, micro-loans to invest in latrines, or cash for work programmes to build/maintain community water infrastructure.	Categorical targeting: by age groups or socio-economic vulnerabilities (poor, minorities, disabled, other vulnerabilities). This usually comes as a second layer to geographic targeting.
Populations most at risk: exposure, vulnerability and coping capacity for an event (e.g. a natural disaster) that exacerbates their access to essential services.	Community-based targeting: based on set criteria decided upon by the community.
	A combination of the above.

National Government Social Protection Systems: Examples include the Pantawid Pamilyang Pilipino Program (4Ps) in the Philippines, Identification of Poor Households (ID poor) in Cambodia, and Below Poverty Line in India. These are not designed for sanitation interventions and are therefore not necessarily appropriate to identify those least able to build and maintain their own latrine. There is higher potential for scale-up, however, as they are already functioning within government systems and could be adapted to suit sanitation interventions.

SNV Cambodia: SNV worked with district government and focused on reaching all people within a particular district. They were able to monitor who was facing difficulties and react to who was struggling to build toilets, or who was being missed out.

East Meets West, Laos: A poverty survey was used to identify the bottom 30 per cent, and scoring cards were developed based on the survey results. Village chiefs and communities were then consulted about those eligible within the village. This demonstrated a mix of top-down and bottom-up approaches in an area where government social protection systems are weak. Despite this, there was no alignment with other government processes and it was found that retaining quality when working at scale could be challenging.

WaterAid, Timor-Leste: Data was collected on smart phones against nine different criteria. Results were then presented in village meetings and households were ranked. A separate analysis identified who was eligible for support and who needed help post-ODF.

Plan International, Cambodia: Participatory Social Assessment Mapping, which is an in-depth participatory analysis to generate information for targeting vulnerable households, has been used as part of the GSF programme. It is a lengthy and resource-intensive process, making it challenging to scale up; however, Plan International uses the information for other programmes in the village besides CLTS implementation.

Community-Led Wellbeing Ranking: This process is entirely led by the community with no externally set criteria, meaning that decisions are community-owned; however, maintaining quality is likely to be difficult when scaling up, especially through government systems. It is also prone to 'elite capture'.

Key Lessons

- It is important that any new system created is government-led and not run in parallel or opposition to established systems. Triangulation of different methods has the potential to ensure that any new targeting system established does not do this.
- The best combination will depend on the programme objectives, as well as the country context.
- Any combination of methods needs to consider the targeting criteria, cost-effectiveness, timely identification of beneficiaries, and the country's analytical and implementation capacity.
- Maximise the user survey data from national household targeting systems and overlay them with community data to ensure that no one is excluded.
- Using a grievance mechanism for feedback from those potentially excluded could also help.

2.3.   Sequencing of Support Mechanisms: Optimising and Adding to CLTS

This section examines the sequencing of support mechanisms and at which points in the CLTS process they should be introduced, if at all. This is an essential area of consideration to avoid the following:

- Undermining CLTS principles of insider solutions and intra-community driven support.
- Undermining local community leadership and commitment in mobilising local resources.
- Forcing very poor and vulnerable households to invest too much in a toilet facility that might not last very long if they will not then be able to maintain/rebuild it.

Decisions must be made to shape the sequencing when introducing different types of support. These include:

- The desired outcome; for example, do we want to:
  - Achieve ODF?
  - Prevent slippage?
  - Move households without access to adequate technologies up the sanitation ladder?
  - Try a combination of these?
- The desired scale: is this district- or region-wide, rather than a cluster of villages?
- Timeframe:
  - A non-governmental organisation (NGO) might be working with time-bound funding where a level of uncertainty is involved in focusing efforts on generating leadership at the local level for collective mobilisation of intra-community support. In order to avoid such uncertainty, time restrictions might encourage the NGO to rely on providing hardware support to achieve the sanitation goals it has committed to.
  - Alternatively, if a country has a national policy that discourages hardware support, development partners might be encouraged, or even obliged, to find ways to deal with the uncertainty and engage in generating leadership.

Case-Studies

Currently, there is no clear evidence to support whether external support mechanisms should be introduced pre- or post-ODF to help those most in need climb the sanitation ladder. Below are examples that demonstrate successes in both instances.

