Frontiers of CLTS: Innovations and Insights

Tackling slippage

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Front cover

TRAPEZIUM BRICKS BEING USED TO CREATE CIRCULAR PIT LININGS IN SANDY SOIL IN MALAWI DURING A PARTICIPATORY DESIGN PROCESS. SEE *FRONTIERS OF CLTS* ISSUE 1.

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Acknowledgements

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Introduction

This issue of *Frontiers of CLTS* explores current thinking and practice on the topic of tackling slippage of open defecation free (ODF) status. It looks at how slippage is defined and identified, and at different patterns of slippage that are seen after ODF is declared. Although a considerable amount has been written on how to establish strong Community-Led Total sanitation (CLTS) programmes that prevent slippage from happening, this issue looks at how to reverse slippage that has already taken place.

Note however, that at a certain level, strategies used to reverse slippage and those used in advance to set a programme up for success to prevent slippage occurring overlap.

From the literature, there is little documented evidence on how slippage can be reversed; evidence and guidance tend to focus on prevention. This review begins to address this gap. Implementers are encouraged to use the proposed *patterns of slippage* framework and *slippage* factors section to understand the type and extent of slippage experienced, then use the examples in the section on *tackling slippage* to identify potential slippage responses.

> "*ODF slippage rates vary widely between and within countries. Monitoring of ODF slippage is not systematic, despite widespread recognition of the issue. New practices to address slippage within the region need to be identified rapidly and widely shared.*"
>
> (East and Southern Africa Regional Rural Sanitation Workshop, IDS 2018, https://www.communityledtotalsanitation.org/regional-africa-sharing-and-learning-workshops-2018)

In addition to a review of current literature,[1] in depth interviews were carried out with key informants at global, regional and country level. Key informants were selected purposively to identify experiences and innovations in tackling slippage from across the sector.

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[1] Note that the literature review was not systematic, it was based on an initial search for documents (peer reviewed, published, and grey literature) which addressed wholly or in part ODF slippage. The key informant interviews (KIIs) also helped identify reports, case studies and drafts which were used to inform the review.

What is slippage?

Abandoned latrine, Kilifi, Kenya, 2010. *Credit*: Ross Kidd

Slippage has been defined as the return to previous unhygienic behaviours or the inability of some or all community members to continue to meet all ODF criteria (Jerneck et al. 2016).

Other definitions focus more narrowly on open defecation (OD) itself – the percentage of households found to have reverted to the practice of OD, or focus on access to facilities – the percentage of households no longer served by a household latrine – which is easier to measure but moves away from the elimination of OD as a behavioural outcome of CLTS (USAID 2018).

> *"Countries don't set limits on what slippage is or how bad it is – rather they are concerned with whether any slippage is being captured and how it is being addressed."*
>
> KII, Asia region

Attempting to define slippage criteria in a uniform way to allow cross-country comparison of slippage rates is not possible, and arguably not valuable, because slippage itself is tied to the ODF definition and criteria used in national certification protocols. What is important is whether slippage is being defined, tracked and addressed at national and sub-national level.

Comparisons of ODF certification criteria can be found elsewhere (Bevan and Thomas 2013; Jerneck et al. 2016), as can discussions around the challenges of defining and subsequently monitoring ODF slippage (Pasteur 2017; Cavill et al. 2015; USAID 2018). In summary:

> *"Slippage is a broad spectrum rather than a defined measure."*
>
> KII, West Africa

- Slippage is defined by the criteria used to certify ODF in the first place. While ideally there should be no slippage of any criteria at any time, there needs to be a pragmatic approach to separating a true downward trend in ODF from temporary or 'acceptable' slippage.

- Unless ODF criteria are matched, slippage cannot be defined across contexts. Criteria selected make a significant difference to slippage results – for example in one study slippage ranged from 13 per cent when only sanitation access was considered, to 63 per cent when handwashing facility was considered, to 92 per cent when all ODF criteria were considered (Tyndale-Biscoe et al. 2013).

- The baseline situation against which ODF is certified may use different tools and teams to follow-up monitoring. **Where the ODF certification quality is lacking, detailed sustainability checks may be holding communities to a standard that never existed in the first place. Furthermore, criteria may also have been added which was not considered when the community was initially declared ODF e.g. the safe disposal of child faeces. Slippage in this instance is referring to a failure to meet a new target.**

- Certain ODF criteria may only be met in the short-term or 'for show' during the verification exercises; without longer term routine monitoring of all ODF criteria this slippage goes undetected. This example is highlighted for children's faeces disposal and handwashing which seem to slip faster than other criteria.

Where slippage is identified, there is often no formal action taken to revoke ODF status,[2] with the exception of Ethiopia where a flag system denotes the ODF status of a village and can be downgraded should slippage occur.

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[2] KIIs: India, Kenya, Mali, Nigeria, Tanzania, Zambia.

Monitoring slippage

Most countries have an established procedure for verifying and certifying ODF status which includes measures of behaviours as well as facilities. Monitoring of ODF indicators within a community stops at ODF declaration in most instances.

Programme driven sustainability surveys, such as those carried out by UNICEF, SNV and others, provide a second data point after a certain interval which can be used to measure the extent of slippage that has taken place. These large and complex surveys have been valuable in terms of sector understanding of longer-term programme issues and as an external check on routine data sources.

However, having only two data points – one from ODF declaration and one from a sustainability survey at a single point in time – provides little insight on the pathway taken, whether the slippage seen at a defined point in time is permanent or temporary, or whether the overall trajectory is towards greater sustainability.

Routine data collection that continues past ODF declaration is required to capture ODF slippage and some programmes are moving towards detailed annual surveys. However, it is questionable whether nuanced ODF indicators in terms of collective behaviour or intra-household differences could successfully be captured by existing routine health monitoring information systems.

What is required is a balance so that overall national and sub-national data is available to monitor progress towards universal access targets, while community structures and the local governments that support them have the more nuanced data they need to directly tackle slippage. Detailed periodic surveys could be used to counter-check routine data and explain slippage trends identified.

There are several examples of ODF monitoring systems which should be able to monitor slippage post-declaration as well as progress toward ODF – mobile to web monitoring in Zambia, community registers in Tanzania, Geo-tagging in India, and post-ODF monitoring in Mali – these examples should be studied further to provide insight into what works and the challenges in effecting continuous ODF monitoring.

Patterns of slippage

It is likely that slippage happens in all CLTS programmes to a certain extent, but importantly does not always lead to a critical failure of ODF status. Different patterns of slippage exist along a continuum (see Figure 1). Note that patterns of slippage are defined differently in other documents (for example Jerneck et al. 2016); for this issue of *Frontiers of CLTS* a sliding scale was found to be useful in illustrating the dynamic nature of slippage temporally and contextually.

Understanding the pattern of slippage, as well as the factors that contributed to it, is the starting point for tackling it. For example, the response to a community-wide return to open defecation which is a rare occurrence, would be different to the response to 1-2 households not having a fly-proof cover on their latrine. Similarly, a behavioural response may be used if facilities exist in a community but are not being used, whereas a more practical, targeted response may be required if slippage is related to existing latrines having been destroyed by a cyclone. These ideas are explored further in the section 'Tackling slippage: Ideas from the field'.

