

# **Total Sanitation: A Community Stake**

**Helal Mohiuddin, PhD  
Md. Ayub Ali**

*Edited by:*

**Joseph Halder**

**NGO Forum for Drinking Water Supply & Sanitation**

First published December 2005  
© NGO Forum for Drinking Water Supply & Sanitation

All rights reserved. No part of this publication may be reproduced or translated in any form or by any means without prior permission in writing from the publisher.

ISBN 984-32-2774-3

Edited by : Joseph Halder  
Editorial Assistance : Xavier Sku  
Cover Design : Waresul Haque  
Design : .....  
Printing Supervision : Development Communication Cell  
Computer Compose : Mazedul Hoque Prodhan

*Published by:*  
NGO Forum for Drinking Water Supply & Sanitation  
4/6, Block-E, Lalmatia, Dhaka-1207, Bangladesh

*Printed by:*  
.....

## Table of Contents

---

Foreword .....	0
Preface .....	0
CHAPTER - 1 .....	0
Sanitation: Global Meets Local .....	0
1.1 Universal Sanitation Needs in Perspective .....	0
1.2 Revisiting Regional Stakes .....	0
1.3 National Level Response .....	0
1.4 Outcome Preview.....	0
CHAPTER - 2 .....	0
Proper Sanitation: Structural Factor Analysis .....	0
2.1 Socio-political and Economic Dynamics: Revisiting Approaches .....	0
2.2 Attacking Poverty: Looking through the Lenses of Hard-core Poor .....	0
2.3 Reverting Ideational Poverty .....	0
2.4 Breaking the Dependence-chain .....	0
2.5 Moving Ahead from Top-down to Participatory Approaches .....	0
2.6 Community First: Motivation Decentralized .....	0
CHAPTER - 3 .....	0
Community-led Total Sanitation (CLTS) .....	0
3.1 Bangladesh Perspectives of Total Sanitation .....	0
3.2 What is CLTS? .....	0
3.3 The Indicators of the CLTS .....	0
3.4 National WatSan Policy Principles Corresponding to the CLTS Approach .....	0
3.5 The Vision .....	0
3.6 Software Comes into Being .....	0
CHAPTER - 4 .....	0
A Journey towards the CLTS Approach .....	0
4.1 The CLTS: Mission Redefined .....	0
4.2 Processual Linkages .....	0
4.2.1 Situation Analysis .....	0
4.2.2 Role Distribution .....	0
4.2.3 Execution in Perspective .....	0
4.3 CLTS Implementation Strategy .....	0
4.4 The Process of Identification of the Hard-core Poor .....	0
4.5 People Counts First: Involving Community in Joint Stakes .....	0
CHAPTER - 5 .....	0
CLTS in Action: Leadership, Coordination & Participation .....	0
5.1 Leadership .....	0
5.1.1 Decentralization in Leadership.....	0

5.2	Coordination .....	0
5.2.1	The Process: Stages of Coordination .....	0
5.3	Participation .....	0
3.3.1	Community Alliances Holding Stakes in Participation .....	0
CHAPTER - 6 .....		0
Capacity Building and Service Promotion .....		0
6.1	Training: A Means of Capacity Building .....	0
6.1.1	Enhancing Leadership and Management at the Community .....	0
6.2	Promoting Partnership .....	0
6.3	Sensitizing People through Promotional Activities .....	0
6.3.1	Institutionalizing Hygiene Education .....	0
6.4	Promotion of Hardware Facilities .....	0
6.5	Follow-up & Monitoring.....	0
CHAPTER - 7 .....		0
Conclusion .....		0
REFERENCES .....		0

## Foreword

Bangladesh has been progressing optimistically towards a satisfactory WatSan scenario in the recent times despite many challenges. The moves from the government, development agencies and stakeholders addressing the problems and focusing on effective progress have proven their pledges for a desirable situation in the WatSan sector. Following the declaration of the World Summit on Sustainable Development in 2002 in Johannesburg, in line with the MDGs, “To halve, by the year 2015, the proportion of people who do not have access to basic sanitation”, the Government of Bangladesh has initiated intensive campaign to reach the goal “Sanitation for All by 2010”. The UN-proclaimed new water decade ‘International Decade for Action, “Water for Life”, 2005-2015’ has also added a new dimension on way to achieve the goal. In this line from SACOSAN, held in October 2003, onwards the government has taken many positive steps while pledging for all out cooperation from all development partners concerned. As a result the complementing role by the NGOs, CBOs, women, school-teachers & students, religious leaders, influential community people, cultural activists, monitoring bodies, hardware support service providers in collaboration with different layers of the local government and other stakeholders have been contributing in achieving a remarkable success in sanitation promotion throughout the country. NGO Forum, being the apex body of the WatSan NGOs and private sector operators in Bangladesh has been facilitating the Union-based Total Sanitation since 2003 following the Community-led Total Sanitation (CLTS) approach while the local government institutions (LGIs) remain in the coordinating position. NGO Forum has documented its success and experiences in facilitating the Union-based Total Sanitation.

The book *Total Sanitation: A Community Stake* upholds a complete process of motivation and mobilization services along with hardware provision, and the impact and effectiveness of the services facilitated by LGIs, NGOs and the community allies from an evaluative perspective. The Book presents and reflects the success of the CLTS approach that leads to understand the capabilities and experience, and the effects of Union-based Total Sanitation implemented within the intervention unions of NGO Forum, and to know the level and dimension of LGI and community participation on way towards sustainability of the sanitation facilities and hygiene behaviour.

The *Book* is a documentation of the fact-based efficiency of implementation process as well as the motivation methods having the community itself involved in the process ranging from planning to monitoring under the Community-led Total Sanitation approach. The *Book* also describes the ins and outs about NGO Forum’s Union-based Total Sanitation upholding the theoretical issues of CLTS in the light of its theoretical perspective along with the implementation process and its success in the intervened unions. In relation to this the *Total Sanitation: A Community Stake* also bears the significance to be used as a reference book for the policy and programme planners, development professionals, relevant stakeholders in the civil society as well as the academicians since, to my knowledge, there is no any other publication yet where interested readers, agencies or individuals are able to know about total sanitation following the CLTS approach in a complete form.

I have the pleasure to take the opportunity to thank the resource persons Dr. Helal Mohiuddin and Md. Ayub Ali of SRDS who took all the pains to win over every hurdle while conducting the study and making it processed with all their professional skills and knowledge to get this *Book* published as a spade work. I express my gratitude to Danida for its sincere support by sharing resources for conduction of the study and publishing the Book. I appreciate my colleagues' committed contribution who worked hard for giving the publication a final shape.

I hope, the *Book* would be of great interest to its potential readers, in particular to those who are interested to know the evolution, implementation and the success of Union-based Total Sanitation following the CLTS approach in Bangladesh.

**S.M.A. Rashid**  
December 2005

## Preface

NGO Forum has been laying a great emphasis on national sanitation promotion. For promoting the sanitation situation of a community NGO Forum facilitates the implementation of its programme through the partners targeting the total population of a respective community in a community-managed approach. With a view to scaling up the experiences of its community-managed approach in a wider range the Forum has initiated a new and innovative programme—Union-based Total Sanitation. The Union-based Total Sanitation is implemented following the Community-led Total Sanitation (CLTS) approach while each and every household of a union is targeted for 100% sanitation coverage. Starting in the year 2003, following *The Dhaka Declaration on Sanitation*, NGO Forum has so far been able to cover 56 unions with total sanitation facilities. Through implementation of Union-based Total Sanitation the Forum has been complementing in reaching the goal “Sanitation for All by 2010”.

The book *Total Sanitation: A Community Stake* begins with the theoretical perspectives of CLTS as an approach under the Union-based Total Sanitation based on the global, regional and national context. Since the perspectives of CLTS approach are identified through awareness building, motivation, capacity building and sensitization of community allies, on way towards making it more clarified the CLTS approach has been presented with its working definition & indicators, its correspondence with the national WatSan policy principles, its implementation strategy and with the direction how it covers the leadership, coordination and participation issues as the three core attributes while the process is translated into action.

The *Book* proceeds depicting the picture of the process and success of CLTS as an effective approach followed under NGO Forum’s Union-based Total Sanitation. The community people play the role as main actors, local government leads and coordinates, and intervening NGOs play all out facilitative role of motivation and mobilization of respective community people. The respective community allies i.e. school teachers-students, religious leaders, village male & female groups, Ansar-VDP, local elites, community health workers and other relevant stakeholders at the local level are the key catalysts in facilitating the approach. The remarkable and exceptional contribution of these allies in bringing total sanitation coverage success has come along their dedicative moves to ensure mass participation in the respective unions. The community allies hold the stake to achieve the sanitation progress in their union while the hygiene practice becomes established in the community through the active participation and motivation of the people themselves. The approach also has broadened the horizon of the government’s attention towards bringing the service providers, stakeholders, and beneficiaries exploring the safety-net provision for the hard-core poor families under a unified umbrella; and covering all these, in due course, ‘participation’ and ‘motivation’ become the two integral and inevitable constituents of CLTS.

With the orientation and facilitation of the LGIs and NGOs, various committees, formed under the process, participate in the determination of their needs and persistent problems. As the community members themselves determine the action plans based on their needs, they voluntarily take implementation initiatives, and distribute responsibilities among the community members. Such collaborative and associative venture, in turn, inspires individuals to treat sanitation movement not from an individual’s viewpoint, rather to conceive it from a

common ground of interest—as a community stake. According to their identified needs with the assistance from the facilitating agencies they carry out different type of promotional services to sensitize the community people towards total sanitation. In line with their active and effective participation people themselves constitute an efficient resource base. There are singers, dramatists, musicians, lyricists and other talents around and among community members. These available resources are viably translated to community capital for mass mobilization. Once these groups are properly brought into motivation, they generate and produce their learning among others. Thus, CLTS by its nature of implementation process, as highlighted in the *Book*, brings people together, and helps them to exert their human capabilities with their full potential.

Capacity building under CLTS approach encompasses skill and efficiency development of all actors engaged in Union-based Total Sanitation. While training has been considered as the most essential means of capacity building, many other means have also been involved in total sanitation movement. Alongside providing the training support to the actors, maintaining and facilitation of regular collaboration, coordination and leadership role by and among the actors and other stakeholders have contributed significantly in implementing total sanitation.

On completion of the capacity building measures and community mobilization initiatives, the process acknowledges and approves availability of hardware services as the prerequisite to translate people’s awareness into practice. This is the ultimate goal of Union-based Total Sanitation. In line with this, NGO Forum in collaboration with its partner NGOs and Union Parishad has provided many of the private producers with financial support to set-up new VSCs in relation to help meeting the community demand for hygienic latrine alongside the provision and facilitation of safe water supply facilities.

The *Book* ends throwing light on NGO Forum-facilitated Union-based Total Sanitation based on the total sanitation perspective in reality. If viewed from the step-by-step perspective the 100% latrine coverage can be considered as the first stage of total sanitation. The *Book* clarifies that “once bad bygone practice changes, and people assumes the essentiality of hygienic latrine use, it becomes their personal stake, and that since then they capture the possessive attitude for latrines. Once their inclination to possess a sanitary latrine is turned into an unavoidable demand for it, they themselves bring the other steps forward”. This is truly the secret of NGO Forum’s Union-based Total Sanitation success following the CLTS approach.

Our effort of publishing this *Book* would be meaningful if it is worthwhile to the professionals and potential readers.

**Joseph Halder**  
December 2005



# CHAPTER - 1

## Sanitation: Global Meets Local

### 1.1 Universal Sanitation Needs in Perspective

In September 2000, 191 member states of the United Nations (UN) General Assembly have pledged to meet their eight priority needs by the year 2015. The attention has resulted in the adoption of the *Millennium Development Goals (MDGs)* of the UN. While global concerns and attentions were put in common into eradication of extreme poverty and hunger, achievement of universal primary education, promote gender equality and empowerment of women, reduction in child mortality, improvement of maternal health, combating of HIV/AIDS, malaria and other diseases; and development of a common platform towards global partnership for development; environmental sustainability has come to fore as a priority need of the developing nations. Throughout the process, the notion of “environmental sustainability” is transcribed as a means of securing universal environmental sanitation for all inhabitants of the world. Environmental sanitation has also been considered to have greater implication for reducing child mortality – the other millennium development goal of the United Nations.

In this line of thought, the environmental sanitation component of the MDGs of most developing countries set two specific targets: 1) reduction of under-five mortality rate to two-thirds by the year 2015, and 2) improvement of livelihood of at least 100 million slum dwellers all over the world through ensuring their access to safe and hygienic sanitation. In order to boost up the spirit of environmental sustainability, the UN has proclaimed a water decade – ‘*International Decade for Action, “Water for Life”, 2005-2015*’.

The World Summit on Sustainable Development (WSSD) that took place in 2002 – two years after the MDGs adoption, has propelled this need once more. The implementation plan of the WSSD puts forward a specific sanitation target for the developing countries. This plan was built upon background information that at least 2.4 billion people of this universe lacked access to proper sanitation. Thus, the participating countries agreed to halve the number of people having no access to basic hygienic sanitation by 2015.

Two specific goals, in general, were devised out as universal sanitation target. The goals are: 1) to halve, by the year 2015, the proportion of people who are unable to reach or afford safe drinking water, and 2) to halve, by the year 2015, the proportion of people who do not have access to basic sanitation. Member countries that were more lagged behind in establishing hygienic sanitation practices compared to their relative progress in securing safe pure drinking water put major attention to meeting the sanitation goal of the WSSD. This has inspired many developing countries to declare an intensive sanitation movement with a target to reach the full coverage by the year 2015, while Bangladesh has set its goal “*Sanitation for All by 2010*”.

As well, the participating countries envisioned hygienic sanitation movement not only as an implementation issue, rather they have taken into consideration the notions of differential impact of needs and accessibility between classes and gender, sustainability, affordability,

maintenance, effectiveness, supportiveness and compatibility in terms of diversities in political, economic, environmental and social contexts.

## 1.2 Revisiting Regional Stakes

The movement has gained a tremendous boost through the South Asian Conference on Sanitation (SACOSAN) 2003. The Conference was held in Dhaka during 21-23 October 2003. The heads of delegation from the nine countries participating in the Conference ratified and adopted *The Dhaka Declaration on Sanitation* – a landmark regional policy towards sustainable sanitation. The Conference produced consensus and unanimous agreement among the participating states to vow on adoption of all out efforts to uproot the practice of open defecation, to save one million children under the age of five from dying each year of water and sanitation related diseases. They also reached a common definition of sanitation, and decision to pay adequate attention to the sanitation needs of vulnerable and marginalized population in urban and rural areas.

Numerous remarkable decisions emerged out of the Conference. One of the significant outcomes of the Conference was adoption of a people-centered approach of sanitation. The member states recognized that conventional, top-down approach in earlier sanitation strategies were counterproductive in nature. The second important development was observed in the process of rigorous and unbiased evaluation of earlier attempts of sanitation development. In a fact-finding fashion, the delegation spoke aloud of the flaws attached with subsidized sanitation, rationing and relief. To their viewpoint, hardware subsidy policies and provisions have failed to bring about expected development in sanitation practice of people. Although they did not rule out the yet persisting need of indirect subsidy for *hardware*, the *software* services was considered to be a must to accomplish desired sustainability of the sanitation movement. Another progress was made through the declaration that further focused on the notion of household-level sanitation coverage, and prioritized the needs of collaboration of government organizations (GOs) with non-government organizations (NGOs). The importance of establishing basic sanitation was reiterated, and it was agreed upon that small-scale private initiatives to produce cost-effective sanitation hardware be strengthened, demand be generated, and delivery services be ensured at the door-step.