Pre-ODF
An **SNV** programme in **Cambodia** provided time-bound, discounted pour-flush toilets to all ID poor households after triggering and once the community had reached 80 per cent household toilet coverage. Village leaders were aware of this additional support mechanism beforehand; however, the subsidy was not publicised at the village level and was kept secret until the 80 per cent target had been achieved.   **East Meets West** in **Vietnam** had three different types of support mechanisms[1]:   • Type 1: A consumer rebate for all certified poor, near poor and economic hardship households after they had installed an improved toilet. Households were informed of the scheme through community meetings and house-to-house visits.

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[1] CLTS-like triggering was used; however, open defecation (OD) is very rare in Vietnam and the programme aimed to encourage those with pre-existing toilets to invest in improved toilets.

- Type 2: A cash reward for village committees after increasing 30 per cent of household coverage, and a further cash incentive for achieving 75–95 per cent household coverage.
- Type 3: Incentives for duty bearers (community motivators, community committees) based on the number of toilets built, and penalties for inaccuracies in monitoring reports.

In **Cambodia**, **Plan International** used microfinance institutions to distribute conditional cash transfers to ID poor households after triggering and after households had demonstrated positive steps forward, such as having dug a pit or having a handwashing facility in place. The overall impact of ODF achievement has not been monitored; however, it is operating at scale, covering 35 per cent of the country.

In Nepal, the **Global Sanitation Fund** have been working with the **National Government.** Though no external subsidy is permitted according to national policy, there is room for local support from local businesses, organisations and associations, among others. The type of support is determined by the local Village Development Committees (VDCs). This support can be provided only after a community has achieved 90 per cent coverage, and community members are not informed about it before this point.

Post-ODF

WaterAid, Timor-Leste, uses a discount voucher system after ODF certification. After certification, a village meeting is held and community members are informed of the scheme. The selection process takes approximately 3 days using participatory wealth and vulnerability ranking, and WaterAid staff make the final selection of eligible households.

In **Nepal**, the **Global Sanitation Fund** along with the **National Government** offers match-funding to VDCs up to a total of USD2000. After ODF certification, the VDC receives 50 per cent of the funds, with the second half distributed after they have developed a WASH plan to reach Total Sanitation. This money is not exclusively used to support the least able; rather, it funds a variety of ODF sustainability related activities.

In the **Philippines**, a **Phased Approach to Total Sanitation** is being implemented in development and humanitarian contexts. The first phase (Grade 1) focuses on achieving Zero Open Defecation (ZOD), while Grades 2 and 3 are concerned with achieving Sustainable Sanitation and Total Sanitation, respectively. Post-ODF activities are conducted to support achieving these phases in succession (Robinson and Gnilo, 2016).

To this end, several approaches have been deployed; for example, the **Local Government Unit** in **Milagros**, **Philippines**, issues latrine vouchers for construction materials after Grade 1 ZOD is achieved. Information is spread mostly through Rural Sanitation Inspectors and Barangay Health Workers, who follow up with individual households. At the national level, the **Department of Health** runs an annual contest for model *barangays* (villages, districts or wards). Annually, 48 barangays are awarded (3 per region).

Key Lessons

- If external support is to be introduced before ODF status is achieved, demand-driven approaches (rebates, vouchers, discounts, subsidised credit, conditional cash transfers) could

be more compatible/supportive of CLTS than supply-driven approaches (subcontracted construction, distribution of materials).

- Overt demand for sanitation services can influence sequencing. While high sanitation coverage, regardless of the type of facility, can be deemed a proxy for sanitation services demand, it is important to conduct a thorough bottleneck analysis in communities where coverage is high but some people continue to practise open defecation. Understanding these bottlenecks can help make decisions on sequencing external support. The forms of support may be financial or non-financial in nature, depending on the bottlenecks identified. In circumstances where sanitation coverage is generally high and the bottleneck is due to a lack of adequate technology, or absence of an adequate sanitation supply chain, the issue is not necessarily one of affordability; rather, it may be one of availability and can be addressed as such.
- Whether before or after ODF certification, external subsidies should not penalise those who are motivated or early adopters.
- Rewarding community achievement on reaching ODF or to reach a secondary level of sanitation targets could be a way to provide further encouragement and recognition to local leaders and the community as a whole. Rewards do not necessarily need to be financial:
    - Recognition: ODF birthday celebration after 1 year.
    - Technical support from external partner to assess/help solve further community solutions.
- "Unseen subsidies" could be a useful mechanism:
    - For example, providing market wide supply chain subsidy for very remote locations where availability of local materials is very limited and cost of cement/supplies is very high. A Government or external support agency could subsidise the costs of transporting materials. In Nusa Tenggara Barat, Indonesia, remote populations' material transport costs were subsidised to make them more affordable.
    - Health insurance premiums could include free or reduced price sanitation goods/services (such as latrine pit / septic tank emptying), or discount given for having/installing a latrine.