Figure 1: Patterns of slippage along a continuum

Whole community ⟷ Few people

Resumption of OD/ OD visible in community ⟷ Other ODF criteria are not adhered to

Existing latrines are not being used ⟷ Latrines are destroyed or non-functional

Permanent ⟷ Temporary
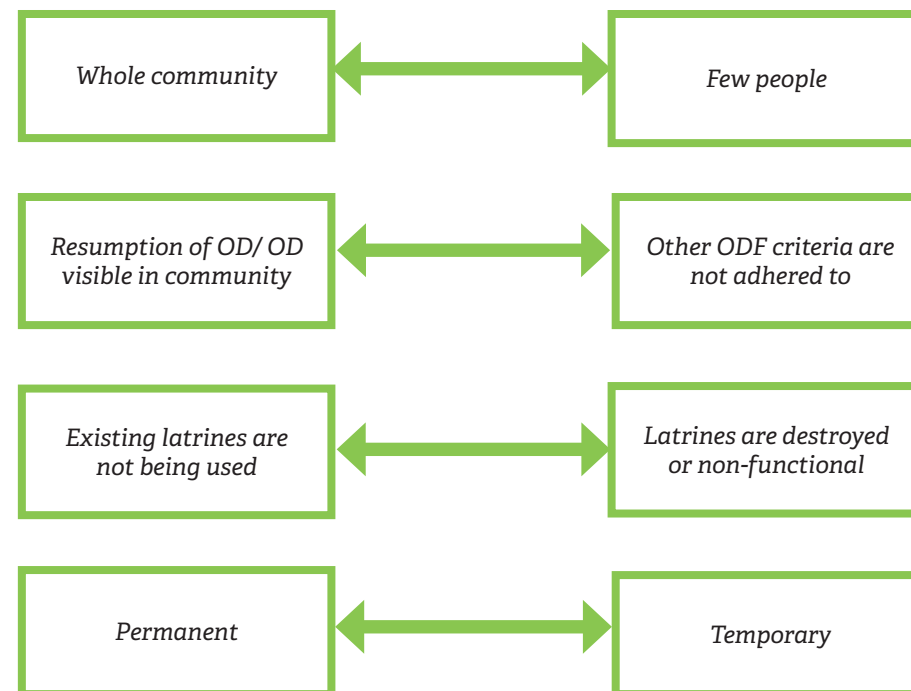
What factors contribute to slippage?

As can be seen in the visual representation of slippage (Figure 2), there are multiple reasons for slippage. Slippage factors can be classified in different ways (Tyndale-Biscoe et al. 2013; Jerneck et al. 2016). For this issue of *Frontiers of CLTS*, slippage factors have been grouped into four inter-related categories – technology factors, behaviour factors, poverty and vulnerability related factors, external factors (Figure 3). Factors that contribute to slippage are well documented elsewhere. Table 1 briefly describes each and provides links to the case examples from the field section.

Figure 2: Reasons for slippage

NB. visual representation, not comprehensive

It should be noted that the inter-connectivity of slippage factors means there is a degree of overlap between the groups and the effects of each can be cumulative. For example, area-wide problems with slippage caused by collapsing soils may be magnified for an elderly head-of-household who is not

"Natural hazards are common – especially typhoons. Mainly this is the superstructure that is damaged, although sometimes the sub-structure too. People rebuild quickly or share when this happens."

KII, Southeast Asia region

able to reconstruct, leading to permanent slippage.

Behaviour factors significantly influence the extent to which other factors lead to slippage. While this section reviews challenges that commonly lead to ODF slippage, this is not to say that slippage *always* occurs.

Figure 3: Broad inter-related slippage factors

TECHNOLOGY FACTORS
- Technical quality and durability;
- Design;
- Accessibility;
- Access to other services.

BEHAVIOURAL FACTORS
- Inadequate social norms change;
- Differential access to facilities;
- Beliefs around children's faeces;
- Working away from home.
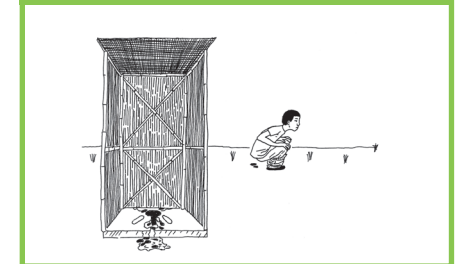
POVERTY AND VULNERABILITY FACTORS
- Poverty and vulnerability magnify existing slippage factors;
- Low initial quality and cost to rebuild;
- Accessibility;
- Unacceptability of sharing arrangements.

EXTERNAL FACTORS
- Incoming populations;
- Climate shocks or geological shocks.

Table 1: Slippage factors

Source: This table draws on the following references: Cavill et al. 2015; Cavill et al. 2018; Chambers and Myers 2016; Cole 2013; Gibson et al. 2018; Greaves 2016; House et al. 2017; Jacob 2018; Jerneck et al. 2016; Kohlitz et al. 2019; Ngwale and DeGabriele 2017; Mukherjee, 2011; Odagiri et al. 2017; Orgill-Meyer et al. 2019; Pasteur 2012; Robinson et al. 2016; Russpatrick et al. 2017; SNV Tanzania 2019; Thomas 2016; Tyndale-Biscoe et al. 2013; UN-Habitat 2017; UNICEF 2014, 2016, 2017; USAID 2017, 2018; Wamera 2016; Wilbur and Jones 2014; WSSCC 2019; WSP-UNICEF 2015.

Slippage factor[4]	Related case examples[4]
Technology factors	
Technical quality and durability • Technical quality and durability of latrines constructed using locally available skills and materials during the drive to become ODF is noted as a slippage factor across most contexts. • A lack of knowledge and skills available locally from artisans and masons can influence latrine durability, especially their limitations when dealing with challenging conditions such as collapsing or rocky soils. • The effort and cost of rebuilding multiple times may ultimately lead to demotivation and permanent slippage. • Note that where ODF behaviour is ingrained and social norms are supportive, slippage due to latrines collapsing or pits flooding is temporary. Facilities lost are replaced as quickly as possible to regain ODF status.	#1 #2 #6
Design • Latrine design and the extent to which it meets the aspirations of the user impacts whether slippage occurs after the initial drive to become ODF.	#2
Accessibility • Slippage within otherwise ODF households or communities is seen when there are physical barriers to latrine use by the elderly or people with disabilities, or by pregnant women.	#2 #3
Access to other services • Slippage can occur when maintaining ODF relies on not only the presence of facilities and behaviours of the user but also on access to other services, for example water for handwashing, flush latrines or anal cleansing. • If a lack of affordable faecal sludge management options means full pits cannot be emptied, some members of the family may return to OD to conserve the life of the pit, or once pits are full the entire family reverts to OD.	
Behaviour factors	
Inadequate social norms change • Where interventions have been unsuccessful in changing social norms a lack of buy-in to ODF is seen, households conform initially but some or all lack the conviction to continue with toilet use once the pressure is removed. • Lack of social norm change drives partial usage when certain members of the household believe it is still ok to practise OD or that it is ok at certain times. • Slippage is often attributed to a lack of follow-up support available once communities have reached ODF to reinforce attitudes, consolidate social norms change and to provide in-time troubleshooting.	#2 #6

³ Note: Listed documents are not necessarily comprehensive and do not all deal specifically with slippage, however each includes general discussion around the related topic.
⁴ Note: Note: Six examples of programmes which have addressed different slippage patterns and factors are explored in section 3 'Tackling slippage: ideas from the field'.