The paradigm of proper sanitation and hygiene movement in the regional context was declared as “people-centered, community-led, gender-sensitive and demand-driven” (UN: 262). A further extension of this approach led to the inclusion of the resolution in the declaration that hardware subsidies should go only to the “poorest of the poor” (UN: 262). It was spelled out that the community subsidies would go for “promotion, awareness, capacity building and the creation of funding mechanisms for scaling up sanitation and hygiene programmes” (UN: 262). The wide array of sanitation movement considerations also entailed research and development parading in it. It was propagated that hardware component, i.e. the sanitation technology options would be viable, locally appropriate and available at affordable cost. Throughout the process determination, the ideas of “strategic partnership” between the local government and supportive community-based organizations (CBOs) and partner NGOs, as well as grassroots-level community sanitation and hygiene education in schools have also gained considerable momentum in this policy declaration. Yet, the SACOSAN policy body did not leave untouched

the options for follow-up of progresses between countries. Thus, members agreed to held regular SACOSAN Inter-country Working Group meetings in every two years to share the progress updates directed towards a viable and sustainable regional cooperation for sanitation.

### 1.3 National Level Response

This chronological development transition and translation of global development needs into local goals has paved the way to national sanitation plans and strategies at government level. Following MDGs and SACOSAN policies, national level response of Bangladesh to the promises for a desirable WatSan future took a grand leap. In the due course of time, The Government of Bangladesh has declared an ambitious sanitation movement "*Sanitation for All by 2010*". Meanwhile the United Nations has proclaimed the decade as the *International Decade for Action, "Water for Life", 2005-2015*. Correspondingly, the strategic partnership between different layers of the local government, stakeholders including intervening NGOs, CBOs, women, school-children, influential community people, cultural activists, monitoring bodies and hardware support-service delivery people have added a new dimension to the movement.

Beginning from 2003, October of each year has been being observed as the "*Sanitation Month*" throughout the country. In capacity of being the lowest layer of the local government institution, the Union Parishads have been bestowed with the coordination and leadership role in the implementation of union-based sanitation programmes. The Government of Bangladesh (GoB) has adopted the policy to direct the Union Parishads to allocate 20% of their Annual Development Programme (ADP) to ensure comprehensive sanitation coverage, especially to meet the needs of hard-core poor people. The Government of Bangladesh has also allocated Taka 50 million to carryout nation-wide sanitation projects. In 2004, the Government declared a special monetary award for the Union Parishads successfully reaching the target of total sanitation coverage and maintaining their sustainability. A National Sanitation Strategy has also been adopted in this regard. The government initiative has also focused on improvising indigenous sanitation technologies using available and affordable resources in order to meet local demand and subsequent smooth supply.

Upon several policy discussions held among various stakeholders in seminars, fora and workshops, the Local Government Department (LGD) of the GoB has adopted a national sanitation work-plan in 2003. The work-plan has identified the principles of the sanitation movement. The *principles* are:

- Sanitation is a human right
- Sanitation is primarily about health
- Sanitation is also about privacy, dignity, safety and security
- Creating and sustaining demand
- Hygiene promotion and behavior change
- Software financing are needed for scaling up and sustainability
- Hardware subsidy only for the poorest
- Communities are central to the sanitation planning process
- Gender sensitive approach
- Social, cultural and technical appropriateness
- Decentralization of decision-making

- Equitable allocation of resources
  - Partnership approach
  - Environmental integrity
  - Emergency preparedness
- (Adapted from Rahman, 2005:35)

The intensive national plan to accomplish 100% sanitation coverage has gained immense priority and added currency in the *National Strategy for Accelerated Poverty Reduction*, widely known as PRSP. The Strategy has clearly envisioned the correlation of infant mortality and lack of access of poor people to proper sanitation. Thus, the Strategy “envisages reducing mortality rate from the 200 benchmark value of 66 to 37 by 2010 and 22 by 2015” (GoB 2005:2).

## 1.4 Outcome Preview

While this discussion is gradually heading towards a substantial review of the impacts of implementation process and the software programme serving as the pulse of the process, it is an imperative to put a glance at the immediate outcome of the universally minded forward-looking national sanitation strategies. This evaluation starts from the point of departure of the World Development Report 2003 that presented a grimmer picture of Bangladesh sanitation status in comparison to other South-east Asian and South Asian developing countries, except Nepal. According to that report, Thailand ensured 96% sanitation, Sri Lanka achieved 94%, Myanmar reached 64%; but Bangladesh could secure only 33% nation-wide sanitation coverage. The government baseline findings at time of SACOSAN meet (2003) documented 33.21% national sanitation coverage status.

This discussion dates back further to the evils of low sanitation status, and evaluates in that line the positive impact of the sanitation movement on people’s livelihood. For instance, the sanitation component of the MDGs was principled on several grounds. First, it was much talked in international fora that diarrhea used to cause untimely death of more than one hundred thousand under-five children. Millions of children lack adequate nutrition due to diarrhea, and subsequently fall victims to arrested physical growth, loss of eyesight and resistance to other type of diseases like typhoid, dysentery and hepatitis. In Bangladesh context, the 2003 statistics presented the fact that 71% rural and 40% urban households were practicing open defecation causing water pollution related widespread water-borne diseases, and that treatment of these diseases cost approximately Taka 5,000 million of Bangladesh. It was also analyzed that “the cost would be much higher if the loss of income, time spent and patient care and effect of child development are factored in” (GoB 2005:2). As per estimate, diarrhea causes loss of 5.7 million Disabilities Adjusted Life Years (DALYS), which is 61% of total DALYS. Lack of sanitation is directly related to high child mortality. The crude estimate was that “over 65 million episodes of diarrhoeal diseases occur annually among under-five children”, and that 110,000 children in this age category died of diarrhea every year (GoB 2005:2). On an average, every child suffered from three-four episodes of diarrhea every year.

Now that the local government institutions (LGIs) and NGOs are reporting an optimistic scenario of 100% sanitation coverage accomplished in numerous Unions, this study evaluates current disease prevention status of selected Unions reaching 100% sanitation coverage. An instant picturesque on a positive development in sanitation that took place during 2003-2005 is

worth presenting here. By June 2005, Bangladesh's sanitation coverage reached an all time high 59.5%, which, by far, reflect the best outcome in the South Asian region. The 100% hygienic latrine coverage in 482 unions all over the country by June 2005 has contributed to reach this success. The NGO Forum for Drinking Water Supply & Sanitation, the apex body in the WatSan sector in Bangladesh, the leading service provider of this movement has made a tremendous stride behind such accomplishments. By December 2005, 56 of 106 unions receiving NGO Forum's services under Union-based Total Sanitation have accomplished 100% hygienic sanitation coverage. NGO Forum has been providing software-hardware integrated services through its partner organizations (PNGOs) to implement the Union-based Total Sanitation following the CLTS approach in collaboration with the Union Parishads. Twenty other unions that have accomplished 85-95% coverage are expected to meet this target soon. Fifteen other unions have achieved 65-83% success while the rest of the unions are lying under 60% coverage in Community-led Total Sanitation.

A GoB study (GoB 2005:3) conducted on unions that reached 100% coverage reflects that proper sanitation could positively lead to poverty eradication and improvement of quality of life of people. Proper sanitation also adds much in disease control and overall well-being of people. According to the finding of that study, total sanitation reduced diarrhea in those areas by 99%, dysentery by 90%, and other stomach-related problems such as intestinal worms by 51%. "As a result, monthly medical costs for common illnesses decreased by 55% in rural areas and 26% in urban areas. Working days lost due to illness fell from 77 to 35 days per year, and school days lost due to illness fell from 16 to 7 days per year in rural areas" (GoB 2003:3). Thus, income of households increased through savings accumulation. People use such additional savings in their well-being and livelihood development expenditure. In areas having total sanitation, people's expenditure on food and clothing increased by 6% and 2% respectively (GoB 2003:3).

In the light of this optimistic outcome, this documentation intends to record and analyze fact-based efficiency of implementation approaches, thereby the community mobilization processes. Since the NGO Forum has come forward to deliver a complete motivation and mobilization services along with its hardware provision, the effectiveness and processes of software services provisions are analyzed from an evaluative perspective.

The specific objectives of this Book are 1) to understand the capabilities and experience, and the effects of 100% Sanitation Coverage Approach implemented through the Local Government Institutions (LGI) within the intervention unions of NGO Forum; 2) to understand the approach and level of LGI and community participation, and ownership and sustainability of the sanitation facilities facilitated by NGO Forum.

The specific outputs of this study is documented in line with the perspective of analyzing 1) the effects of facilitated promotional activities on community participation and status of 100% union-based sanitation coverage. 2) As well, it is an imperative to the assessment of the approach run in participation of the community and other stakeholders on implementation of supportive programmes and assessing the forms and outcome of LGI participation. 3) Assessment of the benefit of the hard-core poor households addressed under the programme in line with recent policy of the government. 4) To analyze the operation and maintenance status of the hygienic latrines facilitated by NGO Forum. 5) Finally, to reflect on overall hygiene practice and health status in the coverage unions in line with the socio-economic factors.

## CHAPTER - 2

### Proper Sanitation: Structural Factor Analysis

#### 2.1 Socio-political and Economic Dynamics: Revisiting Approaches

An earlier piece of evaluative research documentation of the NGO Forum (Ali & Hossain 2003) captures socio-economic dimensions affecting water and sanitation conditions in Bangladesh. The general features that are to be substantially obstructive to community participation are poverty, lack of education, lack of awareness regarding development issues, traditional value systems and traditional practices of rituals and habits. However, the prominence of economic deterministic model of the eighties has always prioritized poverty and poverty eradication from a supply-driven point of view. Consequently, this has led most development interventions' supply-driven poverty-fighting strategies.

Meanwhile, in the early nineties, the social aspects have gained ground. Social aspects like the power structure, social structure, social faction and conflict; stratification, kinship, gender and other inter-personal relations in respect to economic relations were accounted as two sides of a coin. They were also viewed as the factors prompting community people play deterministic economic role. It was repeatedly argued that people's perception and needs grossly differ due to their social positioning and identity-differentials. Different groups of people like men-women, rich-poor old-young and so on experience health problems and diseases differently. Consequently, their perceptions about remedial measures remain widely different from one another. These differences were blamed for posing potential barrier to participatory policy-planning, implementation, evaluation and monitoring; because it has always been a hard job to make a trade-off point or junction of varied interests and needs under a unified model. These theoretical considerations led to group-based, to some extent community-based development modeling. By and large, poverty-focused supply-driven policies existed as a means of poverty eradication.

Yet, the cultural aspects such as beliefs in traditional mores and life-ways, superstitions, dogmas like belief in *Ula Devi*, superstition about the interconnectedness of sugary food and worm infestation have largely prevailed in public mind. These cultural mind-sets disappear from people's worldview quite slowly—especially upon advent of proper education, knowledge, sensitization and motivation. However, most development interventions in the late nineties incorporated the notion of motivation as an indispensable condition for progress. Participation appeared as an obvious ideological basis for motivation, because individual level motivation has little to do with community-based development. Moreover, individual measures of motivation often give rise to conflict between the motivated and the deprived. In opposite, community-based motivational efforts serve as a social capital for common good. Given these structural factors affecting policy-decisions, reversal of ideational poverty, breaking dependence-chain and bottom-up approaches are brought to fore towards proper sanitation for all.

## 2.2 Attacking Poverty: Looking through the Lenses of Hard-core Poor

For most people in Bangladesh, poverty reduces the prospect for their attainment of human capability. Therefore, direct attack on poverty constitutes one of most vigorous public agenda of social and livelihood development. Direct attack on poverty as a strategy requires that the intrinsic factors of poverty be traced, and needs be classified through priority criterion. While Bangladesh has been experiencing 5% annual growth rate in national income, only 1% decline in annual income poverty rate reflects imbalanced and disproportionate development outcome. This grim picture also reflects a widened gap between the rich and the poor people. In a word, it is recognizable that the rich people are becoming richer, and the poor people poorer in respect to their access to and control over everyday life basic needs and core civic amenities. This is why poor people still constitute 50% of the total population of Bangladesh (LGD 2005:1).

The hard-core poor are the poorest among these 50% poor people. As per estimate, about 20% of total population of Bangladesh is hard-core poor. Lack of money to afford any essentials is the prime indicator of the hard-core poor. While the country's total sanitation coverage is only 59.5% at present, 60% of them are privately owned. According to the LGD estimate, 73% people of the rest uncovered areas blame lack of money as the major reason for not having proper sanitation. Among these people, who literally fail to contribute even a small share of service cost can be treated as the hard-core poor people. The level of sufferings and loss in usual condition is also highest amongst this group. The incidences of child mortality of 94 per 1,000 live births and 66 infant mortality of per 1,000 live births take place within this poorest group. In order to get a concrete picture of the hard-core poor some factual references are worth mentioning here. The poor people generally constitute the band of disproportionate beneficiaries of the service delivery provisions in the front of accessibility to pure drinking water too. Of the nation's 10 million Tubewells for pure drinking water, 9 million are privately owned. It means that about 22 million households of the country have to depend on only one million community Tubewells. While the poor people have the lowest level of access to these community-based sources of water, the hard-core poor do not at all have access even to the community Tubewells.

This above stated disparity in the livelihood condition of the poor and the riches, and differences of access to provision among within the poor people reassert the need for revisions of the national pro-poor policy prioritization process. As the benefits of increased income are not distributed equitably between the poor and the riches, they do not lead to proportionate reduction in poverty.

In the context of total sanitation movement, the *Pro Poor Strategy for Water and Sanitation Sector in Bangladesh* built upon the notion of lack of income-capability of poor people—which is considered a major barrier to attaining comprehensive development in health and hygiene at community level. Correspondingly, national level strategic choice was guided by the principle of helping the helpless—making the dispossessed possessed. The highest priority is put in capacitating the hard-core poor through service delivery in line with the intensity of their impoverishment. The more the people are impoverished, the more they need support to recover from their dispossessed state. Two major needs recognized in this context are that first, “there is a need for ‘direct attack on poverty’ as the benefits of growth are not distributed equitably” (LGD 2005:1). Second, the ‘safety-net’ approach refers to the needs of reducing poor people’s dependence, and aiding them towards self-reliance; thus curtailment in sanitation subsidies

overtime. This national level approach, as claimed (LGD 2005:1), uses the catchwords “*putting the last one first*” referring to that the public strategy to capacitate the hard-core poor would be materialized through making them active participants of the movement, instead of increasing charity-like financial investment in pro-poor sectors.

### 2.3 Reverting Ideational Poverty

“*Sanitation for All by 2010*” requires an integrated implementation process in removal of structural barriers to proper sanitation. While poverty is an intrinsic barrier, lack of hygiene education, and people’s century-old open defecation practice and traditional mind-sets also contributed to a great extent to the low sanitation coverage throughout the country over the past years. It was reflected in the comprehensive national sanitation survey of 2003 that 73% people reported their lack of money for not having hygienic latrines. Around 25% people mentioned their lack of awareness, 11% related the problem with lack of latrines, and only 4% stated their preference for open defecation. The high frequency of people’s opinion about lack of money, indeed, indicates to the need of low-cost affordable sanitation provision.