Questions and Concerns:

- Is there a case of support to households to build a toilet before ODF for the sake of sustainability? Is there a case to delay ODF? Are there advantages in going slower? If we rush ODF, households may install latrines that are not easy to upgrade (due to design, lack of additional space), making it more difficult to reach sustainability in the longer term (or make post-ODF efforts more difficult).
- Issues of secrecy: Cases of where external support is available as part of the programme, this information is not disclosed until the end. This can create a lot of pressure and stress amongst those who genuinely cannot afford to take the required measures. There may be a rationale for secrecy, such as not to lose momentum; however, is there an alternative, particularly in cases where government policy supports the ultra-poor? Is it realistic to keep incentives secret in an at-scale programme?
- Where should subsidies be invested? If it is below the ground (the substructure), a public good as it removes faeces from the environment, there are implications in terms of timing or approach. Would it make sense to provide support to those least able in advance of them investing anything, rather than providing another type of up-front support after they have already built something?
- With community reward schemes there is a risk that only 'good' communities are supported, leaving communities that have not managed to make changes even further behind. It is

necessary to understand the reasons for not achieving ODF status and to consider what other support mechanisms could be used.

- Additional guidance is needed on how to sequence external support for specific contexts, in the case of emergency situations or densely populated areas, for example. Clearly, where communities face issues such as increase in resource needs during an emergency, or resource scarcity in the issue of land tenure and space, these should be assessed in terms of the community's collective capacity to address such challenges. These specific contexts should be considered, as they could redefine a country's approach to sequencing of external support.
- Emergencies become disasters when the level of hazard and risk exceeds the population's ability to respond, or to sufficiently secure their needs. In these cases, external support may be considered immediately. If not, lives are potentially lost, as was seen after the Nepal earthquake in 2015 and Typhoon Haiyan in the Philippines, 2013, for example.
- Sanitation in densely populated areas is an issue that is much more difficult to tackle internally within a community, especially where financial resources, technical capacity or land tenure are scarce.
- Faecal sludge management should be addressed from the start of any CLTS programme, particularly in contexts where certain toilet models with higher standards are promoted or enforced. The challenge for local governments and NGOs in some contexts, however, is their capacity for planning ahead and budgeting for preparatory activities; however, it is vital to consider in the early stages to ensure that safe faecal sludge management systems remain in place some years down the line.

2.4. Roles and Responsibilities

This section identifies the different roles and responsibilities of key stakeholders. Key discussion points are:

- CLTS views the community as the insider, which should be reflected in the roles and responsibilities of key stakeholders.
- Where externally determined, the responsibility to ensure identification and support processes *strengthens* rather than *undermines* existing community support mechanisms and local leadership, without disrupting meaningful participation.
- As government is the ultimate duty bearer, citizen groups play a role in monitoring and holding it accountable on behalf of rights-holders.
- Any efforts to provide support must preserve the ability to *scale with quality*, prioritising the role of government and support of community-led actions.
- Maintaining responsibility at a local level appears to work best.

The same actors are not necessarily responsible for both implementation and steering of CLTS, nor do these require the same capacities. Whereas implementation requires strong community facilitation skills and a good knowledge of sanitation, steering involves working with different stakeholders, making agreements, setting benchmarks and ensuring inclusivity. The same applies to providing different types of support.

Example questions to consider where roles and responsibilities at scale are concerned, can be found on the World Health Organisation's (WHO's) Expandnet site (http://www.expandnet.net/):

- Who should be the main *implementing* organisation(s)?
- Who should *lead and steer*?
- Who should be *supporting*? And who should be *financing*? (Is there consensus on this?)

In different contexts, the actors assuming these roles vary, as do the decision-makers. Furthermore, they may change at different stages of sector development, from uptake to ODF, post-ODF and beyond. Since context is critical, it is far more important to clearly communicate roles and responsibilities, rather than focus on who should fulfil them.