Differential access to facilities • Slippage can be due to social norms *within* the household contributing to differential access to facilities. Examples include men not sharing with female members of the household, men or women not sharing latrines with in-laws, or women not using family latrines during menstruation. • Recent research by GSF in Malawi has also identified this type of slippage particularly around access for girls which has been found to be as low as 60 per cent (WSSCC 2019).	#2
Beliefs around children's faeces • Improper management of children's faeces is tied to the notion that children's faeces is not dangerous. OD found in previously ODF communities is often attributed to inconsistent use of latrines by small children, and unhygienic disposal of babies' faeces. • A study by UNICEF and WSP found that in countries examined, between 11-64 per cent of households with improved sanitation still unsafely disposed of children's faeces. One sustainability study in Madagascar found that after three years the safe disposal of children's faeces had reverted to a level possibly lower than the baseline.[5]	#2 #4
Working away from home • Slippage occurs when people working away from home during the day do not have convenient access to latrines and therefore revert to OD. • This factor is also important where temporary labourers work away from home for up to six months of the year,[6] or whole ODF communities can move between highland to lowland areas according to the season. The issue then becomes whether ODF behaviour is sustained when out of their permanent homes.[7]	
Poverty and vulnerability factors	
Poverty and vulnerability magnify existing slippage factors • The poorest members of a community are often those that are most likely to slip. Disadvantaged or vulnerable groups may be unable to reach or sustain ODF for a variety of reasons. GSF survey results from different countries have highlighted that a lack of inclusion is a serious barrier to ODF and a cause of rapid slippage.[8] • Poverty and vulnerability are not only slippage factors in themselves, they also compound other slippage factors. For example, where continued ODF status relies on affordability of other services such as water for flushing and handwashing or pit emptying services, or initial poor construction quality.	#6

[5] Note however that instance of child faeces disposal never being dealt with properly and therefore being overestimated at ODF verification are reported.
[6] KII: South Asia.
[7] KII South Asia.
[8] KII, global.

Low initial quality and cost to rebuild • When considering technical quality and durability of latrines, whilst to a certain extent these factors affect all socio-economic groups in rural communities, the poorest are least able to afford a good quality facility, meaning theirs is more likely to collapse and lead to slippage. • Compared to richer households, poorer households spent disproportionately more on repairs relative to the initial cost of construction due to the poor quality of the initial latrine (UNICEF 2014). ODF slippage may occur when poorer households can no longer afford to repair, empty or replace facilities.	#2
Accessibility • Elderly people and those with disabilities may experience physical barriers to using constructed facilities and therefore revert to OD directly or by having to use unhygienic alternatives.	#3
Unacceptability of sharing arrangements • In several countries where elimination of OD is the primary focus, sharing of latrines is an accepted option for ODF (Bevan and Thomas, 2013) often proposed for those who cannot afford their own latrines. However, studies across a number of different countries – Ethiopia, Indonesia, Kenya, Philippines, Sierra Leone, Uganda – have found that sharing itself is a factor in slippage. Shared latrines are also not considered to meet basic or safely managed sanitation criteria under SDG 6.2.	#2
External factors	

Incoming populations
• Communities are not static, individuals or groups are constantly arriving and departing for various reasons. Arrival of open-defecators to an ODF area can disrupt ODF status temporarily or in the longer-term and lead to slippage. The scale and predictability of the population movement influences its impact for example:
 	
   • Small-scale cases, for example new households established through marriage, and travellers taking rest stops on highways.
 	
   • Large but essentially predictable cases such as markets, religious festivals or celebrations.
 	
   • Sudden and large-scale population movement due to internal displacement resulting from conflict or natural disasters.
	#5

Climate shocks or geological shocks • Other external factors include climate shocks such as floods and typhoons (e.g. Aroroy, Masbate in the Philippines 2016[9]), or geological shocks such as earthquakes or volcanoes which could lead to ODF slippage (e.g. the Nepal earthquake in 2015).[10]	

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[9] Draft report 'Coping strategies on damaged toilet facilities: The case of Aroroy, Masbate', UNICEF, 2016.
[10] KII, Nepal.

Further research required:

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Intra-household slippage

There is increasing evidence that the social dynamics within households lead to differential access to existing facilities. In some cases this is fairly well understood, for example traditional beliefs around menstruation or in-laws sharing (Chambers and Myers 2016), in other cases this is a relatively new understanding that needs unpacking, for example why girls have less access to household facilities (WSSCC 2019).

More research and lesson-sharing how to identify and decipher intra-household slippage is required, along with documentation of effective behaviour change approaches to address the social norms that create slippage in these contexts.
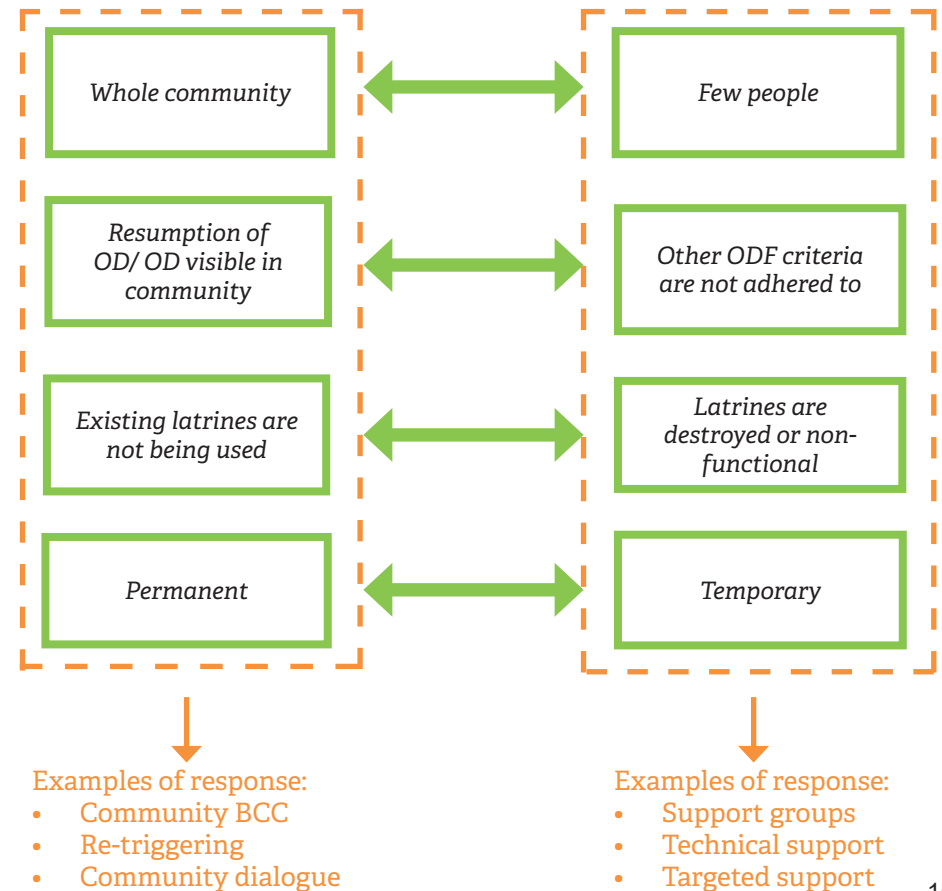
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Sustaining ODF in the poorest households

Thematic sessions at the AfricaSan5 conference concluded that leaving no one behind does not happen by accident. A clear strategy for targeting the poorest and most vulnerable is required that ensures everyone in a community can access sanitation facilities that are acceptable and sustainably meet needs and aspirations regardless of ability to pay (AMCOW forthcoming). Several countries and organisations are beginning to look for post-ODF solutions that provide more financial or material support to the poorest once ODF behaviour is achieved, whilst still maintaining the community-led approach. *Frontiers of CLTS* issues 10 and 13 (House et al. 2017; Kohlitz et al. 2019) provide a broad discussion of potential support mechanisms. Further lessons on how approaches can specifically target slippage should be documented and shared.