However, it has been revealed through the grassroots communication and extensive fieldworks among the stakeholders that provision of low-cost and affordable sanitation hardware delivery alone would not make any notable progress in reaching proper sanitation goal. As for Islam (2005), “the causes of unsanitary living conditions of our rural areas are more psychological than economical” (2005:55). He further explains, “A poor rickshaw puller spends 3 to 4 Taka a day for smoking purpose; the accumulation of which is Taka 120 a month, but he considers Taka 200 is too much for him to construct a latrine all over his life” (Islam 2005:55). It has been reiterated by NGOs and sanitation workers that the people are to make realize and grasp “the actual meaning of sanitation and its implication and necessity in practical life” (Islam 2005:55). Without realizing this essence and message in public mind-sets, no GO-NGO measure can reach an expectable outcome.

### 2.4 Breaking the Dependence-chain

Several follow-up measures of NGO Forum reveals the fact that the provisions of subsidy, free latrine distribution, and other supports often appear as counterproductive for the poor. There are abundant instances that free latrines were broken and used for otherwise purposes by the recipient-users; because such provision does not necessarily attach sense of responsibility or ownership of the users towards sustainable use and maintenance of the hardware.

Throughout NGO Forum’s evaluation visits on sustenance of sanitation in rural areas, it has repeatedly been drawn that there are people in every community who do not install hygienic latrine despite having adequate affordability. Even for the motivation workers, and grassroots level mobilization communicators and advocacy extensionists, the problem of lack of motivation among people appeared as one of the harshest challenge in carrying out a comprehensive nation-wide sanitation movement. To revert these obstacles, the NGO Forum along with other NGOs implementing WatSan programme campaigned to and lobbied with the international and national level policy-makers for integration of total sanitation following the Community-led Total Sanitation (CLTS) approach in the national sanitation strategy. The



approach is based on the idea of attaching community level peer-pressure, influence and demonstration-effect for a sustained motivational change among the users of the hygienic sanitation. The objective thus far goes towards reverting bad bygone practice of people forever. The notion of sustainability of proper sanitation practice has been taken to consideration as an inevitable condition of total sanitation.

## 2.5 Moving Ahead from Top-down to Participatory Approaches

The other side of this coin relates with institutional barriers of top-down implementation practices and bureaucratization. Since 1954 to 1981, the local governments played this sole responsibility with its limited technical and bureaucratic scopes. Since 1981, with the launching of the UN-declared *International Drinking Water Supply and Sanitation Decade* (IDWSSD), the NGO intervention in development practices as well as in the development of water and sanitation condition began to bring some advancement of the idea of collaboration, sharing, exchange and relaxation of top-down policies. This has resulted in an increase of nation-wide sanitation from 2.5% in 1981 to 6% in 1991. Yet, the approaches did not yield any substantial pro-poor or participatory development turn. Subsidization, relief and free distribution of sanitary hardware had resulted in a patron-client relation of the service provider and the recipient. Such practices had far-reaching political implications too. The local government representatives used to utilize such movements on political grounds—to secure vote bank and their authority. Mobilization and motivational activities remained a neglected phenomenon until then.

These experiences triggered the concerns of NGOs towards more mobilization and motivational needs for the grassroots beneficiaries. In 1992, UNICEF helped to strengthen GO-NGO collaboration through its support to the project titled “Social Mobilization for Sanitation”. The Department of Public Health Engineering (DPHE) and NGO Forum implemented the Project jointly. A total of 120 national and local NGOs mobilized people of 20 upazilas of Bangladesh to install around 370,000 latrines ensuring the people’s participation in the process. Yet in the absence of adequate follow-up and debriefing, and one-sided motivational activities from the NGOs, the programme could not make any major shift from top-down approach to participatory approach.

## 2.6 Community First: Motivation Decentralized

It has always been a sheer challenge for the catalysts to bring change to people’s mind-set and traditional sanitation practice. There are instances that the people in the processes of change have encountered many unpleasant situations, suspicion, resistance, and criticism against the very philosophy and the work process of the movement. An instance is drawn by Islam (2005:57) from Rajarhat upazila of the Kurigram district. The target people were grossly suspicious and critical of the motive of the catalysts, especially the educated and well-dressed people. They openly expressed their reservation about the motivation workers—especially the officials. The reasons were manifold in many places. In that specific region, the problem was incorporated with the people’s unsettled social condition, as large number of inhabitants of that upazila migrated long ago from India, and could not make a land possession until then due to bureaucratic and administrative tangles. In many other places, prejudiced community people

resorted to question the honesty, sincerity and firmness of motive of the members of local government institutions. Yet, as a point of departure, it has come to catalyst view that the strength, authority, legitimacy and public relational advantage of the local government institutions can and should be utilized for output maximization.

Thus, motivation has always been viewed as a difficult task for the development workers. However, an integration of both vision and mission can make such apparent difficulties disappear. Whereby leadership is at the heart of the mission, turning leadership into a workable leadership capacity can be achieved only through infusing forward-looking vision in them. To say from an institutional perspective, the Union Parishads hold the legitimate and democratic leadership position. However, this institutional leadership in many parts of the country had been experiencing widened gap with people, and perceived problem of accountability and acceptability. Here comes the notion of intervention and collaboration of community people as a combined force. Thus, inclusion of the community leaders such as *matbars*, *imams*, *school teachers*, *local elites*, *social workers*, and other *influential community personalities* appeared to be the driving force of motivation processes.

The gendered conditions of social and community participation, however, were not forgotten. It has resulted in giving the women members of the Union Parishads due recognition to take part in this community venture. Given conservatism, patriarchy, religious barriers and veils, women in domestic premises constitute a closed entity, where male outsiders cannot reach for motivation campaign. Since women have greater access to community women and their domestic premises, inclusion of women members in the process was an unavoidable timely need. Moreover, women's traditional entitlement with child bearing and rearing, maintaining healthcare and nursing of ill family members influenced considering them as prime target for motivation. Women's greater sedentary status within household boundaries in comparison to migratory nature of income-earner men makes women-focused motivation a further stronger requisite.

## CHAPTER - 3

### Community-led Total Sanitation (CLTS)

#### 3.1 Bangladesh Perspectives of Total Sanitation

Proper sanitation is a universal need of every community irrespective of community members' socio-economic condition. While the notion of total sanitation refers to a comprehensive achievement in hygienic sanitation for all, it essentially includes the community stakes in perspective. Community and community-coverage of hygienic sanitation practices, thus, are two identity markers of total sanitation. Therefore, the perspectives of CLTS are identified through motivation, education, capacity building and sensitization of community people in such a manner that their behavior becomes instilled in practices that everyone –

- uses hygienic latrine, and there is no open or hanging latrines
- washes hands with soap or ash before and after latrine use
- keeps food and drinking water adequately covered
- practices good habits of personal level cleanliness and hygiene
- takes part in hygienic latrine maintenance and care
- uses sandals before and after latrine use
- keeps household premises and adjacent walkways clean,

and to ensure everyone –

- dumps household remnants and dirt at specific places, and that excreta of domestic animals and pets be dumped in a manner that it does not raise any health concerns
- uses safe water for drinking and other domestic usages
- takes part in proper management of sources of water &
- disposes dirty water in a healthy manner (adapted from Halim 2005:51)

The first step to proceed towards total sanitation starts through defining hygienic latrines. According to the definition set by the LGD (2005:5), a hygienic latrine will mean to include all of the following attributes: 1) confinement of feces, 2) sealing of the passage between the squat hole and the pit to effectively block the pathways for flies and other insect vectors thereby breaking the cycle of disease transmission, and 3) venting out of foul gases generated in the pit through a properly positioned vent pipe to keep the latrine odor free and encourage continual use of the hygienic latrine.

In light with the criteria and definition of hygienic latrine, a glimpse on the sanitation condition of Bangladesh is worth presenting here. Under comprehensive support and leadership of the LGED, the task of a baseline sanitation survey on 6 city corporations and 278 pouroshavas was completed in 2003. The nation-wide survey conducted in 470 upazilas of the 64 districts took place under the leadership of the Union Parishad. Of the total of 21,078,267 families covered in this survey, 12,117,117 meaning 57.48% households were found using latrines. However, number of sanitary latrine users was still as meager as 6,834,824 or 32.42%. In terms of national compound in 469 upazilas under 64 districts, the number of sanitary latrine user households was 5,272,793 or

28.77%. Of the 57.48% available latrines, about 25% latrines were unhygienic and unsanitary. Thus, the non-user households numbered 8,963,245 or 42.52% of total covered households were given highest priority as target people. It was identified that 10,355,893 households or 49.13% people of this category did not use hygienic latrine only because of their lack of consciousness and motivation towards hygiene. Only 31% people within this category did not have access to proper sanitation due to lack of financial ability to afford sanitation materials. Households lacking space or common premises to install latrines were numbered 955,339, thereby only 4.53% of the baseline survey households (LGD 2004:3).

The picture of hygienic sanitation was little better in pourashavas and the city corporations. Around 56.70% households of the pourashavas and city corporations were found to be using sanitary latrines. The households lacking financial ability in these areas were marked only 11.29%. Beginning with this baseline survey findings, the sanitation movement began from the year 2004 with special emphasis on union-based 100% sanitation coverage target. The CLTS approach has been boosted up as national and regional strategic point of departure from this period. It is imperative in this context to outline the fundamentals and constituents of the Community-led Total Sanitation (CLTS).

### 3.2 What is CLTS?

“Community-led Total Sanitation is an approach that empowers and encourages the local community to extensively analyze their own environment, sanitary conditions and initiate collective local action to stop open defecation and move towards improved sanitation and hygiene behavior using their own resources and talents without waiting for external help or directions and prescription” (LGD 2004b:44). Being triggered by different participatory tools of Participatory Rapid Appraisal (PRA) and visualization of the probing outcomes, the process takes the shape of representation of community stakes in a community-level communicative matrix. Community cooperation, innovation, social solidarity, unity and giving the voiceless voice constitute the major part of the process. The other side of the coin is carved with capacity building— empowering the powerless with power of skill, conscience and consciousness.

In Bangladesh, NGO Forum alongside some other organizations has been promoting the approach. “Total sanitation is transforming the environment, health and well-being of many thousand of rural people. It represents a paradigm shift with huge potential for poor people in rural South Asia and elsewhere”. In the context of the union-based total sanitation movement in Bangladesh, the process refers to the attainment of hundred percent hygienic sanitation at union level. The total sanitation movement emanates from the very root of the community. The community is composed of wards, villages and paras. Small community organizations perform their roles in collaboration with other groups. The interactions within the community groups are the prime operational essence of the CLTS. Due to the people-centered approach of CLTS, it brings enormous credibility for replication outside Bangladesh contexts too. By now CLTS is replicated in Cambodia, Uganda and Zambia. In India, it is about to introduce in Ahmednagar and Nanded districts in Maharashtra state. There is also a bridgehead in Tamil Nadu and Himachal Province, Madhya Pradesh. Some other states of India have also shown their interest in launching the approach for their sanitation movement (LGD 2004b:47).

### 3.3 The Indicators of the CLTS

- Community is at the apex position of the intervention target
- Community is the prime actors in the movement
- Leadership comes out of communities themselves
- Community leadership should be decentralized in various tiers stretched up to the grassroots level
- Leadership should follow good governance mechanism
- Democratic process should be maintained in decision-making, programme designing and implementation
- Feedback, debriefing, follow-up and monitoring must be practiced to receive regular update of the progress and sustainability of the sanitation related achievements
- Tasks and obligation sharing between the development organization partners and local government units should be kept vibrantly active throughout the sanitation process
- Local actors should not only be made aware and active for the implementation periods only, rather be facilitated to grasp and realize the hygienic sanitation practice as one of the most essential components of livelihood

### 3.4 National WatSan Policy Principles Corresponding to the CLTS Approach

While the CLTS approach is comparatively new in the sanitation front of Bangladesh, the idea to some extent dates back to *National Policy for Safe Water Supply and Sanitation 1998*. This Policy refers to twelve (12) considerations towards nation-wide hygiene promotion. These *considerations* are:

- 1) **Basic needs approach:** Hygienic sanitation needs to be promoted and infused in the minds of people as like as their basic needs. The objective of such level of promotion is that people would treat attaining and maintaining this need as like their other basic needs.
- 2) **The value of water:** This refers to promotion of value of water among people as that of organic, social and economic significance. In this Policy, safety-net issue is considered to be an essential need to protect the right of the hard-core poor to their access to water. The present day development is that this charitable notion is replaced by communities' capacity building notion – developing in them even a marginal level of cost-sharing attitude.
- 3) **Participation of the users:** Although the preceding two principles do not clearly indicate how the stakeholder participation will be extended up to single-user level, the recent most CLTS approach bridges this gap with the notion of user level motivational campaign by the users themselves.
- 4) **Role of women:** Consideration of the role of women to be performed equally like men has taken a grand leap in the present CLTS process. Therefore, it can be argued that women do not play the mere supportive role in the CLTS process; rather the role-players are turned into participants. Instead of remaining as the facilitators, they are by now turned into actors.
- 5) **Technology options:** The provision of cost-effective and indigenously appropriate technology is still a dominant mode of policy consideration in the CLTS process. Yet the fundamental development in this regard can be traced through the present day priority in

promotion of people's voice and recognition of their innovative ideas in technology invention and use over earlier days top-down practice in technology prescription.

- 6) **Investment:** This Policy option is considerably modified in the CLTS process. In place of free-of-cost support delivery to the hard-core poor the CLTS keeps provision for the hard-core poor to invest in the service but their convenience. The philosophy of such development is that investment makes people more responsible and bestows them the sense of possessiveness for harnessing sustainability for their own sake.
- 7) **Integrated development:** The integrated development paradigm no more remains as a buzzword in the present CLTS context, because the process brings the various disjointed actors into a close circle. Therefore, the NGOs, civil society, community allies and elites, and the LGIs could join in hand to work together to meet a common purpose.
- 8) **Capacity building:** Indeed the notion of capacity building has gained the principal ground and the highest priority above everything else in the CLTS process. The dimensions of capacity building are also expanded than before. While the catalysts in earlier policies were targeted for capacity building, the CLTS approach nowadays extends capacity building services up to the single users through decentralization of motivation process up to the lowest ladder of the grassroots.
- 9) **Private sector:** Enhancing the capacity of private sector to invest and come forward in the promotion of sanitation technology is geared up in the CLTS process. This is reflected in extensive training programmes of the NGOs for masons and private producers of sanitation technologies.
- 10) **Environmental integrity:** While earlier policies did not reflect clearly on the issue regarding how environmental integrity would be compromised, the CLTS process puts environmental integrity at its peak. This is reflected in its priority in solid and liquid waste management and safe disposal of solid waste and waste water (Ahsania Mission 2005:9)
- 11) **Emergency responses:** The current CLTS approach is an unique enhancement of emergency responses maintained through frequent feedback, evaluation, debriefing and monitoring received from every layers of the stakeholders.
- 12) **Holistic approach:** Finally, the CLTS entails holism in its characteristic features. With participation of people of every walks of life and consideration of comprehensive socio-economic features of the community, sanitation has been turned into a nation-wide social movement. (Adapted from LGD 1999:6-8)

### 3.5 The Vision

As soon as socio-political and economic realities are brought into consideration, the CLTS approach is led to proclamation of the following *principles*:

- a) **Social movement:** Total sanitation can be achieved only through transformation of the GO-NGO actions into social movement. Social movement refers to addressing sanitation not as an individual venture, rather as a social stake. Social agents and resources should be used in viable manners to reach the objective of hundred percent sanitation accomplishments. It is realized that one's negligence in maintaining hygiene does not affect that person only; rather it has social consequences. One's inability or unwillingness to maintain proper sanitation may result in others' ill-health, disease and breach of social rights of hygiene. Thus, legal issues are also attached to proper sanitation. One's breaking

of social sanitation rules, in a way, is breach of others' health right. This motivation should be infused in every member of the society.