Roles and responsibilities of government as the 'ultimate duty bearer'

In order to provide an enabling environment, which is then supported and upheld by everyone, the government is responsible for:

- Establishing clear intent at a national level to incorporate E&I in plans, policies, guidelines, ODF protocols etc., while enabling the flexibility for local levels of government to determine process.
- Setting technology standards that provide options for the most vulnerable to achieve ODF status and beyond, allowing for progression towards safely managed sanitation.
- Ensuring that national systems for identification are functioning and transparent while also recognising the need to optimise triangulation with other sources, as there are potential limitations to such national systems where they are not designed with sanitation access in mind.
- Steering the sector and harmonisation of approaches.
- Horizontal linkages to social support programmes and advocacy groups.
- Monitoring and evaluation, including mistakes made and negative impacts.
- Financing sanitation services where appropriate.
- Building capacity, learning and knowledge.
- Ensuring facilitators such as government health workers are supported to follow-up post-triggering and post-ODF.

Roles and responsibilities of others

There are a number of actions for which international and national NGOs, UN agencies and researchers should be responsible. These include:

- Ensure we do no harm.
- Share learning and approaches even when things go wrong (and right).
- To innovate, test, trial and be a catalyst for change.
- Raise voices for the vulnerable and help with advocacy efforts.
- Influence and hold governments accountable in reaching the least able and enabling their rights to sanitation and hygiene.
- Support knowledge and evidence in reaching decision makers (and the sector as whole) in a timely manner, releasing data and current thinking when it is needed and most useful.
- Make evidence-based decisions and support the enabling environment.
- Always consider how to involve governments at different levels into conversations and considerations.
- Connect with non-WASH actors such as those with expertise in social protection, disability, mental health etc.

2.5. Different Mechanisms and Associated Risks

Each type of support presents different risks depending on how the programme has been designed to target potentially disadvantaged groups in a community, compounded by the number of players involved. This section includes examples of different smart subsidy mechanisms and their potential risks, followed by some key learning points.

Examples

Cash Rebates: Community Hygiene Output-Based Aid (CHOBA), Vietnam

This programme offered a flat rate rebate to suppliers/sanitation entrepreneurs, performance based payments to mobilisers after the completion of latrines and a discount to households.

Risks:
- Costs of materials may differ from area to area, resulting in some households paying higher prices compared to those in other areas.
- Non-completion of toilets did increase due to consumer rebates. Though monitoring is intensive the programme provides incentives to mobilisers and requires less upfront cost for the programme implementer as the burden is transferred to sanitation suppliers.

Voucher system: SNV, Cambodia; UNICEF, Philippines; and WaterAid, Timor Leste

Vouchers have been made available to both households that practise open defecation to build their first toilets, and to households to improve or upgrade existing latrines post-ODF. Provision of vouchers is often dependent on communities meeting certain conditions, such as achieving a percentage of coverage pre-ODF, or 100 per cent ODF certification. On the whole, they do not cover the full cost of building a latrine and are often time-bound.

Risks:
- Households might not redeem vouchers.
- When time-bound, households may not be able to mobilise their own resources in time.

Community rewards/Match-funding: Department of Health, Philippines; and Government of Nepal, GSF/UN-HABITAT

Community rewards may be monetary or non-monetary, and are given to communities once they have achieved ODF status. Community rewards are a good incentive for a group of communities to mobilise themselves to achieve better sanitation. Match-funding is a financial incentive given to local authorities, provided that they raise an equal amount of funding themselves.

Risks:
- With reward systems, communities with the least sanitation coverage, and those often needing the most support, are excluded.
- Local governments may be unable to match grants.

Sanitation Loans/Microfinance Institutions (MFIs): World Bank, Philippines; and CHOBA, Vietnam.

These are loans designed and offered specifically for improvements to sanitation facilities. Different mechanisms have been designed to make sanitation loans more appropriate for the poorest. In the Philippines the loan repayments were designed to include a portion that goes into a household savings

account which is released once full payment is completed. In the CHOBA programme loan providers allowed a longer payment period to minimise the amount of monthly payments. Programmes can make formal partnerships with banks or MFIs who can commit to meet the demand for WASH loans.