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Tackling slippage: ideas from the field

Referring back to the framework used to look at patterns of slippage, different types of response are required according to the pattern observed. WASH/CLTS implementers and community groups can assess the pattern by looking at where their community falls at that point in time along each set of continuums (Figure 4). Broadly, more extensive or serious patterns of slippage would require a community-wide response, while more specific cases of slippage related to individual household challenges could be dealt with using a targeted approach. In many cases the pattern of slippage will likely fall somewhere between the two, indicating that a mixture of responses may be needed. For each case study, the pattern of slippage has been assessed on the continuum and marked with a star, to illustrate how this can work in practice.

Figure 4: Patterns of slippage responses

Examples of response:
- Community BCC
- Re-triggering
- Community dialogue

Examples of response:
- Support groups
- Technical support
- Targeted support

This review sought to identify examples of how slippage has been tackled in different contexts, note however that it was challenging to find well documented cases or field examples of approaches to reverse slippage.

1. Technical support to address technology slippage factors

Slippage factors addressed:	
Technology factors	• Technical quality and durability of facilities constructed using local materials.
Poverty and vulnerability factors	• Low initial quality • Cost of rebuild

There are several examples of how technology related slip factors can be addressed by improving technical knowledge and skills of local artisans, masons, leaders and health workers.[11]

Both Kenya and India have engaged in building the technical capacity of local artisans and masons to offer upgrades and durable solutions to 'build back better' whilst still maintaining the focus on local solutions. Programmes in Democratic Republic of Congo and Rwanda have promoted non-market based technical support by training leaders and health workers to give basic advice, for example on how to dig more stable pits and treat wood for termites. In the Philippines, households which first opted for sharing arrangements that have subsequently broken down, are provided with advice on low-cost options to construct their own latrine. The Ministry of Health in Kenya plans to revisit the technical

"In Laos, OD in some areas is 90 per cent so people don't have a great deal of technical experience on constructing latrines. Poor construction means pits fill up quickly without the technical advice needed to solve these problems."

KII, Asia

Choosing a Latrine
A guide for CLTS implementers at the household level
(Natural leaders and CHVs)

Community Health Volunteer and Natural Leader guidance on choosing a latrine. *Credit:* Ministry of Health, Kenya

manuals available to Public Health Officers and Community Health Workers which currently deal with only high-end latrine construction[12] and have also developed decision tree job-aids to enable community health technicians, volunteers, and natural leaders to provide advice to households on optimising the quality of latrines constructed within their own price range, needs and aspirations (Coombes 2016).

Case study: Artisan training to 'build back better' in Kenya[13]

Figure 5: Slippage pattern observed in case example
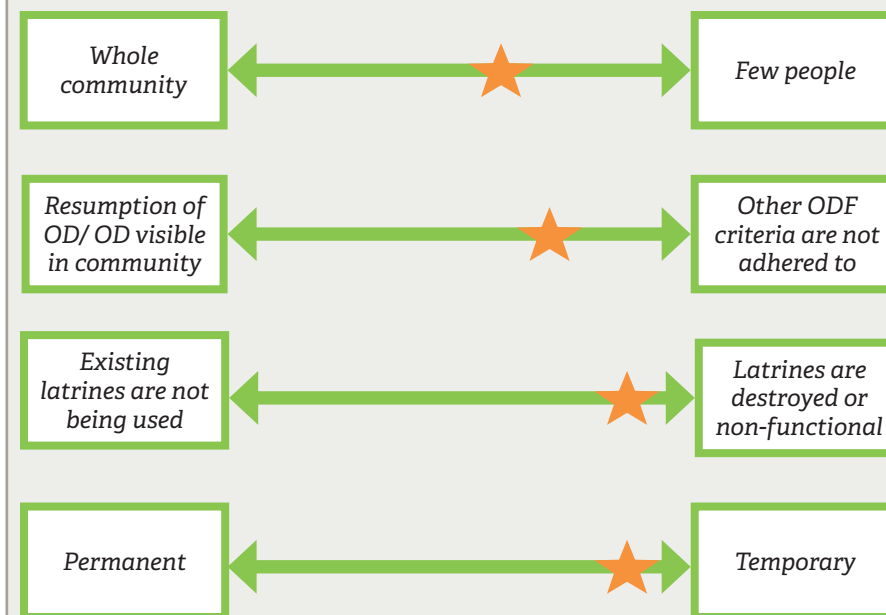
As in many countries, in rural Kenya some latrines constructed with local materials are not durable and are prone to collapse due to rain or termites.

This slippage is nearly always temporary while households re-build their own facilities. In the interim people share with a neighbour or resort to the 'cat method'. It is not uncommon for households in this

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[11] Examples provided by key informants in West and Central Africa region, Asia region, India, Kenya, Nepal, Philippines.

[12] KII, Kenya.
[13] KII, Kenya.

situation to seek technical advice to improve on their original latrine design in terms of quality and durability from artisans in the local area.

As part of the GSF funded KSHIP[14] programme, AMREF has worked with national and local governments and sanitation partners to train local artisans in several counties including Uashan Gishu, Busia, Narok, Kisii and Murang'a. The training targets communities in which ODF behaviour is secure but that have since experienced technical challenges.[15]

The approach uses artisan-to-artisan learning to ensure that capacity and skills built are appropriate to the local context and remain within the community after the project ends.

Steps:

1. Artisans presently working in the area, for example on house construction, are identified.

2. Artisans receive practical training on how small alterations to latrine designs and the locally available materials used can improve durability.

3. The training also includes advice on low-cost options and how to work with the family to determine which design features are required or preferred according to their budget.

4. Post-training the artisans are provided with technical backstopping by the public health department and tools such as job-aids.

Tips and advice on providing technical advice to tackle slippage[16]

- Strike a careful balance between technical advice to help inform decisions and 'over-construction' using imposed designs. The focus should remain on locally-driven solutions using locally-available materials and methods tweaked to improve durability.

- Local artisans and communities construct durable houses in their own context and should be encouraged to use the same techniques for latrine construction. Involve the community beforehand, they have experienced the previously constructed latrines and will have

opinions on improvement preferences design modifications, and alternative materials to prevent slippage recurring.

- Ensure technical backstopping for masons and artisans is available, for instance from the local or district public health department, to ensure that tricky cases can be referred and advice accessed.

2. Community support structures for continued support and encouragement

Slippage factors addressed:	
Technology factors	- Technical quality and durability of constructed facilities - Design - Accessibility
Behaviour factors	- Inadequate social norms change - Differential access to household facilities - Beliefs around children's faeces

Slippage is often attributed to a lack of follow-up support available once communities have reached ODF to reinforce attitudes, consolidate social norms change and to provide in-time troubleshooting. Community action groups have been established in several countries to provide continued support and encouragement after ODF declaration and to immediately address slippage. Examples include the Jirani Action Groups in Tanzania (Rieiro 2019), Follow-Up MANDONA in Madagascar (England 2016) and WASHcoms in Nigeria.[17]

> *"Having this constant support acts as a reminder until ODF becomes a way of life."*
>
> *KII, East Africa*

Refresher training between a health worker and Jirani sub-villages heads in order to improve sub-village heads' accuracy of the data they fill in the government sanitation register. *Credit*: SNV Tanzania

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[14] GSF Global Sanitation Fund, KSHIP Kenya Sanitation and Hygiene Improvement Programme which operates across 11 sub-counties.