- b) **Participation:** According to Ali and Hossain (2000:18), "Participation is defined as a socially vibrant grassroots process whereby people identify the process as their own, with occasional help from the facilitators. The process is inherently educative, leading progressively to a higher level of consciousness, which evolves through newer experiences of facing reality. They are then able to participate as active subjects in the development process rather than the passive objects".

The social movement also means to maximum participation of people – not only towards taking self-benefiting measures, rather participation denotes going to others, making them understand and realize health implications of poor sanitation. As well, participation means assisting others, neighbors, community people and the disadvantaged groups with information and sensitization.

- c) **Capacity building:** Capacity building is the apex objective of the CLTS process. Capacity building means aiding the implementers to enrich their non-material knowledge-base, management skill, widening convincing efficiency, and enabling them make the right decision at right times. Capacity building also refers to accumulation of authority of control over any untowards situation. Sense of timing of the leaders in making decision in a prompt and quicker manner comes along their capacity building.

Another attribute of capacity building is leadership development. The skill to assess needs in various changing contexts, and efficiency to influence and sensitize others are other ingredients of capacity building.

- d) **Communication:** Communication plays vital role in any participatory social movement. The sanitation movement is also not an exception. Communication is a wider term that denotes regular follow-up, monitoring and establishing feedback loop. While the formal means of communication are composed of meetings, workshops, progress reviewing, briefing and debriefing of actual achievements to people, indirect means are comprised of publication, demonstration, festivities, miking, poster, dance-drama-music, sports and pastimes and informal gatherings. Hence, communication means conveying message to people in many ways as possible. The idea is to keep people informed.
- e) **Maximization of use of available resources:** Despite there are many material resources in abundance in nature and environment, the process brings into its consideration other non-material resources too. People's talent, skill, thoughts and ideas and commitment towards engaging themselves to achieve common goods are some of the non-material resources essential for the accomplishment of total sanitation. The CLTS process proceeds along the notion of maximum use of these resources for common good.
- f) **Integration:** The CLTS is an integrated process. It integrates management approach with behavioral development approach. Behavioral development is further integrated from individual level to community level. Therefore, hygiene education is considered to be an intrinsic part of the movement. Education and knowledge sharing integrates childhood

stake and livelihood stake to an unbreakable string. Through this approach, check and balance mechanism come into being. School children receive hygiene education from their schools, and make all possible rooms to practice that knowledge at familial and community circles. The support-service providers integrate modes of insistence and facilitation to the administrative actors such as Union Parishad representatives and upazila administration. These people integrate the resourcefulness of community allies and influential personalities in the body of management provisions. Thus, integration forms the part and parcel constituent of the sanitation movement.

- g) **Decentralization of ideas and action:** One of the greatest advantages of community-led development approach is that it paves the way to decentralization of ideas and consequent action. Age, sex, gender, social status and ranking constitute in most part different layers of experiences and world-views inside community. Needs and preferences of community people also have differential ideational basis. This community-led approach brings together disjointed experiences and thoughts of people of different walks of life. Therefore, the CLTS process stands in opposite to parochialism, top-down policy-prescriptions and centralization effect of bureaucratic development measures.
- h) **Motivation:** Motivation is a long-lasting measure of the process. It does not come immediately through individual-level campaign and sensitization efforts. Rather, a combined cohort of activities, direct and indirect mobilization, use of media and public mores, entertainment and pastime, and inclusion of religious agents in action construct motivated public mind.

The notion of sustenance is intertwined with motivation. What we call motivation should be an endured learning that does not diminish in the adverse course of time.

- i) **Empowerment:** Empowerment means bestowing power to people. Power does not necessarily denote political power. Like other instances, empowerment in the context of CLTS assigns human capabilities of community people. This is an opposite state of dependence of people to some demeaning conditions. People enjoy the fruit of empowerment in various ways. At the very outset, the process prioritizes building buying capacity or developing paying attitude of people for hardware than their possession as charity. Besides, giving people voice reflects their journey to empowerment. Now that people take part in idea sharing, problem finding, needs assessment and disbursing their opinions in a more democratic fashion, the process of their empowerment is accelerated. Listening to them harnesses their confidence and sense of self-dignity, making their participation worthwhile and meaningful. Recognition of their role, therefore, in a way, serves to their entry into increased empowerment.
- j) **Mobilization:** The CLTS process propels mass mobilization towards sanitation movement. This is guided by a unique management principle in which democratization, transparency, accountability and good governance are viewed with priority above everything else. With facilitative roles of the NGOs and NGO Forum's partner organizations, popular suspicion and mistrust to the local government administrations and the outsiders are eroding gradually. NGO Forum involves those partner NGOs that originate locally to meet local needs. This is an effective means to bridge the gap between



the insiders and outsiders, as well as a foremost condition of mass mobilization for the sanitation movement.

The *CLTS operational activities*, by and large, take place through the following continuum:

- 1. Identification and selection of operational areas:** Besides using earlier experiences, observation and in-house information base, NGO Forum also collects updated primary and secondary information to select the un-served and the under-served people and difficult areas for its operation. Before running full-pledged operation, it assesses, analyzes and verifies the interceptive variable indicators such as poverty, persisting safe water crisis, arsenic contamination, status of groundwater declination, saline intrusion, iron concentration, etc. These prior probing help generate its intervention policies in line with the technical and social factors.
- 2. Selection of local NGOs:** NGO Forum selects suitable partner NGOs (PNGOs) from the locality for the effective implementation of the sanitation programme. It follows certain criteria for selecting suitable NGOs, which includes reputation, community base, and willingness to promote CLTS in collaboration with the LGIs.
- 3. Planning meeting with selected NGOs:** Planning meeting is organized with the selected NGOs to orient them with guidelines, principles and operational strategies of the sanitation programme. These meeting outcomes also help the NGO Forum determine which trainings and support services would be appropriate for effective and efficient partnering and carrying out of the programmes.
- 4. PNGO skill development:** NGO Forum imparts different type of need-based trainings and orientations to the selected PNGOs so that they can effectively implement sanitation programme, maintain liaison and mediation role between inter-agencies, especially the LGIs, people groups and the implementation workers. The training courses and orientations include both hardware and software related aspects like management, mobilization, monitoring, O&M, etc. These are usually organized at different times on the basis of programme needs.
- 5. Establishing linkage:** NGO Forum facilitates the PNGOs, and PNGOs facilitates the LGIs to establish operational linkage with appropriate governmental institutions and organizations and department, private organizations, private sector operators, micro financing institutions (MFIs) and other development partners as and when required. These linkages, networking and collaboration are directed towards bringing the yet lagged behind people in the success stream and finally securing the sustainability of the successful cases.
- 6. Building up community organizations:** To ensure organized and effective community participation, the PNGOs form Village Development Committees (VDCs), Ward WatSan Committees and other groups of community allies in collaboration with the LGIs. These committees serve as the focal point of sanitation movement, and perform the role of catalysts from people themselves.

7. **Capacity building:** Based on the needs, the PNGOs organize orientations, trainings and exchange visits to the VDCs, ward committees, groups of community allies, school teachers, community health workers, imams, and local elites. These capacity building programmes help members to enhance their required skills for the effective management of sanitation programmes in the operational unions. As well, community people themselves become an inevitable part of the process.
8. **Development of action plan:** Each community group develops their action plan on the basis of sanitation needs in their specific areas of operation. The PNGOs of NGO Forum assist them with technical facilitations about the mechanisms of finding out their needs, and determine the ways of meeting these needs. The groups also change their action plans as and when required.
9. **Community mobilization and demand creation:** PNGOs organize and conduct different type of community mobilization activities such as community meetings, courtyard sessions, popular theatres, children activities, school-sessions, mosque-based discussions, rallies and miking, etc for awareness raising which contribute in creating demand for sanitation facilities among the community people. These activities are designed and developed on the basis of perceptions and relevant capacities of the target people.
10. **Mason training:** NGO Forum, through the PNGOs facilitates mason training on different types of low-cost, appropriate and affordable hygienic latrine options. Being capacitated from the mason trainings, the masons produce hygienic latrines available in various Village Sanitation Centres (VSCs), and also extend technical input in installing these latrines at community level.
11. **Hardware supply:** Under the CLTS approach, NGO Forum promotes demand-responsive hardware supply in place of previously existed supply-driven revisions. Through PNGOs, thus, NGO forum facilitates the cost-sharing habit of the user at the community level.
12. **Caretaker's training:** NGO Forum facilitates the PNGOs in organizing and conducting caretaker's training with the objective to impart technical knowledge and skill to the participants, in order to keep the sanitation initiatives operating and in good condition.
13. **Community-based participatory monitoring:** In order to ensure optimum use of hygienic sanitation and latrines and promote hygiene practices, NGO Forum helps the PNGOs as well as the local community allies in carrying out community-based monitoring.

Besides, the PNGOs must ensure recruitment of some community level volunteers composed of both men and women members of the community prior to intervention. The volunteers receive monthly honourarium against their duties performed in the monitoring and follow-up of the programme.

14. **Phase out:** In order to start intervention to other areas, NGO Forum, at this stage, phase out from the existing intervention areas after two and half years with conditions of fulfilling defined indicators as per the phase out strategies.

15. **Post-follow-up:** NGO Forum and the concerned PNGOs continue follow-up services in the phase out unions for a certain frequency after phasing out. The post-follow-up services continue at least for one year after phasing out.
16. **Replication:** As the part of best practices, NGO Forum strives to replicate the learning to the nearby unions through the same or other PNGOs following the scaling up strategies and establishing linkages at micro and macro level.

Twelve considerations related to CLTS are:

- Targeting disadvantaged poor people of un-served areas.
- Enhancing people's participation and gender sensitivity
- Enhancing people's indigenous knowledge and skills
- Believe in people's capacities
- Mobilization of local resources
- People's perceptions, local cultures and situational demand
- Integrated development approach
- Effective coordination and collaboration
- People's choice for options
- Cost-effective services
- Developing the sense of people's ownership
- Focusing on sustainability

### 3.6 Software Comes into Being

A basic difference between the approaches 'hundred percent sanitation' and 'hundred percent latrine converge' is worth mentioning here. While hundred percent latrine coverage denotes a quantitative state of achievement, hundred percent sanitation attaches a long-lasting qualitative value to this achievement. Hundred percent latrine coverage is a physical condition that reflects installation of latrines and their use without entailing in it the notion of sustainability and endured behaviour change. In opposite, hundred percent sanitation approaches takes at its disposal the prospect of self-sustaining measures of people for prolonged habitual practice of personal and domestic hygiene and sanitation.

Therefore, Community-led Total Sanitation widens its scope thorough advocating inter-personal, familial, community and social level hygiene practice for health and well-being. Software campaign, in this context, takes the shape of education and entertainment, learning and practice; realization and make others realize, and development of people's perception from viewing hygiene as opportunity to conceiving hygiene as destiny. In order for these conditions to come into being, conscientization, training and follow-up have become intertwined phenomena of software service for sanitation movement. The processual linkages of software enhancement are accomplished through participation and patronization, thereby facilitation. Frequent courtyard meetings, film-shows, fairs, processions, and observance of days, festivals, health campaigns, cultural activities, variety shows and other innovative tasks constitute the body under software provisions.

Mass motivation comes along the way to these software programmes. People for people's sake is the guiding principle of the activities. People themselves generally constitute an efficient resource base. There are singers, dancers, dramatists, musicians, lyricists and other talents around among community members. These available resources can be viably translated to community capital for mass mobilization. The software programme values local talent-base, and makes searches for formation of groups composed of local people. Once these groups are properly brought into motivation campaign, they regenerate and reproduce their learning among other hard-to reach masses. In turn, entertainment becomes conscientization. Folk drama and music presentations in unscheduled and situational courses add new dimensions of motivation about sanitation, health and family hygiene. Given appearance of fun and pastime, such knowledge acquisition often remains ineradicable from public mind, thus becomes instilled in their everyday-life hygiene practice.

While the catalysts move around, they use participatory tools to grasp operable knowledge about the people they work with. Of these participatory rapid appraisal tools, they use transect walk, social mapping, seasonal calendar, problem matrix, preference ranking, observation, resource ranking, venn diagram, pie diagram and other participatory tools. These activities of the catalysts have far reaching impact among community people. Often these tools serve as measure of increased communication, interrelation, exchange and interaction among the community people and the catalysts. These measures also help repeal prevailing insider-outsider tensions. While insiders—the community people often treat the outsiders with suspicion and disdain; these interactive measures bring in rapport, sense of association, cooperation, and friendliness and confidence of community members to the catalysts.

Again, while people are given voice in community-managed fact-finding committees and gatherings, they usually feel honoured, deem themselves psychologically engaged and morally obliged to the mission. These committees are generally named as WatSan Action Committees. With the aid of primary orientation and facilitations of the NGOs and local government representatives, these committees participate in the determination of their needs and persistent problems in meeting these needs. On the basis of identified needs and problems, they prepare an action plan. As the community members themselves determine the action plans, they voluntarily take implementation initiatives, and distribute responsibilities among willing community members. Such collaborative and associative ventures, in turn, inspires individuals to treat sanitation movement not from an individual's viewpoint, rather to conceive it from a common ground of interest—as a community stake.

It is to say in conclusion that, earlier experiences pave the way to the determination of the Community-led Total Sanitation (CLTS) approach, whereby community people play the role of main actors, local government leads and coordinates, and partnering NGOs play all out facilitative role of motivation and mobilization of the respective community people. People no more identify them as excluded from the planning and implementation process. The approach has created appeal among the beneficiaries too. The approach also has broadened the horizon of the government attention towards bringing the stakeholders, beneficiaries and service providers under a unified umbrella. In the due course of time, 'participation' and 'motivation' has received recognition as two inevitable constituents of CLTS implementation strategy.

## CHAPTER - 4

### A Journey towards the CLTS Approach

The Community-led Total Sanitation means sanitation for all. It ensures access of everybody to proper sanitation and hygiene. Sanitation and hygiene covers access to latrination and personal and domestic hygiene practice by each and everybody in the community. However, reaching each and everybody is a difficult task, because economic and socio-political status of people widely differs within the community. Economic disability of the poor poses a potential barrier in assuring proper sanitation for all. Therefore, a pro-poor strategy for pure drinking water and sanitation has become an integral part of CLTS towards total sanitation.

The policy of 'attacking poverty first' is directed towards meeting the most crucial sanitation needs of the most incapables first, and subsequent gradual inclusion of other stakeholders of varied socio-economic background. CLTS process assures strategic mode of policy implementation so that the benefits accrue from household to individual level. "While drinking water is a community commodity, sanitation is individual asset. The Pro-poor strategy for sanitation is based on identifying all hard-core poor households whose basic minimum need for sanitation is not met and then providing them the basic minimum service level by giving them preference in resource allocation" (LGD 2005:2). This policy perspective, thus, redefines the CLTS process into concrete action parameters of support such as hardware, software and networking & collaboration.

#### 4.1 The CLTS: Mission Redefined

CLTS process advances on three wheels 1) hardware support, 2) software support, and 3) capacity building of sectoral and trans-sectoral stakeholders through training and inter-agency collaboration and coordination. In the present context, the NGOs go through designing and redesigning of monitoring and feedback cycle in line with persisting socio-political and economic needs of people relevant with proper sanitation. The CLTS approach arises out of the political, social and regional considerations. The diversified nature of the rural areas, as well as diversified nature of political practice among people is thought to have wider implication in the success, progress and sustenance of the programme.