Risks:
- Populations that are most in need may not be granted loans. Mechanisms that involve credit tend to exclude people who do not meet eligibility criteria for loans, or are considered high-risk in terms of repayment.
- Loans increase household debt.
- MFIs/Banks allocate business to other more profitable, non-WASH loan products.

Co-Payments/Contributions from households: Plan International, Cambodia; and SNV, Cambodia

External contributions are made based on households also contributing, either upfront or through staggered repayment. In order to be effective, it is important to inform households at the beginning of the programme to allow time to save. Programmes could also allow for instalment payments and consider accepting non-monetary contributions, such as labour or materials.

Risks:
- Non-payment of the beneficiary contribution or co-payment.
- Poorest households may be excluded.

Overarching Risks:

- Many finance-based mechanisms exclude households that face multiple barriers other than affordability. These may be tenants or people who are landless, living in difficult terrains or challenging environments.
- Latrines may not be completed.
- Many mechanisms strip communities of ownership in terms of efficacy to mobilise resources.
- Latrines often fail to meet standards set by governments.
- Grants, rebates and vouchers may not be used for their intended purpose.
- Governments or NGOs may be unable to provide, run or monitor co-payment schemes.

Key Learning

- Each support mechanism will have its own challenges and trade-offs in a particular context.
- Trade-offs should be considered during programme design before programme implementation in terms of what the risk mitigation strategies are.
- It is advisable to articulate questions for learning related to these trade-offs before programme implementation.
- Decide what information must be collected to understand how a programme has performed despite trade-offs, and collect it.

3. Emerging Principles, Considerations and Recommendations

The group worked together to agree upon emerging principles for CLTS practice, alongside considerations and recommendations for the wider WASH sector.

3.1.   Emerging Principles for CLTS Practice

1. Ensure the least able are intentionally included at every stage of the process

Be explicit about recognising, involving and consulting the least able in CLTS processes, including in post-ODF and sustainability monitoring. Make sure their voices are heard, and their skills and capacities are recognised and valued, following the 'nothing about us, without us' principle.

Recognise evidence regarding CLTS weaknesses, which can be seen particularly where the quality of implementation and follow-up is poor. Do not assume that CLTS will reach and include the poorest and most vulnerable just because the principles and rhetoric say so and because it is based on the assumption that people will help each other.

2. Strengthen equity and inclusion in the sector enabling environment

Ensure that E&I are incorporated throughout sector-wide organisational and government policies, strategies, guidelines and training materials, including CLTS training materials and ODF verification protocols.

Avoid overly rigid or prescriptive policy and guidance, which is unlikely to recognise the diverse realities of the least able. Instead, promote and use policy frameworks that provide guidance and flexibility to local actors in identifying and reaching the least able.

Further research is needed to inform the development of appropriate policy guidance.

3. Recognise that the government is the ultimate duty bearer

In recognising the role of the government as ultimate duty bearer, efforts to strengthen E&I should support and empower this role, including government responsibility for leading, steering, regulating and monitoring, and for the harmonisation of sector approaches. Where decisions are made on supporting the least able, they should be based on consultation and align with government systems and policies.

4. Aim for scale and carefully assess trade-offs

All approaches should be designed with a view to scale, which requires that policy-makers and programmers carefully consider the cost, simplicity and the potential effectiveness of large-scale implementation. Test approaches in a way that recognises the challenges of scaling up. Recognise that high quality support and facilitation are unlikely to be available in all areas.

5. Recognise that there is no 'one-size-fits-all' solution

Different contexts will require a different combination of solutions, and the associated risks and trade-offs must be carefully considered. There is rarely a single perfect approach or support mechanism that will improve E&I in sanitation and hygiene improvement processes. Programmers, decision-makers and local actors need to be aware of the pros and cons, including cost-effectiveness and potential impacts of each approach and support option, before deciding on the optimal support for the least able in each context.

Avoid reducing E&I efforts to only a few high-profile categories (e.g. people with disabilities), or using overly specific criteria that limit recognition of the diverse and variable nature of those who are least able in different contexts and at different times.

6. Celebrate ODF and recognise it is not the end of the process

The Sustainable Development Goals aim for safely managed sanitation; therefore, post-ODF processes need to start moving communities, including the least able, towards this goal. CLTS alone may not be able to do this. Although some community-level actions can be taken, this issue may also require engagement with service providers and larger-scale (district/municipal-level) investments. The least able are likely to experience more challenges in developing safely managed sanitation facilities, or in accessing services where these are available.