[15] The KSHIP programme has also trained artisans in new programme areas to ensure that households, communities and artisans are equipped with the knowledge of how to build the best quality latrines that utilise local materials and know-how before or immediately after triggering.

[16] Tips provided by key informants in Ethiopia, India, Kenya, Nepal, Philippines.

[17] Examples provided by KIIs in Nigeria and Tanzania.

Case study: Follow-up support beyond ODF by Jirani Sanitation Groups in Tanzania

Figure 6: Slippage pattern observed in case example
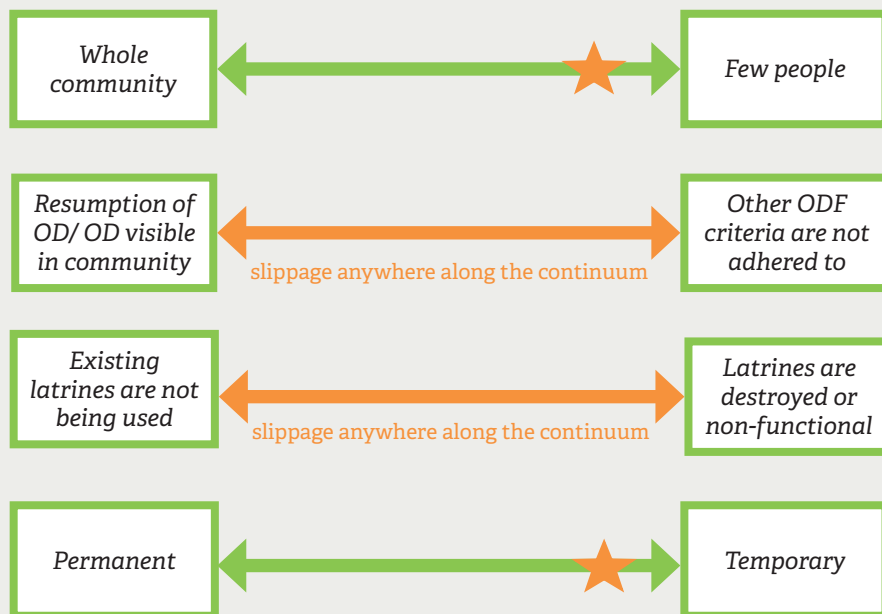
The Jirani Sanitation Groups (JSG) approach has been developed in the SNV Tanzania programme areas as a way of providing community support at sub-village level to sustain ODF status.

The JSGs are made up of approximately ten households which support each other to maintain and improve ODF in the neighbourhood. When one household has a challenge, for example their latrine has collapsed, the JSG finds a solution together in order that the neighbourhood can collectively sustain ODF. The approach also deals with the challenges experienced by vulnerable households in

A group of Jirani sub-village heads revise their registers. Their blue t-shirts make them easy to be recognised and gain them respect in the community, Tanzania. *Credit:* SNV Tanzania

sustaining ODF by identifying their needs and being able to refer upwards to sub-village heads if further support is required.

The approach started as a way to address discrepancies in the village sanitation register data, but has been seen to be an effective mechanism to address slippage and maintain ODF through community support and mutual accountability. Effectiveness is based on proximity – 'the people who inspect you are near to you, so you have to improve' (Rieiro 2019).

The JSGs are a relatively new innovation but due to the positive results seen, some districts have already started to scale the approach beyond SNV programme areas.

Steps:

1. Once a village has been triggered and is committed to becoming ODF the JSG leaders are appointed during a community meeting. Each group of ten households chooses their own leader.[18]

2. The Jirani leaders are provided with a one-day training which mainly covers collecting and reporting data for the village registers.

3. The Jirani leaders make regular house visits to monitor availability and condition of sanitation and hygiene facilities.

4. Jirani leaders help others identify and implement small, immediately doable actions to improve sanitation and hygiene and to reverse slippage (for example covering an uncovered drophole). Identified slippage is dealt with and reversed immediately using local solutions.

5. The Jirani leader receives technical backstopping from village systems and local health workers in case of slippage that is not easily solved.

Tips and advice on using community support structures to tackle slippage[19]

- Communities choosing their own neighbourhood leader, rather than a leader being centrally appointed, enhances the acceptability and sustainability of the approach. Proximity to the community served (for

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[18] Note that in Tanzania the 10-household neighbourhood groups already exist as a government 10-cell group.
[19] Tips provided by key informants in Mali, Nigeria, Philippines, Tanzania.

example being a neighbour rather than a visiting health worker) offers both immediate access and in-person support, while also establishing a degree of accountability by the community to their neighbours to reverse slippage swiftly.

- A similar community selected WASH committee approach has been used in Nigeria, here the members are selected once ODF has already been reached. This was because they found that the enthusiasm of members selected during the excitement of triggering may wane over time, and they found more dependable volunteers emerged along the route to ODF.[20]

- More general continuation of support coming from diverse sources such as dissemination of follow-up messages via mosques, churches, women's groups and prenatal clinics can be effective in preventing slippage (Odagiri et al. 2017) and bolster the work of community sanitation groups.

Further research required: Sustaining local support groups and Natural Leaders

Slippage happens after ODF is certified, therefore community support structures need to remain in place to tackle it for the long-term. There is an assumption that Natural Leader networks will continue to work as volunteers even when programme support is over (Wamera 2016), however in many cases this is found not to be the case. In Zambia for example, volunteer community champions often stop support activities in the community as a result of District support ending, and attrition rates of WASHcoms in Nigeria are up to 40 per cent.* Some programmes are looking at ways in which community volunteers can be sustained, for example through formalising Natural Leaders networks (Sierra Leone, Senegal), or by linking them to income generating opportunities such as kitchen gardens, sanitary towel production, or soap making (Kenya, Nigeria). These ideas should be evaluated, and lessons documented for the sector (see also Cavill et al, 2015).

(* Information from KIIs).

3. Specific support to vulnerable groups who face difficulties accessing latrines

| Slippage factors addressed:	
Technology factors	
Poverty and vulnerability factors	• Accessibility

Understanding community and household level dynamics helps identify those individuals within otherwise ODF households who do not, or cannot, always access facilities either due to social norms or due to a physical inability to access the latrines constructed under the CLTS programme (House et al. 2017).