Administratively, the local political institution holds the authority and responsibility of movement. The United Nations' MDGs and SACOSAN declaration put additional pressure on the central administration and its decentralized regional bodies to take aggressive role towards implementation and securing success in nation-wide sanitation coverage. The Ministry of Local Government, Rural Development & Cooperatives, and Ministry of Health and Family Welfare realized that this movement would not make a grand boost without active cooperation and assistance of many actors – the NGOs, private sector civil society members, and the community members themselves. It has also been advocated in many contexts by the NGOs that the programme requires joining of people hand in hand, and that a community-wide awakening is a must for programme implementation. The software programme, thus, stressed on the capacity building of the elected local representatives and development of their appropriate leadership capability, as well as conscientization, sensitization and motivation of community people.

NGO Forum, being the apex body in the WatSan NGO sector emphasized much on the national consensus and concentrated on sensitizing the actors and stakeholders towards promotion of total sanitation. As part of it in the year 2003, NGO Forum organized a number of workshops to share experiences of its Community-managed WatSan Programme, as well as chalked out the programme in promotion of Union-based Total Sanitation following the CLTS approach. A large number of Union Parishad representatives attended the workshops. In those workshops, the participants discussed over scopes of work, problems and prospects, and strength and weaknesses of sanitation movement in their respective administrative and political regions. The most intensely discussed over issue was the formulation of strategies to enhance people's spontaneous participation in the movement. The workshops ended up with the expected outcome. The Union Parishad representatives themselves determined their "to be" objectives and "to do" areas for operation. They also came up with visionary ideas of extending all-out cooperation with the partner NGOs operating in their respective unions.

The processual linkages of CLTS, as was discussed and reviewed repeatedly by the stockholding NGOs and the actors, took the shape of three integrated wings of an operational body. The wings can be titled as 1) situation analysis, 2) role distribution and 3) preparation of area specific execution model. These three wings are somewhat mutually inclusive, and therefore, cannot constitute linkages from absolutely distinct positions. It is to be mentioned further that these three wings have often been molded and adjusted in view of the needs and priorities of respective localities and implementation regions.

### 4.3 Processual Linkages

As described above, processual linkages are maintained through three wings. In a general term, these wings comprise of the following *attributes and steps* in action.

#### 4.2.1 Situation Analysis

1. In order to ensure comprehensive participation of all people of the community by wards, the Union Parishad's implementation teams hold meetings, community gatherings, discussion fora and participatory identification of problems and needs using ward maps and transects. Sometime schools, colleges and educational institutions play pioneering role in the leadership process for CLTS analysis of the programme regions.
2. Conduction of regular monthly meetings of sanitation committees throughout the union. These meetings serve as the platform to reflect on total sanitation situation, problems, prospects, predicaments, priorities and the situation of progress derived through motivational and coordination measures.
3. In order for the situation analysis maintained on regular basis through process mode, Union Parishad in collaboration with the partner NGOs prepare task-forces, and provide them with capacity building trainings for making them functional.

4. The task-forces assess on regular basis the situation of all forms of possibilities and prospects of networking to be arranged among occupation groups, as well as discuss on the basis of the persisting situation about the most effective and efficient ways to ensure their spontaneous participation in the campaign.

#### **4.2.2 Role Distribution**

In coordination among the respective upazila, Union Parishad, NGO Forum and its PNGOs, the general features of the role distribution cohort constitute the following *responsibilities* on the part of the actors.

1. Primary school teachers and school managing committees execute school sanitation and hygiene programme. In this regard, school brigade and student forces are often formed. Along with them, community hygiene promoters conduct extensive union-based visits to supplement the campaign.
2. Union Parishad, GOB-UNICEF, NGO Forum and its PNGOs work together to involve even the NGOs that do not have sanitation programmes, and that mostly conduct credit operation in regions. This finally helps in integrating the poor groups with the credit facility in availing the latrine support.
3. Imams, other religious leaders, youth groups, cultural groups and other influencing groups including media people are organized and revitalized at this stage of role assignment. They receive training and become brought under capacity building packages for community level mobilization and information dissemination.
4. Union Parishad chairmen, members, NGO Forum and its PNGOs assume responsibility of coordinated and regular conduction of ward-based and para-based community sanitation meetings on weekly basis, as well determine next step for the work strategies for future operations.
5. With the technical and organization inputs the Union Parishads, being the leader of the process, performs the responsibility to arrange and execute in organized fashion wide publicity of the objectives of hundred percent sanitation target using miking, rallies and other means of mass publicity.
6. Conduction of coordination meetings of Union Parishad, NGO Forum and local allies generally take place at a certain interval.
7. The involved parties' discussion and opinion sharing with LGIs, for strategy formulation of regular monitoring and follow-up of the implementation process and status.

#### **4.2.3 Execution in Perspective**

At this stage, the process moves towards execution of the programme. The considerations commonly observed in most unions in Bangladesh are that programme implementation must be

inclusive of the following *general features*. Hardware and software support converges at this critical stage. Sometimes software concerns come first, sometime hardware needs deserve priority. However, it has been observed that both services often worked together in most field situations such as –

1. Taking of all possible types of initiatives by the Union Parishads and the PNGOs towards dispute and conflict resolution between the implementers and the target people during intervention period.
2. To motivate people, provide trainings, guidelines and orientations towards accepting latrine production as an employment venture, and taking initiatives to increase the number of union sanitation centres.
3. The RMP workers, VGD cardholders and other beneficiaries of the union brought under extensive motivation campaign. If needed, Union Parishad attachés some conditions and pressures upon these beneficiaries in receiving those benefit or renewing the services.
4. Choukidars, dofadars and other low-income group of Union Parishad are mobilized to monitor and ensure sanitation in their respective areas.
5. The Union Parishads and PNGOs identify the most problem-torn unions. The Union Parishad chairman, members, GOB-UNICEF staffs and the NGO Forum personnel are often allowed authority to move to any problematic zone either in group or in person to resolve problems emerged during implementation of the sanitation programme.
6. Union Parishads and PNGOs ensure that every WatSan committee remains active and vibrant, and that all committees take part in the formulation of work-plan and their implementation.
7. Union Parishads and PNGOs along with the cooperation of UNO conduct dissemination and orientation sessions with high school students and teachers and mobilizing them in the promotion of health and hygiene education inside and outside classroom environments. PNGOs recruit at least one volunteer-monitor per ward to monitor the ward-level progress in sanitation.
8. In every Jummah Khutba, elaborated religious speeches are arranged. The focus of speeches is “cleanliness is a part of iman”. The imams themselves become motivated through imam trainings and mobilized to prepare their speeches in line with discussion about the advantages of hygienic sanitation and woes related with unhealthy sanitation practices.
9. NGO Forum, GOB-UNICEF and other PNGOs arrange screening of feature films, documentary-shows, video-show and popular theatre groups. The process facilitates rapid awareness raising of the community people. Union Parishad members and PNGO volunteers trace tea stalls and other local social gathering places as means to disseminate the messages of total sanitation among people repeatedly.



10. Union Parishads and PNGOs arrange sanitation fair and rallies to raise mass awareness.
11. Union Parishads and PNGOs in collaboration with DPHE regularly and jointly conduct transects, informal visits, and monitoring of implementation of sanitation activities. In this regard, community hygiene promoters and Union WatSan Committees become mobilized and assigned with the responsibility of process mode of situation analysis.

### 4.3 CLTS Implementation Strategy

In general, NGO Forum and its PNGOs devised following CLTS implementation strategies towards Union-based Total Sanitation that are composed of the *attributes* outlined below:

#### a. Goal

- In most unions, ensuring development of healthy and disease-free environment of the union for the greater sake of the public interest of the union was adopted as the goal of the implementation strategies.

#### b. Objectives:

- Thus, the GO-NGOs and the Forum's PNGOs set the objectives of the strategy for ensuring maximum participation of community people towards establishing 100% sanitation coverage in respective unions.
- The actors set the other objective for motivating people towards maintaining sustainability of hygienic latrine use and raising adequate level of consciousness of people towards safeguarding the success/ accomplishment.
- Another objective was to ensure proper utilization of available natural resources in the locality, and create appropriate community leadership in this respect. In order to meet this objective, the PNGOs and the Union Parishads made assessment of overall economic condition of corresponding hygienic latrine use situation in the unions.
- Finally, the strategy objective led to establishing effective and efficient network between different local institutions (Gram Sarkar, clubs, different local NGOs, etc).

#### c. Expected outcome:

- The expected outcome of these GO-NGO strategies was targeted towards ensuring that hundred percent households use hygienic sanitation, as well as to ensure that hundred percent households accomplish hygienic sanitation habits, and practice and regard familial hygiene conditions.
- It is also expected that ensuring such practices will turn the unions into role models of cleanliness and hygiene for other unions. GO-NGO strategies also prioritized in accomplishing the goal to attain a level of progress under which the inhabitants of the union conceive the sanitation movement as the most important programme for community development.

#### d. Implementation strategies:

- Thus, NGO Forum and the PNGOs used participatory approach of reviewing, evaluation, monitoring, follow-up and analysis of local level sanitation conditions.

- As an implementation strategy, the GO-NGOs formulated need-specific work-plans time by time as per outcome of sanitation progress review.
- In this context, they also continued union-level progress review surveys over time in short intervals as required in line with field situation.
- Wherever deemed required, surveys of consequent development in sanitation, social and economic condition of people was conducted in unions.

Union Parishads and PNGOs in common adopted following *implementation strategies*:

**Dissemination meetings:**

- These meetings provided chairmen, male and female Union Parishad members, and different stakeholders with concrete and clear conception of the programme.

**Planning meetings of the Union WatSan Committees**

- The PNGOs helped most Union Parishads draw visual information of social and pollution status, social mapping and pollution mappings of the union.
- Different committees at union levels set locality-specific comprehensive sanitation implementation work-plans to meet the target period. In order to reach the target period, they formed Ward WatSan Committees and continued dialogues with other stakeholders. These committees used to reach agreement on ward-level strategic implementation plans.
- Besides drawing social map and pollution map at the ward level, they formed several community WatSan committees in every ward, and conducted regular planning meetings of the committees.

**Orientation of the stakeholders**

- The PNGO arranged several comprehensive orientations for the stakeholders in most of the unions. Stakeholders selected for orientation under this plan were imams, school teachers, NGOs operating different development programmes in the union, local government parishad, different commercial banks, land settlement and revenue office, family planning department, and agricultural extension services.

**Monthly review meeting of the union sanitation committee**

- The monthly review meetings of the union sanitation committee took place regularly. The members of these review meetings analyzed and evaluated success, failure and overall progresses in hygienic sanitation movement.

Now, an elaborate discussion of the process deserves adequate light on the strategies how these considerations result in fruitful implementation of the sanitation movement. As declared in GO-NGO documents and the Union Parishad proceedings, the process meets implementation needs through identification of the hard-core poor. Once hard-core poor are identified, meeting of their needs get priority considerations. Immediately after the strategy is devised, all other stakeholders are brought to implementation attention.

#### 4.4 The Process of Identification of the Hard-core Poor

Despite the Bangladesh Bureau of Statistics (BBS) defines poverty and extreme poverty on the basis of subsistence-level household consumption basket and its cost, the general criteria are that whoever is marginally able to afford the subsistence consumption basket are considered to be living under poverty conditions, and whoever falls below this level is living under extreme poverty. While identifying poverty and extreme poverty requires comprehensive nation-wide *Household Income and Expenditure Surveys* (HHES) using highly technical means and time-consuming framework, identifying hard-core poor requires a down-to-earth and easy-transcribed definition that can be equally and easily understood by the grassroots people, the poor themselves, the local government institutions (LGIs) and all other facilitative bodies. Despite this suggestion, neither the LGD, nor academics could reach a common acceptable criterion on hard-core poor. However, the LGD devised two simple observable and easy measurable criteria: first, “eligibility criteria”, and second, “exclusion criteria” (LGD 2005:3).

The eligibility criterion is composed of four indicators. 1) Landlessness of the households, 2) homelessness/ pavement dwelling, 3) main earning person or the head being a day-laborer owns less than 50 decimals of agricultural land or rents premise less than 200 square feet, and absence of fixed sources of income, and 4) households headed by disabled or females or old aged (65+ years) persons. The hard-core poor prioritized for subsidized WatSan services is identified on the basis of the receipt of ‘yes’ as answer to any of the listed indicators.

The exclusion criteria are that 1) the households owning more than one acre of cultivable and homestead land will not be eligible to receive the subsidized service. 2) The households generating more income than the income-level constituting the poverty line would be excluded from the list of the recipient of subsidized service provisions.

Community or grassroots level detection process offers one of the most advantageous means of identifying the hard-core poor. Since identification of the hard-core poor do not require nation-wide survey, rather implies the local process and mechanism of identification—community people can easily identify them through their familiarity and everyday-life interaction with the members of these households. It is observed that the LGIs and grassroots level NGOs adopted a number of common criteria to identify the hard-core poor. These criteria are not identical over places, rather a mere supplementation of the indicators used in the eligibility criteria and the exclusion criteria. It is experienced that the indicators most LGIs commonly used to identify proven hard-core poor at community level are VGF and VGD card holding eligibility, landlessness, homelessness, physical or mental disabilities, capacity-poverty (such as illiteracy), lack of access to ensured paid-work provisions, indebtedness, over-indebtedness, lack of earning age family members, old age, destitution, environmental refuge, widowhood alongside landlessness or homelessness, etc. These indicators complement the criteria of identification of extreme poverty. To say in other words, those living under extreme poverty situation can be traced as the hard-core poor. Besides living in extreme poverty situations due to their lack of ability of subsistence purchasing, hard-core poor usually suffers from compounding of the above stated socio-political drawbacks. Therefore, hard-core poor is the most disadvantaged human entity within community, not only in monetary or economic terms, but also in respect to their socially dispossessed and disintitiled positions.

In Pukhoria, Gheor upazila of the Manikganj district, the PNGO of the NGO Forum named Socio-economic Development Agency (SEDA) identified 598 hard-core poor households using these two criteria. Its software assistance provided to the Mahadevpur Union Parishad, Shibalaya upazila of the Manikganj district contributed in conducting their baseline sanitation survey to identify actual number of household using open latrine. It was 3,387 based on this primary information on sanitation status, the PNGO and the Union Parishad jointly developed their operational strategies towards the target of reaching 100%. These two partners adopted their own locality-based criteria to select hard-core poor households. As per the criteria group "A" consisted of households having Tk. 10,000 or more aggregate income. Group "B" households are selected based on their income ranging between Tk. 5,000- 10,000, while households group "C" is identified among Tk. 3,000-5,000 income group. Households group "D" is considered to have financial disadvantaged, yet not put in the group of hard-core poor. Those households who do not have even Tk. 1,000 monthly income on an average and depending on VGD, VGF, elderly people's allowance and other social supports are considered as the hard-core poor. Thus, they have become subject to receive support from Union Parishad and local initiatives. A total of 64 hard-core poor households are given sanitation support in Mahadevpur union.