7. Prioritise local support to the least able wherever possible

Whether support is provided from inside or outside the community, programmes need to remain demand-driven. Local support is least likely to disrupt and undermine community processes. Where communities and village governments provide support to the least able (in the form of free labour and/or materials), the targeting is more likely to be accurate and the level of support is more likely to be appropriate. Where external or higher-level stakeholders provide support, decisions on targeting and the type and level of support should occur within the community or as close to it as possible. External identification and targeting measures risk imposing outside criteria and undermining local processes, which is thought to have a negative impact on improved outcomes and sustainability.

Consider the effects of any additional support on CLTS, such as behaviour change or market-based approaches that could be affected by market-distorting subsidies, or other forms of support that might negatively influence demand and participation.

More learning is still needed on how to best involve and consider the needs of those least able, both pre- and post-ODF, in ways that support and avoid disruption of the process. The WASH and associated sectors are strongly encouraged to 'learn by doing', and subsequently to share this learning and feed it into improved policy, guidelines and practice.

8. Promote area-wide outcomes that safeguard universal reach

Area-wide approaches (covering entire districts or municipalities) require that all of the different contexts and populations within a large administrative area be reached by improved sanitation and hygiene. The intention is to target the entire area for which local governments and leaders are responsible in a way that encourages inclusive, equitable and large-scale approaches that reach all members of the community.

Elevating the community outcomes to area-wide outcomes requires a more strategic planning approach and careful consideration of different contexts. In this way, the various challenges (social, political, economic, physical, environmental) are recognised and addressed in order to avoid the risk of targeting 'the low-hanging fruit' while the least able and most difficult to reach are left behind.

9. Provide simple technical guidance to ensure sanitation for all

The CLTS process should encourage community innovation in toilet design and development; however, some capacity building support may be needed to enable the community to understand relevant technical options, particularly in relation to accessibility for people with disabilities and mobility challenges, and in challenging physical environments. Capacity building for these technical options may also be valuable for masons and suppliers, and to those involved in faecal sludge management.

Simple technical guidance may also be necessary where sustainability is low. The provision of information on sustainability risks and options for addressing these can transform low quality latrines into more durable and hygienic latrines, without the need for substantial costs or external support.

10. Include other criteria in ODF monitoring and verification processes

Develop E&I criteria in ODF and post-ODF monitoring and verification to assess whether the least able have been reached by CLTS processes, have managed to stop open defecation and developed improved sanitation and hygiene behaviours.

Some groups are at much higher risk of slippage, inadequate sanitation and hygiene, and reversion to open defecation than others. Post-ODF follow-up and sustainability monitoring should recognise these high-risk groups, ensuring that specific attention is paid to the quality and sustainability of outcomes within them. Budget and capacity development will be required to ensure effective monitoring and evaluation.

3.2. Considerations and Recommendations for CLTS and Beyond

Considerations

1. Complex support systems require adequate resources and capacity

It is important to recognise that complex systems (such as vouchers, rebates, conditional cash transfers, and smartphone monitoring) require a minimum level of experience, capacity and resources. The sustainability of these systems, particularly in post-ODF environments, needs to be carefully considered.

Evidence from the Philippines suggests that, while many different support systems were tested with the support and guidance of UNICEF and other NGOs, most local governments reverted back to up-front hardware subsidies once development partner support was no longer available.

2. Acknowledge that market-based approaches are rarely designed to reach the least able

While some poor households do benefit from sanitation marketing and microfinance, market actors are generally profit-driven; therefore, approaches must be specially designed in order to reach all community members. Additional mechanisms are usually required to enable market-based approaches to reach the least able, including targeted financial support.

3. Transparency about the provision of financial support

Where financial support is considered, concerns about potential pressures exerted when information on support is not provided until the later stages of the process suggest that, wherever possible, a transparent approach should be encouraged so that those targeted are aware of the timing and conditions of the support.

4. Low levels of support may require simpler modalities

Consider transaction costs when designing support mechanisms. For more complex support delivery systems, low levels of support may have unacceptably high transaction costs; for example, costs of setting up systems, implementing and monitoring. It is advisable to use more simple forms of support where only a low level will be provided.