SNV in Nepal and WaterAid in Cambodia are both addressing the needs of people with disabilities and other access difficulties.[21] In Nepal, accessible options have been compiled into a catalogue to provide informed choices to people with disabilities (NWSSTC 2017), whilst in Cambodia checklist-based WASH accessibility and safety audits are used to evaluate accessibility and identify improvements (WaterAid and DDSP 2016).
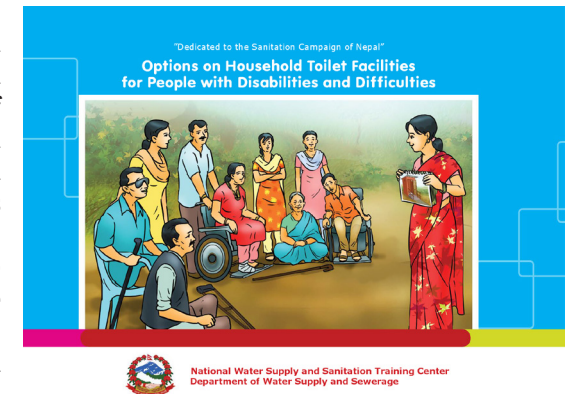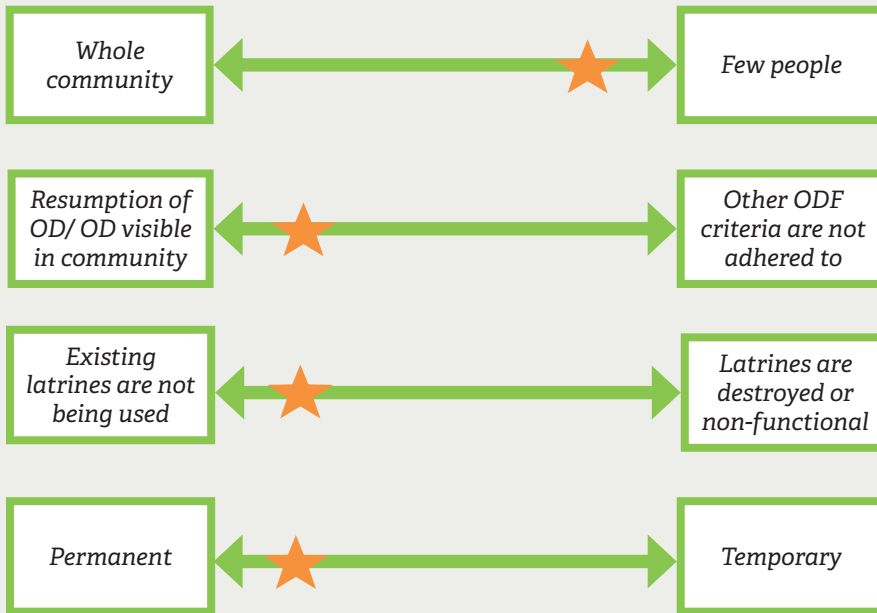

Handbook on household toilet facilities options for people with diabilities and difficulties. *Credit*: DWSSM/NWSSTC

Case study: Designing accessible toilets in Nepal

Figure 7: Slippage pattern observed in case example

Since the National Masterplan was launched in 2011, Nepal has made great progress towards national ODF. However, recent sustainability surveys by UNICEF and the GSF have shown that while the overall trajectory is good, slippage has occurred. In SNV programme areas sustainability studies have shown that problems with convenient access to existing facilities for people with disabilities is a remaining challenge, with slippage noted within otherwise ODF households.

Access difficulties include cubicles and doors being too small, lack of raised seats and physical barriers, such as steps leading to latrines. At first these issues were dealt with on a case by case basis, but it became apparent that there was a need to develop specific resources to assist health workers in addressing the problem.

SNV led the development of '*Options on Household Toilet Facilities for People with Disabilities and Difficulties*'. The handbook is intended to be used by field staff, health and sanitation workers, volunteers, and masons to guide household-level discussions on low cost, locally available adaptations for family members experiencing access difficulties.

The booklet has been endorsed and distributed widely across all districts in Nepal.

Walking pathway adaptation for visually impaired people. *Credit*: DWSSM/NWSSTC

Steps:

1. After slippage was initially identified though field work and surveys, a detailed problem analysis was carried out.

2. Solutions were identified and compiled using local examples, published literature on the topic and internet searches.

3. Identified solutions were 'localised' through working with disabled peoples' organisations and masons in the programme areas.

4. Potentially appropriate solutions were collated in collaboration with the National Water Supply and Sanitation Training Centre.

5. The guidance document was circulated for wider review within the sector before being launched.

6. As follow-on to the booklet initiative, SNV has worked with the Chamber of Commerce and Industry to raise awareness and strengthen the supply chain for adaptations required for people with disabilities through their network of private sector actors.

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[22] Tips provided from key informant in Nepal, and literature.

***Tips and advice on providing specific support to vulnerable groups to tackle slippage*[22]**

- Ensure approaches to reach the most vulnerable are developed collaboratively and involve all concerned groups, for example bringing together WASH organisations, local government and local interest groups (such as Disabled Persons Organisations) to develop appropriate and context-specific solutions to slippage.

- Establish local monitoring systems that actively seek out those who are the most vulnerable groups in any given context and are most at risk from slipping. The KSHIP programme in Kenya for example identifies vulnerable households during community mapping and then proactively follows them up (IDS 2018).

- Build the capacity of health staff and Natural Leaders to be alert to potential barriers to access that lead to slippage. This could include using accessibility audits or other tools to identify slippage and strategies to reverse it (see also *Frontiers of CLTS* issue 3).

4. Addressing slippage caused by children's faeces disposal behaviours

Slippage factors addressed:	
Behaviour factors	• Beliefs around children's faeces

Inadequate disposal of children's faeces is often cited as the cause for persistent OD in otherwise ODF communities – either through young children themselves not using latrines,[23] or through mothers and caregivers disposing of infant faeces unhygienically.[24,25] Targeted and evidence-based behaviour change communication (BCC) activities are required to change perceptions and practice, however, few examples of specific strategies or approaches to tackle improper disposal of children's faeces were found.[26] In many cases, child faeces may not have been considered in the original ODF certification, but in recent years it has been recognised as an important element to achieving an ODF clean environment. As such, slippage refers to the additional criteria not being reached.

[23] KIIs, Nigeria and Mali.
[24] KII, Philippines.
[25] Note however that it is often the case that children's faeces are not included in ODF criteria or ODF status around children's faeces was not secure at the time of verification.
[26] KII, Philippines.

Case study: Working with nutrition to address OD slippage: Emergent learning from the Philippines

Figure 8: Slippage pattern observed in case example
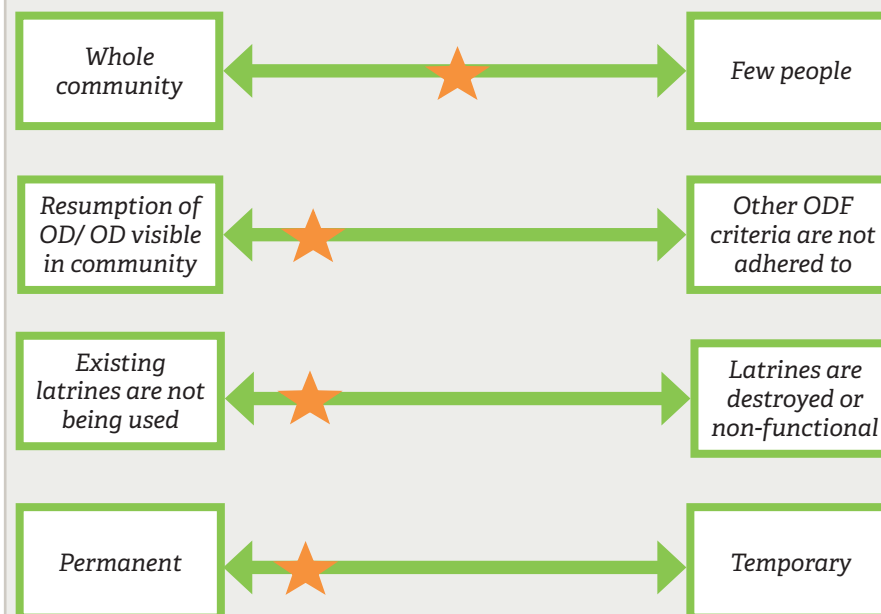
In the Philippines, whilst communities have taken strides to becoming ODF, the problem of unhygienic disposal of children's faeces and nappies on rubbish dumps or in the open persists or slips soon after ODF certification.