How the hard-core poor are provided with their access to subsidized latrines are worth mentioning here. At the heart of this approach remains an intrinsic principle of service provisioning. This is known as the Basic Minimum Service Level (BMSL). The total sanitation process further advances through selection of the Basic Minimum Service Level (BMSL) on the part of the implementers. BMSL refers to the scope of service provision. It constitutes the boundary, limit and preferential exigencies. According to the LGD (2005:5)—"the Basic Minimum Service Level for Sanitation is defined as *one hygienic latrine for each household*. However, if it is not possible to have one 'hygienic latrine' for each household due to lack of space or other reasons, then such households can use "others' latrines", *subject to a maximum of two households (or 10 persons) for one latrine or "community latrines", subject to a maximum of 10 persons per latrine.*"

These provisions in selecting hard-core poor are served throughout the country. Even the landless people having no definite settlement address are also brought to sanitation support. In Baniajuri union of Gheor upazila under Manikganj district, a daily labourer possesses a sanitary latrine. It is to be mentioned that no hard-core poor is left out of sanitation coverage. Bishu Rabi Das and Khuki Rani Das, a couple of Muktinagar union, Shaghata upazila, Gaibandha is cobbler by profession dislocated from their village due to river erosion. This hard-core poor household has started living at temple land for few years. Their daily earning is ranging from taka 30-35 per day by which they even can not mange three full meals in a day. Bishu says, "People like me have not been left out from sanitation coverage after initiation of the sanitation programme in Muktinagar union". Similarly Rahela Khatun (65) an old woman and Kabez Ali, a beggar of Chakchokia village, Parul Begum a separated woman of Dhanaroa village under Muktinagar union of Shaghata upazila have not been left out from the sanitation coverage. The allocation for sanitation from ADP of Union Parishad and PNGOs have contributed in bringing 100% sanitation coverage covering the hard-core poor households.

In Koibartapara of Shahbajpur union under Sarail upazila of Brahmanbaria district, two hard-core poor women not only possess sanitary latrines, but also claim that provision of latrine has

changed their way of life substantially. Hena and Nalita Rani reflect how sanitation can help the hard-core poor to get rid of structural impoverishment, as well as change habitual poverty of people.

### ***Poverty reduction through proper sanitation***

*“The relations of poverty with poor sanitation are reversible”, says Hena. She adds, “Initially we thought talking about latrine funny and useless, and that there was nothing wrong in our earlier open defecation practice. Soon after we received orientation and sensitization about the benefits of hygienic latrine use, and installed a latrine donated by the Union Parishad. I now realize how much of my financial burden of medication is relieved at present than ever before”. She further explains, “The days we did not use sanitary latrine, all of my offspring used to suffer from diarrhea, dysentery and other diseases one after another, as well several times in each year. I can remember a full year of hassle due to these diseases affecting our children repeatedly. By now, the problem has greatly solved. Since we have started to use hygienic latrine, and putting importance of hygiene practices, none of our children fall prey to those obnoxious diseases. I can now understand how much money and time did we waste against medication. Now that these amounts of money is saved, we sense we are really getting better access to food and nutrition than before”. Nalita Rani points out another important outcome of the proper sanitation movement. To her opinion, Union-based Total Sanitation in her union has changed age-old open defecation habit of most of her fellow-villagers.*

*Hena’s husband pulls rickshaw to make a hand-to-mouth living, while Nalita Rani is a lonely widow having no other income earner in her family. Both led deplorable life. Increased cost of food and medication turned them backward, and poverty remained a never-changeable phenomenon in their life.*

*Hena’s frustration knows no bound as she feels herself like one of the ill-fated lady in the area because of having only a baby boy – the youngest of all offspring born after five daughters. All of her daughters are aged between four to ten years. Considering vulnerability of girls of impoverished households, she is immensely concerned about their gradual stepping from childhood to adolescence. The tension is heightened as Hena’s eldest daughter, aged about twenty, migrated to Dhaka leaving her two-year old son with Hena. Like many other ill-fated poor girls of village, Hena’s daughter also experienced marital deception through abandonment by her husband in tender age. Now that Hena takes care of the grandson, her daughter sends small remittance – often very scanty amount, as well irregular in frequency. This has increased her financial burden making it difficult to manage full-plate of food two times daily. This is why she used to believe that her poverty would never diminish because of not having an income-earning male child. Her background portrays a picture why and how preoccupation and bias for male child is perceived with poverty in rural areas. By now, her male biased attitude is considerably reversed due to her realization that there are so many other factors contributing to escalation of poverty, and that proper sanitation can also contribute to eradication of poverty. Therefore, remaining healthy serves as a practical means to halt poverty to some extent.*

*Now Hena considers that there is bright side of her livelihood condition. She has an area of solace even in such disadvantaged conditions. She has access to proper sanitation that reduces burdens of poverty in various respects. Cleanliness has become a part of her life-style. She keeps her households premises and every domestic utensil very neat and clean. Her small but clean abode represents her attachment and orientation with hygiene education. Now she has a Tubewell of her own that depicts her better access to safe drinking water too. The fences of the latrine she uses are clean and well covered. As well, the surroundings are kept clean and dry. A pair of sandal is always put in front of the latrine. A small*

coconut-shell pouch contains dry ashes. Inside latrine, there is a washing jar (badna), yet very clean. Although she and her daughters wear very cheap clothes, they are praiseworthy clean enough.

On the other hand, Nalita Rani Das used to strive to make living for her own since her husband died twenty years ago. Only son also died in a road mishap eight years back. The only daughter lives in another village with in-laws. So, Nalita lives alone in a separate house on her husband's land. This small ten by eight feet abode is the only property she owns. Although her brother-in-law and his family live in an adjacent house on the same plot, they are also equally poor. She makes her living by puffing rice and selling it to people and in the market. Through puffed-rice selling, she makes a maximum of 1,500 Taka per month on an average. Although she lives on this small earning, she cannot make any additional savings other than living from hand to mouth. This is why she was considered as hard-core poor needing Union Parishad support to retain a hygienic latrine.

Like Hena, Nalita also mentions that sanitation movement has made tremendous changes in their livelihood. Earlier, like other villagers, she used to wait for dark or nighttime to go outside for defecation. It resulted in diseases like piles of many women she knows. Whenever diarrhea did strike in the past, the situation of open defecation used to become even much harder for women. It produced bad excretion habit, pollution, germ infestation and consequent victimization of women in disease chain. Nalita Rani herself was not even an exception. She explains, "Now with the installation of sanitary latrine, and its use with proper care, frequency of my illnesses has been reduced. Now I can spend more time in income earning venture that, I believe, would help me earn additional income in the near future".

Both Hena's and Nalita Rani's realization of the benefit of proper sanitation began from early 2004. They informed that community health providers, women Union Parishad members, and campaigners of NGOs held regular courtyard meetings for women at their premise or neighbours' houses. These meetings prompted them to promise for installation of private latrines by any means. Hena talked of the matter with her husband. Her husband also learned of the benefit of health and hygiene from male group meetings, and agreed with her to avail a latrine from the Union Parishad.

Although Hena and Nalita Rani received free latrines, their consciousness about maintenance of latrines knows no bound. They know that the latrines will be broken or somehow become unusable after a certain period of use, and that the Union Parishad will not donate them any more free latrines. Yet Hena reiterates, "Whatever happens, we will never give up use of proper sanitation. We may not even care for free donation receipt! We will buy of our own if required, no matter how much we are to pay, because it saves our money from disease-related wastage."

#### 4.5 People Counts First: Involving Community in Joint Stakes

The second stage of implementation essentially moves from poverty-prioritization to community participation. Once the hard-core poor and other categories of non-users of hygienic sanitation are identified, the **Gram Sarkars** with the assistance of the PNGOs finalize the list in a union-level open public meeting. PNGOs, Union Parishad executives and the government officials residing or being posted in the locality attend these meetings. The Union Parishads with the participatory assistance of PNGOs, local elites, community representatives and general inhabitants, perform two tasks. One is scrutiny of the just prepared list, and the other is the approval of the list by the most participants of the meetings. Now that the list is finalized, the Union Parishads and PNGOs display it on the Union Parishad notice board. In order to ensure the appropriateness of the list, Union Parishad keeps provision of comments, criticisms and

objections of community people. The Upazila Parishad and PNGOs play the monitoring role for the process. The PNGOs always prompt the Union Parishad to intervene, take correctional decisions and issue directives in the event discrepancies at any layer of the process is identified.

The PNGOs, with reference to the strategic guidelines of the **NGO Forum** form community-groups for social sanitation movement succeed to meet the challenge of reorganizing community groups and ensuring their active participation as stakeholder-cum-catalysts. With comprehensive field visits over weeks, the PNGOs with support of Union Parishads can form the groups that gradually become extended up to the para level.

Successively, **PNGOs** often make it possible for the Union Parishads to arrange the first introductory planning meeting with community allies. While the declaration of the Deputy Commissioner of 200,000 Taka grant allocation for the successful Union Parishads in accomplishing 100% sanitation coverage by the stipulated deadline often act as a means of inspiration and moral boost up of **community allies**. Yet, the success actually rests in the participation of the community allies themselves, because it turns the pro-award activities into a social movement at a certain stage. Community allies seem to have gained perception of proper sanitation as an essential community stake, not a mere agitation towards attraction for grant, award or recognition. Hence, a **school teacher** of Baniajuri union, Gheor, Manikganj mentions in the meeting – “at a certain point, most of us forgot that our success would bring reward and recognition, rather we started to consider that our failure to ensure proper sanitation would lead to our whirling within the same fate of poverty and illness”. Similarly **imams** as key actors have played effective role in social mobilization in all the programme areas. An Imam of Baniajuri union, Gheor upazila, Manikganj mentions, “As religious leaders we have an important position in the society, and people generally respect us and follow our teaching. So we delivered messages in mosque, social and religious functions that tremendously worked creating social mobilization for sanitation”. The imams of other programme areas all over the country have also confirmed that had an important stake in awareness building among the community people on hygienic sanitation.

Often remarkable and exceptional contributions of the community allies in bringing total sanitation coverage success in most union in Bangladesh come along their dedicative moves to ensure mass participation in respective unions. The media people also become involved at this stage while they highlight the synergistic initiatives of all relevant stakeholders and the subsequent result in the respective medium which in turn help the implements, resource sharing partners and policy-makers came across the success and experiences of the approach and get sensitized to replicate the model.

The scope of **local elites** encompasses a broader scope throughout the country. Besides community members themselves, the government employees posted at different unions also constitute the body of local allies. While **Community Health Workers (CHWs)** are important partners; Nutrition Officers, Monitors and Field Trainers of the BRDB also join the community allies. Nutrition Officers, Family Planning Workers and Agricultural Extension Workers also exert voluntary contribution in the motivation campaign.

In most unions, **village sanitation centres (VSCs)** are available. Majority of the unions receive active support of the allies. Allies with assistance from the DPHE and the partner NGOs of the

NGO Forum often arrange selling of ring slabs of latrines in affordable installments from village sanitation centres. Despite provisions of cheaper latrines, installments relieve the financially marginalized group's financial burden of latrine possession. Thus, chairman of the Nasirabad union of Bhanga upazila under Faridpur district expresses his firm conviction, "I strongly believe that every union in Bangladesh can accomplish total sanitation coverage provided community people leads the process and that the Union Parishads tend not to be authoritarian, rather inclines to learn from the power of participation of community people".

Often leadership comes out of participation, coordination and in the process of involving and mobilizing other people to accomplish common good. Once initiatives and leadership propels, participation of people takes further leap.

The above addressed process outlines detection of hard-core poor and involving of all strata of community people as target people. The most important aspect of CLTS is that these target people do not remain the beneficiaries of sanitation outcome only, rather they are turned into participants of the movement, implementers and role players on specific duties, mobilizers of community stakes, motivators for others and guardians of sustainability of the sanitation movement outcome. As well, the process analysis refers to the fact that viable implementation strategies arise out of comprehensive community participation, communal feedback loop and efficient coordination mechanism.



## CHAPTER - 5

### CLTS in Action: Leadership, Coordination & Participation

In terms of the comprehensiveness, the process of Community-led Total Sanitation bases on three important attributes. They are leadership, coordination and participation. Altogether, these three attributes constitute the body of the community matrix for the sanitation movement. All other operational strategies and techniques derive from these three *core attributes*.

#### 5.1 Leadership

The CLTS approach is an integrated process involving people of all walks of a union. It involves administrative, political, economic, and social stakes together. The LGI, thereafter, the Union Parishad serves as the apex body with leading role of the implementation process. It is responsible to perform the programme leadership. While the Union Parishad refers to the representation of the community from an administrative point of view, its scope goes far beyond administrative limit. "Participation" is the identity-marker of this comprehensive movement. The implementation objectives of the Union Parishad are to: a) ensure that every household installs, uses and maintains proper sanitation, b) analyze needs of every household – be it financial; related to capacity-building, conscientization, sensitization or motivation; or combination of all needs, c) act according to persistent needs, formulate strategies and implement them, d) ensure as much participation of people of every walks as possible, e) look at varying needs of the poor disadvantaged, marginalized and well-offs, and gender relations, f) ensure maximum utilization of resourcefulness and influence of social elites over community people, g) conduct frequent evaluation, monitoring and follow-up of successes and failures and assessment of their underlying reasons in that light, h) disseminate the factual conditions of failures and successes within community in order for community-level opinion generation, and, i) devise well-planned effective strategies to solve the problems towards sustainability.

In respect to leadership of the Union Parishad, Khalilnagar's experience is worth presenting here. 'Khalilnagar: An Exceptional Union Parishad' was the headline of a highlight feature of the daily Sangbad published on December 02, 2004. The feature describes – "Khalilnagar has exposed itself as an exceptionally different union from conventional union structure of Bangladesh. The socio-economic and infra-structural condition of the union has drastically changed from a disadvantaged and backward state to a role model of development within one and half year period. The union has established an incomparable instance of total sanitation, human resource development, progress in provisions of civic amenities and environmental conservation. The success of this Union Parishad in budget designing and tax collection has become a model for replication". These are only a few examples of overall achievements of the union.

Like Khalilnagar, Mahadevpur of the Manikganj district, Shahbajpur union, Sarail, Brahmmanbria, Nasirabad union of Bhanga, Faridpur and many other unions that achieved hundred percent sanitation are glaring examples of leadership. The successes did not come automatically. The community people, school teachers, local elites, children, poor people and all

type of stakeholders under the leadership of the Chairmen and members of these unions made the developments happen in their respective constituencies.