Recommendations

1. Encourage support for collective actions and outcomes

Rewards, incentives and phased outcome finance on achievement of collective outcomes have been utilised in a number of countries with mixed results, for example in the Philippines, Timor-Leste, Nepal and India. Evidence suggests that the financial value of these incentives is rarely the main benefit, particularly where the financial value is low. In general, other benefits, such as prestige and recognition, appear to be more highly valued by local governments and communities.

Careful monitoring and follow-up is required to check that these collective incentives are used as intended, that the benefits reach the least able, and that the provision and use of these incentives do not undermine other processes.

2. Provide clear and simple choices

Rural households may struggle to make choices or decisions in the face of unfamiliar and wide-ranging options. Package support into options that are easy to understand and adopt; for example, a 'one-stop shop', rather than having to buy different materials from different suppliers in different places, or having to choose from long lists of potential options. Alternatively, provide information and guidance that clarifies the advantages and disadvantages of the options available. Overcomplicated choices may slow or prevent households from taking decisions or investing in improved facilities and behaviours.

3. Clearly define shared sanitation within ODF criteria

Some ODF criteria allow the use of shared sanitation facilities, both to recognise the use of facilities by extended families and to encourage the achievement of ODF status. Shared sanitation use can vary from good sharing, with hygienic and equitable outcomes, to bad sharing with much worse outcomes. Where sharing is not well defined or understood and there is strong external pressure for ODF status, there is a risk that the least able may continue to share sanitation facilities in a way that means ODF achievement does not, in fact, lead to desirable, equitable or sustainable outcomes.

4. Protect the ODF process

The level at which external support (or local government support) can be introduced depends on the challenges faced in achieving ODF status, and the particular criteria outlined for each context. Wherever possible, however, external support should be delayed until after ODF achievement in order to avoid undermining the community processes. Once ODF status has been achieved, encourage local governments to provide post-ODF support to assist the least able in improving and upgrading sanitation facilities in the interests of sustainability.

4. Knowledge Gaps and Research Priorities

Various evidence gaps and research questions in need of urgent attention have been identified, as well as recommendations on how these questions should be tackled and which research processes will render them most useful for policy-makers and programme-implementers.

Learning Processes

Learning by doing: It is important to encourage those in the sector to experiment, document, learn and share. It is difficult to draw lessons from multi-million dollar research on subjects that are inherently dependent on context.

Quick feedback loops: Speed is required to ensure that relevant data is fed back to implementers to address what is not working well in communities. In certain cases, it may be appropriate to relay information back to communities, show them the data and evidence, do the appraisals and let them draw their own conclusions on making improvements.

Sharing failures: Since donors want to see evidence of success, implementers report success. More courage is needed to admit where implementation has been unsuccessful. Currently, there is a fear of donors and managers, which obstructs the cultivation of a safe learning environment in which to share failures and regrets, as well as what makes us proud. Where there are few incentives for this, the 'learn by doing' approach may be impeded.

Positive deviants and horizontal learning processes: These create opportunities for peer-to-peer learning exchanges based on good or promising practices.

Key Questions

- What good examples are there of programmes working at scale that have embedded inclusiveness throughout the process of CLTS: in pre-triggering, triggering, post-triggering and post-ODF?
- In a given context, who are those struggling to build and maintain improved latrines, and who are those struggling to climb the sanitation ladder? Are these households supported by the community?
- Are those most in need receiving help from within the community?
- What is the best way to ensure participation of those who are intentionally marginalised?
- How can we measure the *quality* of community processes?
- When is best to design/introduce the support process/approach?
- What specific forms of pro-poor support are more effective? Which ones inhibit community-led processes? Is there evidence on the types of financial support, either pre- or post-ODF, that are able to reach the least able most successfully and result in sustainable outcomes?
- What are effective ways of providing external support that minimise the risk of interference with local mobilisation of intra-community support, behaviour change and demand? In what contexts? What can we learn from existing demand-driven external support approaches, such as consumer rebates, time-bound discounts, and community-level rewards?
- How can we measure the performance of a pro-poor support intervention?

5. Action Points

Moving forward, there are a number of activities that could help operationalise some of the emerging principles and key recommendations.

1. *Use identification systems designed for sanitation and hygiene*
Most government poverty (or other) targeting systems are not designed to identify those who are 'not able to construct, access and maintain a latrine themselves'. Some who may be considered disadvantaged might still have the ability and desire to construct their own sanitation facilities while others may not have the required resources or family support.