In response, UNICEF and government partners from both Sanitation and Nutrition departments are trialling a cross-sector collaborative approach which embeds ODF messages concerning the proper disposal of nappies and children's faeces into the communications strategy of the nutrition sector's *First 1000 Days Programme*. The approach will be implemented by the existing network of Community Nutrition Scholars at community level[27] who are well placed to reinforce ODF messages, particularly targeting children and their caregivers.

[27] There is one Nutrition Scholar per community, all are voluntary and serve their own community.

The strategy, protocol, and behaviour change tools under development are informed by formative research undertaken in Quezon City and in North Samar province, and will be piloted during 2019-2020.

Steps:
1. Buy-in for ODF sustainability gains more traction when the program focus is on achieving *First 1000 Days* outcomes on malnutrition. It shifts the attention to stunted children, who have been negatively affected by OD.
2. Formative research is carried out to identify the key issues to be addressed for children during their *First 1000 Days* and potential drivers for behaviour change.
3. Behaviour change communication strategy is developed collaboratively by communication for development and cross sector teams.
4. Campaign including social and behaviour change materials tools will be developed and pre-tested.
5. The approach will be piloted at provincial and municipal levels through existing government systems (i.e. Rural Sanitary Inspectors, Barangay Health Workers, Barangay Nutrition Scholars and their supervisors).

Tips and advice for tackling slippage related to child and infant disposal

- Identify opportunities to engage with children and carers through cross-sector channels. Nutrition counselling and immunisation programmes will have children and their caregivers as their main focus of intervention and are therefore well placed to identify and tackle slippage.

- Use formative research and ideas from other sectors that target new parents and child carers to develop behaviour change initiatives that are innovative, relevant and appropriate to tackling the specific slippage factors.

- Teaching children to use latrines is an important factor for instilling ODF as a social norm within a community. Given the importance of children's faeces as a major cause of slippage in many contexts it is essential that specific strategies to access children and caregivers and promote behaviour change are developed and shared.

5. Building resilience against external shocks

Slippage factors addressed:	
External factors	• Newcomers/visitors

Population movement into previously ODF areas can lead to slippage if newcomers do not adhere to ODF criteria. These population movements can be small or large, predictable or sudden, temporary or long-term. The following example is taken from Nigeria where a large, sudden influx of refugees led to ODF slippage that needed to be urgently tackled.

Case study: Empowered WASHcoms in Nigeria fighting unexpected OD

Figure 9: Slippage pattern observed in case example
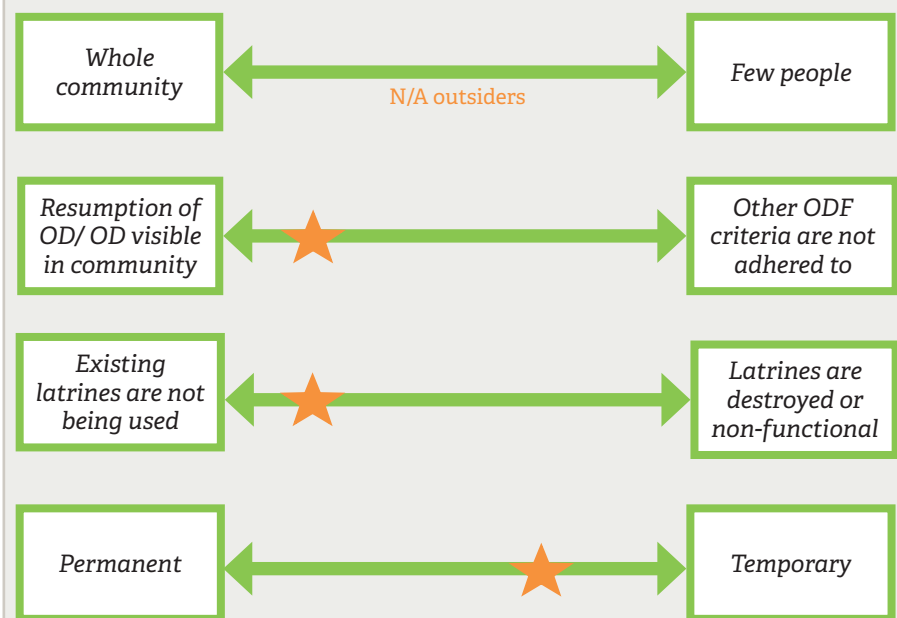
ODF communities in United Purpose programme areas have been able to quickly reverse slippage caused by an influx of refugees and sustain their ODF status despite the additional strain placed on their existing systems.

In September 2018, between 6,000-8,000 refugees from Cameroon

crossed the border into SE Nigeria seeking asylum in Utanga, Obanliku local government area in Cross River State. Utanga is a previously ODF verified area. The refugees were either hosted within the community by households or set up temporary shelter within the villages. The large number of newcomers without access to their own toilets quickly began to disrupt the community ODF status. Noting the slippage and not wanting to lose their ODF status, the existing WASHcoms acted to quickly call a meeting with the refugees to explain ODF rules in the area. They organised permission for the refugees to use residents' latrines in order that there could be no excuse for going to the bush.

In the short term the community preferred to share their latrines with strangers than revert to OD status. Literature tells us that sharing in itself can lead to slippage (Pasteur 2012) so while this arrangement was unlikely to work in the long-term it indicated that strong social norms were in place and WASHcoms felt empowered to take charge of the ODF status of their community rather than waiting for external assistance.

Tips and advice for tackling slippage caused by incoming populations

- Swift action against slippage was taken in Nigeria because the WASHcoms felt empowered to take action on behalf of the communities immediately rather than wait for external agencies to 'deal with' the refugees. Even though the WASHcoms are volunteers, this sense of empowerment is instilled in them through being provided with basic training and being invited to meetings with paid health workers and local officials which confers on them respect and importance within the community.

- Strong social norms and local bylaws established against OD provide a point of reference to require that newcomers to an area do not cause the ODF status to slip. In fact, whether newcomers are requested to construct toilets is one indicative measure of the extent of social norm change.[28] Sign boards identifying ODF

Sign board in Ethiopia. *Credit*: Jamie Myers

zones in Kenya and other countries, and the use of flags to indicate ODF status in Ethiopia are both effective ways of signalling non-acceptance of OD to newcomers.

- For more predictable population movements such as highway visitors or transhumant pastoralists, public toilets could be an effective solution to slippage caused by incoming populations.

6. Post-ODF action plans

In the SDG era, a shift in perspectives is required from viewing ODF communities as the goal to considering ODF declaration as a waypoint on the route to sustainable sanitation behaviour, underpinned by safely managed services. It is acknowledged that progression up the sanitation ladder does not happen spontaneously (UNICEF 2016) and that without a planned next-step, gains made in the flurry of action post-triggering may not be sustained (Jacob 2018).

Several countries have started to establish post-ODF strategies which drive progress in sanitation through increasingly advanced phases. Post-ODF (or ODF+, Total Sanitation etc) encourages ODF sustainability by reinforcing behaviours and encouraging movement up the sanitation ladder to more durable facilities and higher levels of environmental sanitation services, including faecal sludge management (Bevan and Thomas 2013; Gibson et al 2018; Robinson and Gnilo 2016). The example is included here because within this continuum any slippage that occurs will be reversed as the overall trajectory moves in a positive direction.

Post-ODF strategies have several mutually reinforcing elements:

- **Plans** – community and district level plans which lay out how ODF will be sustained and improved to reach the next certification level.

- **Monitoring** systems and tools – which can track progress and identify slippage, for example SNV in Nepal has developed early detection tools to identify potential slippages (Regmi 2016).