### **Leadership matters**

*Pronob Kumar Ghosh Bablu is a young visionary Union Parishad chairman of the Khalinagar Union Parishad of Tala Upazila under Satkhira district. To people of the Khalilnagar union under Tala upazila, visions towards development are synonymous to the name of the Chairman. Since his assumption of Pronob Kumar Ghosh Bablu as the Chairman of the Union Parishad, he struggled hard to change the conventional notion of development that people used to evaluate in terms of construction of roads, structures and capacity of relief provisions. Pronob Ghosh has made his people understand that development does not mean material development; rather it means overall well-being and promotion of human capability, creativity and potential for overall livelihood development. Thus, his position regarding total sanitation differs from administrative layout of the sanitation coverage approach. From the beginning of the sanitation movement, he propagated that “We do not need hundred percent slab installation, we need hundred percent users of slabs”. This proposition is indicative to a great extent for people-centered policy-planning. He says – “people should not install hygienic latrines in household premises, people must install it first inside their head (mind) – in conscience and belief. Otherwise, all efforts will go undone, and at some point we will see that people are returned to their age-old open defecation practices”. This remark makes his vision and mission clearly inclined towards people-centered sanitation.*

*Khalilnagar was the most problem-torn union of Tala upazila of Satkhira district situated twenty-six kilometers away from the Satkhira district headquarter. Geographically, the union is spread over 32.42 square kilometers area. A total of 28,415 inhabitants live in the union. A large number of inhabitants of this union fall under hard-core poor category. Of 6,216 households, 1,320 households are landless. Almost 470 households do not have any land except living abode. Around 64% people are so poor that they cannot secure 1800-calorie food daily. The road communication was appalling until 2004. Apparently, these socio-economic facts and figure of the union connote total sanitation an unrealizable venture. However, under landmark leadership of its Chairman, the Union Parishad accomplished Union-based Total Sanitation by 4 December 2004. Thus the Headmaster of the Khalilnagar Boys High School points out the power of leadership that made unification of people of all walks of life possible in Khalilnagar. To him, “Success could be a distant reality without the presence of an educated, young, energetic and committed chairman”. He states – “Being inspired by our Chairman, we worked together to achieve this success”.*

*Bablu’s ideology is to instill the notion of proper sanitation in the mind of the community people over a long period of time so that they themselves can lead the movement outside bureaucratic interventions. Thus he says – “the bureaucratic designs to accomplish total sanitation will loom large until it is realized that not imposition but motivation of people can make the movement fruitful”. He also believes in reciprocation, incentive system and payback options for any noble movement, because such means of recognition increase community people’s responsibility towards the goal. Thus, he infused an unique feature in his leadership.*

#### **5.1.1 Decentralization in Leadership**

Leadership is considered as the first of the three important attributes of the CLTS process. Most unions that achieved hundred percent coverage throughout the country generally adopted a

similar strategy. Bhatgram, Mirzapur, Tangail; Shahbajpur, Sarail, Brahmanbaria; Muktinagar, Shaghata, Gaibandha; Mirzabari, Modhupur, Tangail; Mahadevpur, Shibalaya, Manikganj; Parulia, Debhata, Satkhira; Baniajuri, Gheor, Manikganj; Tetulia, Tala, Satkhira unions are some of the glaring examples of conformity in the leadership decentralization process. In all these unions, first came the role of development partnership of the service providing organization. PNGOs of NGO Forum joined in hand to bring the sanitation movement in the unions forward. In collaboration with PNGOs, the Chairmen of the unions along with Union Parishad members visit each and every household to bolster sanitation campaign. Leadership is decentralized at this stage in all unions. The Union WatSan Committees are revived and restructured. Gradually, the Union Parishad formed Ward Sanitation Committees, Village Development Committees, and Para Committees. Each Union Parishad appoints Sanitation Coordinators and nine volunteers. Nine government officials comprised of health workers, sanitation workers, agricultural extension workers and family planning workers are appointed as monitors of the sanitation programme's progress evaluation team. The volunteers help conduct the community-based sanitation surveys in collaboration with the PNGO, and report back to the Union Parishad. Mosque and temple-based regular briefing sessions become boosted up to continue motivation programme even after achieving Union-based Total Sanitation in unions.

The instance of the Shahbajpur union under Sarail upazila of Brahmanbaria district also depicts the uniqueness of decentralization in leadership. The Union Parishad members of this union played very effective role in bringing the sanitation accomplishment. The background information of the sanitation movement sheds light on this issue that dates back to GOB-UNICEF's launching of Environmental Sanitation, Hygiene and Water Supply in Rural Areas project in Shahbajpur union in 2001. The recent most total sanitation project was initiated on the basis of the findings of the national sanitation survey of 2003. The survey portrayed poor sanitation scenario of the union. While Sarail was found to be the most disadvantaged upazila only with 14% sanitation coverage, Shahbajpur union had 18% coverage. Therefore, it attracted attention of DPHE, UNICEF and GoB as a priority case for total sanitation movement. Besides government initiatives taken, the survey findings shocked the Union Parishad Chairman and members too. Thus, in September 2003, the Union Parishad personnel decided to pay supreme attention to the government directives to accomplish "sanitation for all" in Shahbajpur union.

The Union Parishad members raised the issue in that meeting, and vowed to revert this scenario. All members and Chairman reached a consensus to launch a union-wide movement. However, they could not devise scientific idea to turn the programme into a well-coordinated and fruitful venture.

In the planning meeting on total sanitation held at Deputy Commissioner's office in March 2004, Osman Uddin Ahammad, Chairman of Shahbajpur union and Amir Ali, a member of the Union Parishad inspired their colleagues to accept total sanitation coverage as a goal for their union. Despite government target to accomplish such converge by mid 2005, the Chairman, Amir Ali and other Union Parishad members declared that they would reach this target by the end of 2004. By that time, NGO Forum's regional office took initiatives to extend all-out support to the organization. By then, GOB-UNICEF's Community Hygiene Promoter (CHPs) were already deployed to monitor and prepare baseline on sanitation prevalence—actual physical sanitation condition and state of their use.

### **People's representative, people's power**

*Amir Ali moved with the NGO Forum's software services providers and the Community Hygiene Promoters (CHPs) from villages to villages, paras to paras; even not at all areas that he represents; in order to become informed of actual sanitation scenario in the union. His visit process involved making new communications, and meeting with different people in society. With association and active cooperation of other members, he, on behalf of the Union Parishad Chairman, went home-to-home to invite people of every walks to attend the planning meeting. As and when needed, he personally met three agriculture extension workers, nine CHPs and NGO Forum's Project Coordinator for understanding of technical issue in communication and mobilization. This communication has resulted in the declaration of a 23 points charter programme for the union developed by the Union Parishad itself in collaboration with NGO Forum. Ali and other Union Parishad members brought the leaflets of this charter to every household of the union.*

*This comprehensive charter helped Ali and his colleagues to formulate ward-specific and para-specific action plans. Besides conducting regular meetings and assigning responsibilities to allies, village level shalish and conflict-resolution gathering claimed large part of Union Parishad activities.*

A chronological account of the corresponding accomplishment in total sanitation deserves a portrayal here. Before the launching of the Union-based Total Sanitation, the status of hygienic latrine coverage was as low as only 784 among 4,483 households of the union. By December 2003, the number of households using sanitary latrine elevated to 1,277 marking 29% hygienic sanitation coverage on an average. During January to July 2004, the Union Parishad ensured 54% coverage in proper sanitation and their use. The rest 42% accomplishments came due to hard work of the Union Parishad during August to December 2004. The most intriguing feature of this success is the complete reversal of hanging latrine situation. While national sanitation survey of 2003 documented 3,453 hanging latrines in the union, there was not even a single hanging latrine in the union by the end of December 2004, and the credit obviously goes to the Union Parishad members for their intense monitoring and follow-up of the activities as the leader in the process.

Leadership principles extend beyond individual leadership throughout the process. Community leadership becomes institutionalized for smooth operation of activities. While the Union Parishad chairman constitutes the apex image of leadership, it reflects more a role of marshal in practice. As like as marshaling that acts upon frequent communication of soldiers deployed at different posts, and decision made by the marshal on the basis of communication feedback loop, the Union Parishad chairman also exerts leadership decision-making authority on the basis of community participation and feedback of the Union Parishad members. Decentralization of leadership comes into effect through deployment of members of Union Parishads to their respective representative constituencies. Since locality concerns are to be met through local stakeholders, Union Parishad members make thorough investigation of sanitation conditions of their assigned localities. Once sanitation scenario is recorded, they launch action programmes through action committees formed in collaboration and participation of local people.

Administratively, each Union Parishad is divided into nine wards. Inhabitants of nine wards elect nine ward members. In addition, three women ward members become elected. Each

female ward member represents three wards. Altogether, twelve-member Union Parishad executes sanitation activities in their respective wards. Wards are further divided into different paras, and paras into different blocks to make the decentralization process sharper at inter-personal day-to-day communication level among the stakeholders and the caregivers. Each block sanitation committee is ideally composed of five members: Union Parishad member, a woman representative, gram sarkar, a volunteer social worker, and an influential community leader selected from school teacher, imam, business leader or other customarily dignified social elite person. The decentralization does not limit only in leadership administration. Rather it extends up to every layers of programme execution mechanism.

### ***Women share equal stakes***

*Rawshanara, an elected female Union Parishad member of ward no. 1, 2 and 3 is a resident of Ambari village, Mirzabari union, Modhupur, Tangail. She says, "Being elected as people's representative, I got the chance to work for people in my constituency towards Union-based Total Sanitation". Immediately after taking responsibility as elected member, she attended the meeting headed by the Union Parishad chairman with participation of all members, Samannito Unnayan Seba Sangathan (SUSS), a partner of NGO Forum and NGO Forum representatives. Then she realized the negative impact of open defecation and unhygienic practices, and became informed of the Union Parishad's commitment to achieve Union-based Total Sanitation in Mirzabari union. That meeting motivated her towards the overcoming of the problem, and inspired her to commit to materialize the sanitation activities in order to revert traditional practices of open defecation. Rawshanara also says, "I learnt that the coverage could only be accomplished through community level motivational activities. I believe that the goal can not be achieved without making people realize the negative consequences of open defecation practices. This learning turned me into a community mobilizer from remaining mere a people's representative. We, all the members shared the responsibilities to work in our respective areas".*

*As part of implementation of the programme, the volunteers in cooperation with Union Parishad members, school teachers, and other stakeholders conducted the survey in March 2003. The union was divided into three old wards and each ward was divided into several parts for smooth implementation of the work. As a responsible member of the Union Parishad, Rawshanara conducted various meetings in different part of operational areas. She invited ward- level stakeholders to share responsibilities among imams, teachers, community leaders, youth groups and so on. In her words, "I had been able to convince all of them about the importance of the programme. Consequently, participants of that meeting unanimously agreed and expressed their firm commitment to implement the programme. Due to their dedication, the programme became successful".*

*In the process of implementation of the programme, additional meetings were held at the Union Parishad, SUSS, and other offices. Rawshanara adds, "I participated almost all meetings and shared learning received during field work. In those meetings, I also expressed my firm conviction to find solutions in fulfilling the commitment to bring my union under 100% sanitation coverage within the stipulated deadline of December 2004. I also shared the decision of the meeting in ward level committees. It helped us to speed up the project activities".*

*Moreover, Rawshanara participated, addressed and delivered sanitation messages relating to the need for working towards the target for hundred percent coverage and consequent benefits in ma shamabesh (mothers' gathering). Her frequent visit and sharing of the messages to primary and secondary schools and courtyard meetings motivated students and community people. Since she had been working hard for*

*the community people so every one supported her, of whom some took self-guided responsibilities and initiatives to social mobilization activities.*

*Rawshanara also organized meetings with community people to share achievement status of coverage and consequent challenges. She followed-up coverage status through household visits, as well as helped in installation of latrines, and assisted less capable persons to bring latrines at home. She followed-up and monitors the activities of volunteers; helped select the place for latrine installation, and other related activities.*

*Alongside the success Rawshanara encountered numerous challenges throughout the process. Some well-off people expressed their disinterest to install latrines. In consideration of some motivated and committed poor households not being able to afford latrines due to their income-deficiencies, 120 sets of free latrines were supplied to the poorest of the poor households, and 600 sets in subsidized rate of Tk. 150.*

*Rawshanara states – “, initially I was suspicious, thus thought it would be difficult task to achieve hundred percent coverage of latrine within the stipulated time. However, during my active participation in the process, I gradually became confident”. She further adds – “factors such as ensuring participation of stakeholders, decentralization, activation of local government body e.g. Union Parishad, collaborating partner NGOs and NGO Forum for their support and commitment geared up the process and led to the success. This grand success became possible through concerted efforts of all. I just played the role of catalyst, although I am proud of this achievement.*

## 5.2 Coordination

Coordination builds upon three-way communication of the actors, policy-makers and the implementers at the grassroots level. In the Union Parishads, the chairman and members are guided with the directives from the regional and local administration. On the basis of the guidelines set forth by the district administration, the upazila administration holds the responsibility of counting on accountability, governance and transparency of the local government in the execution of the CLTS process. The LGIs also receive all forms of administrative and legal supports time by time as and when needs arise. Attended by PNGOs, and the members of the LGIs, the first administrative meeting of the local government institutions usually held at Deputy Commissioner’s office. There the **Deputy Commissioner** announces the national plan to implement sanitation component of the MDGs. In the same month, the **Upazila Nirbahi Officers** call meeting of all **Union Parishad chairmen and members**, DPHE executive and representatives of local NGOs to set policies and reach operable work-plans about meeting the set deadline to accomplish total sanitation. The chairmen and local NGO representatives speak on the need of mobilization of community people for their all-out cooperation and active involvement to turn sanitation goal into a social movement. Sometime their target seems to be over-ambitious, and a challenge for the Union Parishads and NGOs to ensure participation of people from all walks, especially in dispersedly located habitation and poverty-stricken communities.

Most unions achieving 100% sanitation coverage has received direct field level supervision and monitoring of the upazila administration. The activist responsibilities exerted by the Union Parishad chairmen has boosted up enthusiasm and zeal of people of most unions. On the other side of the coin, communication of the institutional bureaucracy with grassroots creates a

healthy environment of understanding and mutual respect between the beneficiaries and the service-providers. This is evident in Bhanga, Debhata, Gheor and other covered unions.

### **Coordination is participation**

*“We, the civil servants can or may issue directives or give these directives administrative and legal gloss, but it is the community people who make the real difference. If utilized properly, the community people can become the powerhouse of resources, ideas and activism”, states Abdul Jalil, Upazila Nirbahi Officer of Bhanga Upazila, Faridpur.*

*Abdul Jalil represents the image of a visionary administrator who was highly acclaimed by the people of Nasirabad union for his outstanding qualification, leadership capability, populist attitude, and commitment to extend all out support to the people of unions under his upazila. He visited from one village to the other, one area to the other, sometime household-to-household on foot to monitor the progress of sanitation activities in Nasirabad and adjacent unions.*

*The UNO describes the means and ways how local government executes its sanitation strategy in unions. He informed that it was executed in a decentralized manner. Under directives of the district WatSan Committee, the Upazila administration takes up the responsibility of coordination, fund allocation and follow-up of the activities through Union Parishad leadership in implementation. The initial directive issued in 2003 to Union Parishads was to conduct the baseline survey on actual sanitation conditions in every ward. Second directive was to maintain close collaboration with a local NGO for necessary WatSan services. The unions that had poor sanitation coverage were allowed to use a maximum of one-third amount of the total allocated money for sanitation purposes. The upazila administration also directed the Union Parishads to observe October of each year as sanitation month.*

*From 2003 onward, they were further directed to strengthen motivation programme with help of local NGOs. On the part of the government, a “crash programme” was undertaken. Under that programme, 219 community nutrition organizers of the community nutrition programmes were assigned to monitor sanitation programme of the Nasirabad union under Bhanga upazila. Monthly sanitation meeting was made compulsory at district level. The NGOs served as the closed aide to the Union Parishad leadership. They worked mostly towards capacity building of the Union Parishad representatives.*

*The Upazila Nirbahi Officer kept the provisions of easy-accessibility of NGO Forum representative and Union Parishad chairmen and members as and when they required so. The people involved in total sanitation movement were allowed to meet him instantly – without any prior appointment, and he tended to prioritize solving reported sanitation related problems on a high-priority basis. Sometimes such prioritization forced him to compromise or make trade-offs of his other activities. This support-minded attitude turns him into an efficient coordinator of the CLTS in Bhanga upazila.*

*The Upazila Nirbahi Officer also shed in-depth light on constituents of obstacles to motivation. To him, these barriers are nothing difference between perceptions of material and non-material possessiveness of poor people. Motivation becomes harder job for the catalysts because poor people do not see any immediate monetary or mundane benefit in sanitation. Second obstacles relates to provisions of free latrine donations. To his opinion, given existing social setup of patron-client relationships everywhere around, it is difficult to change mind-sets of poor people from dependence to self-reliance; from receiving charity to possessing something by own means. To his opinion, the long existed practice of donation and charity also pose a potential barrier to cost-sharing approaches. Conventionally, impoverished people consider*

receiving free donation as their rights, not as privileges. This is because of their experiences of receiving free donation several times in their lifetime. So, the cost-sharing approach nowadays appears to them as something alien, strange, unjust and deceptive to some extent. However, he believes that the Community-led Total Sanitation approach is a breakthrough in the process of changing this dependency-mindedness of poor people.