Additional efforts are then required to determine who, within these community-identified groups, qualifies for other government support (e.g. CCT programmes), and who is currently excluded from other support. Wherever possible, convergence of the targeting and identification processes should be encouraged, while keeping these processes as simple and scalable as possible.

2. Link with existing groups that represent disadvantaged groups

Seek advice and support from those outside of the WASH sector. Forge links with existing organisations with expertise in representing disadvantaged groups; for example, DPOs and citizens' rights-holder groups. They are also a resource for sensitisation, capacity building and accountability mechanisms to protect the rights of the least able.

3. Provide appropriate capacity building on equity and inclusion

Adaptations to policies and guidelines should be coupled with training to re-orient staff, including existing trainers and implementers. People at all levels (from CLTS facilitators to national leaders and decision-makers) may need and value opportunities for capacity building on the issue of E&I in their work, on working with disadvantaged or less able groups, and on ensuring that nobody is excluded.

All stakeholders should be aware of the 'do no harm' principles and follow an appropriate code of conduct in interactions with the least able and potentially disadvantaged.

4. Monitor previous and current CLTS programmes

The quality of participatory community processes can be highly variable at scale, as they are often influenced by local processes and power relations. Routine checks are required to verify the reliability of community processes and ensure that the least able are not being left behind.

Sustainability and equity checks should also be conducted in formerly declared ODF areas.

5. Learn by doing

Action-orientated research should be used to fill evidence gaps needing urgent attention. Focus on successful approaches to identify the least able and to understand the potential barriers to participation and inclusion at each stage of the CLTS/post-ODF process, as well as the challenges involved in maintaining hygienic sanitation facilities.

6. Knowledge capture and sharing

Document examples of positive deviants that have embedded inclusiveness in CLTS processes, or introduced external support models. Mapping different approaches globally, regionally and nationally could be a useful first step. Governments and partners should facilitate horizontal and vertical learning exchanges to ensure that the voices of the least able and field-level implementers can be fed into policy and guidance development.

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UNICEF (2017) *UNICEF Field Notes on Community Approaches to Total Sanitation: Learning for Five Country Programmes* www.communityledtotalsani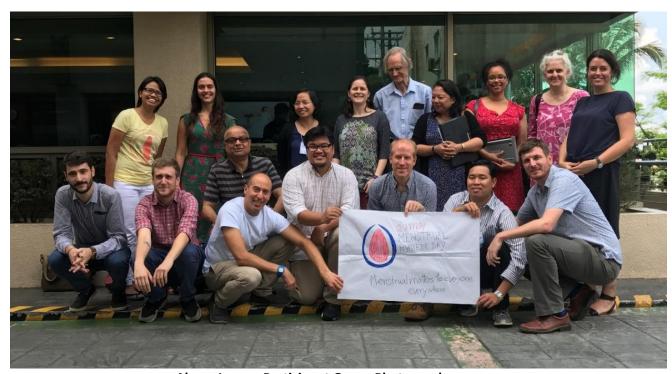tation.org/sites/communityledtotalsanitation.org/files/UNICEF_CATS_Field_Notes_5countrylearning.pdf, accessed 28 September 2017

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Annexes

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Above Image: Participant Group Photograph

Supporting the Poorest and Most Vulnerable in CLTS Programmes

The CLTS Knowledge Hub and UNICEF convened an Asia-focused workshop titled 'Supporting the Poorest and Most Vulnerable in CLTS Programmes' in the Philippines in May 2017. The event brought together participants with experience of working on directly, supporting or researching CLTS programmes from across the continent. Over the course of five days participants representing a range of different organisations explored ways the poorest and most vulnerable can be supported both through strengthening the CLTS process and the introduction of support mechanisms.

This Learning Paper is more than just a summary or record of the event, and aims to provide a starting point for the conversation on this critical subject to continue within the WASH sector. It focuses on strengthening the CLTS process, identifying and targeting people for support, the sequencing of support mechanisms, roles and responsibilities of stakeholders and the different support mechanisms and the associated risks. It concludes with summarising some emerging principles, considerations and recommendations which are not just relevant for CLTS programmes but other approaches, all of which are working towards equitable and adequate sanitation for all by 2030.

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