- **Follow-up** visits – for continued support and encouragement.

- **Evidence based BCC** activities for behavioural reinforcement – often building on the initial ODF requirements to include additional hygiene behaviours.

- Promotion of more **durable technology** – for example through training masons, or linking to sanitation markets or external support.

Case study: Post ODF in Mali: a longer-term vision of ODF sustainability[29]

After several years of implementing CLTS in Mali the sanitation sector had noted shortfalls in consistent behaviour change and durability of facilities constructed in ODF communities. The introduction of the Post-ODF Strategy in 2014 has focused efforts on communities identifying their own deficits, planning to bridge the gaps with context-appropriate actions and lay the groundwork for sustainability.

The post-ODF phase seeks to reinforce and maintain previously attained ODF status, whilst improving on facilities, ensuring hygiene, and transferring responsibility and ownership to the communities. Post-ODF criteria includes a set of seven indicators including not just presence of facilities and behaviours but also ownership of the process through the local WASH committee.

Village post-ODF action plans are developed by village WASH committees and dovetail into commune development plans. The commune[30] is responsible for water and sanitation access in their area and have a sub-mayor responsible for WASH.

A tripartite sustainability pact signed between the village, Technical Services and the mayor which delineates responsibilities provides accountability and political prioritisation to sanitation.

In the last two years, 130 villages in ten communes have developed pacts and committed to integrating post-ODF in the commune development plans. More than 1,000 villages have completed the post-ODF phase since 2015.

Steps:

1. The Village WASH Committee is selected during the triggering phase and comprises members selected to represent all neighbourhoods and different sectors of the community (e.g. youth, women). The committee receives training to equip them for their role including providing technical advice, planning and follow-up, and mobilising funds.

2. After ODF certification, post-ODF action plans are developed by the WASH Committee.

3. A first round of validation is carried out by Government Technical Services and the supporting agency to ensure the committee is functioning and the action plan is on track.

4. The committee implements and ensures compliance with the action plan, they conduct house-to-house visits and provide advice on how to get back on track if slippage is identified.

5. At the same time, government staff supervision visits take place and support agencies undertake activities such as BCC, training of masons and further training for WASH committees.

6. Self-reporting by the community continues until they deem the post-ODF action plan complete.

7. A second round of verification takes place involving the community, technical services and the external support agency. A KAP survey is carried out, and all criteria are verified. Following the 2nd round of verification the decision is taken to confirm post-ODF or not.

8. Post-ODF planning and assessment cycles continue annually under the tripartite arrangement.

Tips and advice for post-ODF continuation

- Driving sanitation forward through post-ODF programming requires longer term engagement and planning. Formalising the approach as a national strategy and requiring all implementers starting CLTS in new communities to integrate post-ODF certification activities in their planning as Mali has done, is key to securing the shift in focus from achieving ODF to achieving more ambitious sanitation goals.

- Post-ODF requires dedicated human and financial resources which will need to be planned from the outset to ensure that local government systems have the capacity needed to implement (Wamera 2016; USAID 2017).

- Engaging leadership and high-level interest in the activities, for example in Mali from the Mayor visiting communities annually, provides support and encouragement required for ODF sustainability. It is often the higher level of services presented by post-ODF work that are attractive to politicians (Robinson and Gnilo 2016).

- Establishing a local follow-up and reporting system, for example

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[29] KII, Mali, and UNICEF 2017.
[30] A commune is a group of 10-40 villages led by an elected Mayor.

school community monitoring networks in Ethiopia or slippage early detection tools in Nepal, helps to focus post-ODF activities on slippage identified.

Essential recommendations

Although the case examples presented address diverse patterns and factors of slippage, there are some key lessons that can be useful across contexts.

1. **Be prepared for slippage:** Understand that ODF slippage at some level is likely to occur in most CLTS programmes. Being able to recognise the patterns and identify factors driving slippage will improve speed and effectiveness of response and ensure slippage is reversed before it becomes permanent. Factors that lead to slippage are highly varied and context-specific. Build the skills and capacity of local government and community support structures to assess slippage patterns and underlying factors at the local level, and provide them with tools to deliver context-specific responses.

2. **Establish / strengthen community structures:** Establish community support structures, for example WASHcoms or sanitation action groups, which work from within the community to identify and tackle slippage as soon as it occurs. Their proximity to the community promotes accountability and ensures that responses are context-appropriate. Consider in advance how community support structures will be motivated in the long term for example by embedding them within formal government structures, and how their continued functioning will be monitored.

3. **Leaving no one behind does not happen by accident:** Do not assume that community support mechanisms will meet the needs of the poorest and most vulnerable *ad-infinitum,* especially when local conditions or materials mean that latrines require rebuilding and repairing several times per year. Identify specific strategies that identify and target the poorest and most vulnerable to ensure that they are able to sustain and upgrade ODF as part of the ODF community.

4. **Ensure that monitoring systems are sensitive to slippage:** Establish monitoring systems that do not stop at ODF certification but continue to provide a balance of data required to monitor progress towards universal access targets while providing the nuanced data required at local level to identify and tackle slippage.

5. **Consider ODF as the beginning:** Promote continued community action

towards safely managed sanitation targets by planning and resourcing a post-ODF strategy. Post-ODF targets reinforce hygiene behaviours and encourage movement up the sanitation ladder, matched by higher level environmental sanitation services. This focus on the next-step compels communities to identify and address slippage as part of the process.

Further research is required

- **To build the knowledge base on tackling slippage.** This review found it challenging to identify specific cases from literature or the field on how slippage is being identified and reversed. The examples presented in this review are a beginning, however more learning is required.

- **To focus on handwashing slippage.** Most slippage cases identified dealt specifically with OD in the environment, other ODF criteria especially handwashing are also prone to slippage (Tyndale-Biscoe et al. 2013).[31] Examples of practice that reverse handwashing slippage in particular need to be identified and shared.

- **To understand and address intra-household slippage.** There is a growing evidence-base on the impact of intra-household dynamics on CLTS outcomes. Further research on the mechanisms by which these dynamics lead to slippage, and lessons on how intra-household slippage can be identified and reversed is required.

- **To tackle slippage experienced by the poorest.** The poorest members of a community are often most likely to slip, and poverty itself compounds other slippage factors. Lessons on approaches designed to specifically identify and tackle slippage experienced by the poorest are required.

- **To sustain local support groups that are central to tackling slippage.** Slippage happens after ODF is certified often when programme support is over. The role of largely volunteer local support structures in identifying and tackling slippage is paramount and further research is required into how they can be sustained in the long-term.

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[28] KII, West and Central Africa region.

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Tackling slippage

There is widespread recognition that slippage of open defecation free status is a challenge to sustainability across many programmes and contexts. Much has been written about how CLTS programmes can be set up for sustainability in order to prevent slippage from happening, this issue of *Frontiers of CLTS* examines what can be done if slippage has already happened.

The issue is in two parts – the first looks at how slippage is defined, presents a framework for identifying slippage patterns, and revisits the factors known to contribute to slippage. The second section provides six case examples of field experience of slippage and the actions taken to reverse it. It is hoped that the review lays the groundwork for more systematic learning and sharing on slippage to inform current and future programming and practice.

About the author

Sophie Hickling is a hygiene and sanitation specialist with a specific interest in individual, team, and institutional capacity development. She has worked with a variety of organisations in both development and humanitarian contexts, and is currently a Senior Associate at MG Africa Consultants.

Illustration by Jamie Eke

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