He agrees with the NGO Forum's notion that cost-sharing makes people attached to the resource they possess. This is a notion of entitlement that also changes the level of responsibility of people. While people pay for latrines – no matter how much financial share they bear – they consider it as their own property. Consequently, they put adequate attention towards maintenance for sustenance of hardware. Despite these facts, the UNO states – “still it is difficult to change popular mind-set overnight. As well, for administration, meeting deadline is a part of the process. So, we tend to speed up the process through selecting hard-core poor to provide them sanitation hardware for free of charge”. Since motivational measures become effective after spending certain time within the process, NGOs do better than government in such activities – he opines.

In regard to the popular inquisitiveness whether free distribution of latrines create any other anomalies other than putting some obstacles to cost-sharing approach, the UNO opines that some anomalies indeed take place throughout the distribution process. However, he thinks such anomalies as negligible that do not add much barrier to the total process. Some exceptional incidents of nepotism, preferential treatment and arbitrary distribution indeed take place, and thus some well-off people also receive free latrines. Yet, it does not refer to a considerable barrier to the CLTS approach. Rather, he believes that the CLTS approach itself is so powerful that it would win over any other disperse incidents of anomalies in the long run.

The UNO mentions that he had attended most meetings of union sanitation committees in person just to keep up enthusiasm of people well retained. In many instances, whenever the Union Parishad members reported to him of any non-cooperative community members' unwillingness or resistance to install proper sanitation, he personally visited those places. In extreme cases, he issued warning letters to incumbents outlining that they had made community-level offence through causing health problems for others. These letters used to indicate a certain deadline insisting incumbents to install proper sanitation before deadlines expire. These letters also mentioned the possible legal consequences incumbents are to suffer due to their irresponsibility to breach other people's environmental right. The UNO informed that such pressure principles were very effective, however, he was to issue such letters to only a few people. Others responded to the programme spontaneously. Such spontaneity was nothing but the outcome of the sanitation-related motivation package of the NGOs.

To the UNO, the learnings of government administration from the CLTS approach are of various types for varying capacities. First, local government institutions are no more detached from the grassroots people. Therefore, this is a qualitative change in the administration. Second outcome of this movement is that the CLTS approach helped to bridge the distances of NGOs and administration at grassroots level implementation mechanisms. Third, sense of cooperation, reliance, trust and mutual respect among NGOs and local government institutions are established throughout the process.

The UNO expressed his deep optimism of sustenance of outcome of the CLTS process. He believes that once sanitation habit of people is changed, they will never return to unhealthy practices again. Moreover, the most important of the facts is that the success of total sanitation in three unions of Bhanga achieved through motivation, not through charity or aid. Therefore, the success has gained institutional merit. This different stature and status of accomplishment indicates to total sanitation's sustenance possibility.



*The UNO expressed his opinion in relation to the replicability of the process in other development ventures that the government initiatives would benefit from the experiences of Community-led Total Sanitation. Given strength of this approach, it might become replicable in other similar types of development projects involving community stakes at large.*

### **5.2.1 The Process: Stages of Coordination**

Despite decentralization, the CLTS approach bestows local government institutions (LGIs) financial and administrative authority to manage and coordinate the implementation process. At its end, the target is to ensure “voice of the poor”, so that the movement assures use of decision-making capacity of people, as well as maximum level of participation of the beneficiaries-cum-actors.

The first step in the journey to the process is targeting and organizing the hard-core poor households. Under the leadership of the LGI-Union Parishads, pourashavas and City Corporations; and corresponding to the national sanitation strategies and indicators—identification, listing and categorization of hard-core poor households begin. The hard-core poor are targeted not only as recipients of subsidized latrines, but also as the vanguards of the movement under an organized coordination mechanism. In the context of the leadership of the Union Parishad, the *Gram Sarkars* prepare a list of eligible households at the ward level in line with the set guidelines, procedures, and the eligibility and exclusion criteria. Chronologically, they prepare the list of households having latrines, but not maintained sanitary or hygiene conditions. To prepare these lists, the Gram Sarkars work in collaboration with development workers and civil society members. A comprehensive ward level survey of hanging latrines and other type of unsanitary practices are recorded. At an advanced stage, the financially capable community members not using sanitary latrines are identified.

The *stages* that compose the process of coordination are:

1. Identification of the number of households having hygienic latrines corresponding to BMSL. These households are excluded from the target households of total sanitation drive.
2. Identification of households not having ‘hygienic latrines’ or otherwise ‘dependent’ on either unhygienic latrines or open defecation. These households become listed as non-BMSL households, and brought under direct intervention.
3. Identification of households not owning ‘private latrines, and thereby dependent on ‘others’ latrines’. The number of sharer households acceding two, or persons acceding ten for use of a common latrine is brought in the list for intervention.
4. Identification of the number of households not having ‘private latrines’ and thus depending on community latrines in a manner that the average number of persons using community latrines accedes ten are considered not complying to BMSL standard.
5. At the village level, identification of non-BMSL households to be put under the criterion of the ‘eligible group’. Within this category, the hard-core poor are identified as the ‘target group’. The target groups constitute the lone claimants of subsidized latrine provisions.
6. The capacity building of the implementers, leaders and support service people are regarded as the most important inception steps in the second phase of the sanitation implementation process. It is suggested, and to some extent practiced that the hard-core poor group be

facilitated through micro-credit and wage-employment schemes of different development organizations; and motivation and sensitization trainings.

There are provisions of rigorous training programmes for capacity building of the LGIs. The partnering NGOs conduct these trainings to enhance leadership capabilities of the Union Parishad chairmen, members, monitors, sanitation committees at different operational levels and the Gram Sarkars.

7. Monitoring, evaluation and follow-up is regularly maintained through weekly progress chart and monthly progress review meetings of different stakeholder groups and catalysts. Monthly meeting at ward level is mandatory for the ward sanitation committee. Ward-based action plan for subsequent (forthcoming) months are adopted in these meetings.

The coordination process goes along a wide array of participation of community people. Participation in the sanitation movement is synonymous to holding of community stakes through activist efforts.

### 5.3 Participation

Participation is “a process through which stakeholders influence and share control over development initiatives, decisions and resources which affect them.”<sup>1</sup> Participation can take different forms, ranging from information sharing and consultation methods, to mechanisms for collaboration and empowerment that give stakeholders more influence and control. The CLTS programme is designed upholding the notion of participatory approach that will ensure participation of all stakeholders throughout the process. It has been promoting the Union-based Total Sanitation.

The Union Parishads prove that the seemingly impossible can also be turned to accomplishment, and that unity, integration, participation and coordination of community allies can bring attainments even in disadvantaged and apparently unattainable social conditions. Motivation becomes the vanguard in these achievements.

Like many other unions in Bangladesh, Nasirabad union provides an eye-catching example of participation. The union is composed of 16 villages where most villagers are much poorer than the poor people of other unions of Bhanga upazila. About 70% people live under extreme poverty, some of whom even do not have lands to make shelters. The reasons are manifold. First is the remoteness of geographical location from main towns and business centres. Other causes that are considered to be responsible for backwardness of the union is lack of proper communication, low rural electrification coverage, disperse locations of settlements, uneven topographic features and lands making some areas arable, some not; some areas reachable and some hard-to-reach. Occupational options are also so limited that even business or petty-tradesmanship appear to be non-viable to people. As well, people of this area are less migratory compared to other areas. This is also caused by substandard communication and transportation

---

<sup>1</sup> The World Bank, 1994, “The World Bank and Participation,” Operations Policy Department, Washington, D.C.

network that make people less willing to migrate to other places leaving families and dependants behind.

Given these disadvantaged conditions, people had little reverence for the target of comprehensive sanitation coverage plan. While the struggle for making a living from hand to mouth preoccupied most villagers' everyday stake, the target appeared to most of them as a fancy and an unrealizable mission. It was a big confusion for many poor people in understanding the approach why people talk over and over on sanitation at a stage while they care only for food, work and proper medication than anything else? However, such confusions have gradually resolved upon gradual progression of the motivation campaign. Soon they realized that unhygienic sanitation causes diseases and diseases cause wastages of money and health contributing further to escalation of their impoverishment. The changes in their mind-sets have become possible through participation and the concerted efforts of the community allies.

There are 3,254 households in the Nasirabad union. Before inception of the sanitation programme in March 2004, about 20% households were assumed to have proper sanitation. The national sanitation survey of 2003 depicted 35% hygienic sanitation in the union. However, surveys conducted by school teachers of the local schools under leadership of Nasirabad Union Parishad and coordination of Hunger Free World, a PNGO of NGO Forum produced different sanitation scenario. The survey found only 23% latrines having congruence with proper sanitation indicators. It is worth noting in this context that the local NGO Hunger Free World made some progress in motivation and development of sanitation condition beforehand.

Hunger Free World had formed five Village Development Committees (VDCs) for its earlier WatSan project. Now that the local administration set their goals to bring the union under total sanitation coverage by December 2005, the five Village Development Committees were pulled in to join with Hunger Free World and the Union Parishad to work out policy options and devise implementation strategies under the leadership of the Nasirabad Union Parishad. NGO Forum's community leadership guideline helped them to discuss over the matter of forming community groups comprised of people of every spheres of village life. People included in these groups are school teachers, imams, influential community leaders, and elderly and experienced social workers, women and men Union Parishad members, and household representatives.

### **5.3.1 Community Alliances Holding Stakes in Participation**

The sanitation movement throughout the country could not come into being without active participation of the community allies. Like many other unions of Bangladesh, Parulia, Khalilnagar, Shahbajpur, and Baniajuri unions and other unions present vivid pictures of vibrancy of the community allies, and make it clear how these alliances can make real differences in sanitation accomplishment.

Parulia is a Union Parishad under Debhata upazila of Satkhira district. The union has 15 villages 28 paras and 5,253 households. Total population of the union is 25,000. More than 50% population of this union live under absolute poverty, some having no land of their own for cultivation or making abode. Even within this small locality, villagers constitute two different

social groups: one relatively better-off and educated having modest amount of landed property and living options, while the other group usually move from one place to the other in search of temporary jobs.

This difference has made an artificial division among the people of these two income-groups making it difficult to implement total sanitation programme equally among every members of society. Community allies noticed that this class-based division was compounded due to a specific geo-political and historical reason too. They also realized that although a long time has passed, the majority of the disadvantaged and impoverished group constituted of migrant people who have migrated from India in one group after other several times since 1947, have not been allowed rooms to adapt with local geo-political context, and that their exclusion and downtrodden socio-economic condition pose a threat to total sanitation. Moreover, Parulia's geographical characteristic uniqueness has also appeared as a potential barrier for total sanitation. Its landscape stretched over 22 kilometer-long riverside trails made it more difficult for community allies at one end to communicate with people of the other end.

These geographical and cultural distinctions that imposed psychological divisions between the well-off and the disadvantaged people had greater implication for the movement towards hundred-percent sanitation target. The community allies like imams, local influential leaders, Union Parishad members, and teachers have mentioned that people of the well-off part of the union used to boast about their good sanitation practices in compared to the poorer people of the other side. Although their earlier understanding was that most unhygienic sanitation practices, open defecation and bad bygone habits are attached to that portion of people; community allies later found it inaccurate. IDEAL, the PNGO of NGO Forum and community allies have revealed that the national sanitation survey of 2003 that portrayed an overall better sanitation picture delineating presence of 55% hygienic sanitation in the union was equally incorrect. Only 40% of the households actually had access to and provisions of hygienic latrines, where the southern part equally lacked proper sanitation.

IDEAL's motivation campaign inspired community allies of all walks of life to break that long-existed psychological division between two groups of people in the union. In order to accomplish the goal of Union-based Total Sanitation, they conducted motivation campaign in both territories equally. It has resulted in the erasure of that long-existed mind-set-based division between people. It has also contributed to the reversal of a gender-biased prejudice of people that women were more responsible for unhygienic sanitation, conceiving that they allowed children and youngsters defecate in the open. However, community allies' motivation campaign, follow-up and monitoring produced the proof that women were more convincible, supportive, serious and dedicated in the movement of proper sanitation. They have become more easily motivated and active towards maintenance of hygienic sanitation than men did.

Koibartapara is another instance of victory of solidarity upon division between two different people. Koibartapara is a small locality where most poor people of Shahbajpur union, Sarail, Brahmmanbaria live. The people of the union are disadvantaged due to their minority condition by religion and subaltern occupation. Hundred percent people of this para are Hindu. Fishing is their only occupation over ages. These two factors have affected their mobility and interaction with other people of different occupation groups of the union. Some residents of the union have expressed that they did not have regular communication with different non-para resident

before. However, the sanitation movement has erased this long-existed distance and division between people. They observed a never-seen-before festivity, zeal and commitment in people to meet each other, to go home-to-home and door-to-door leaving their mind-sets and stereotypes behind. They also surprisingly observed how women Union Parishad members and community health providers met them – often frequently and informally. They wondered to see that those men and women were no more different from them. Despite their better-dressed gesture they eat, chat, smiled, gossiped, and made fun and pastime together to reach the heart of people. Thus, a woman of the para says, “Getting access to proper sanitation and learning about it was an amazing reward to me. No matter what happens, I will not give up this new-learnt practice. Not only me, I believe all other community members also became so accustomed in proper sanitation that their habit is changed aground. This is why they will never revert to older-days defecation habits”.

Similar development has come to effect in Shahbajpur through the contribution of the community allies. The Union Parishad chairman thus has acknowledged it saying - “The contribution of the community allies in the hundred percent sanitation movement was phenomenal in all respect. As well, the successes would not have come without their active participation. The union reached the expected coverage in a short time by dint of hard labour of the community allies”.

In Khalilnagar union, Tala, Satkhira, about hundreds of courtyard meetings took place under the motivation campaign. Students of all schools, colleges and madrasas were brought under this comprehensive campaign. Teachers and guardians of students were invited in several community gatherings. Ward-based rallies made a vibrant demonstration of people sensitized in total sanitation approach. The Union Parishad financed in publication of 25 banners, 30 wall-paintings and thousand copies of leaflet and poster distribution. A union-level workshop conducted with general people offered an opportunity to assess and record varying needs of people. Community allies arranged promotional video film-shows to extend visualized sanitation messages to the people. They also coordinated miking, ward-level motivation meetings, rallying, and arranging popular theatres at different parts of the union. Community allies and the chairman also made the UNO visit villages repeatedly.

In Shahbajpur union, Sarail, Brahmanbaria, ward level committees of community allies were formed in the very first month of the sanitation movement. Gradually, allies helped form para level committees of influential people. They together formed an action committee comprised of local influential persons and respectable community people that held regular weekly meetings. Throughout the process of maintaining extensive networking with these various groups, allies showed outstanding performance and dedication to bring all groups together as and when needed. The allies spent at least two hours daily besides regular meeting-time in executing motivation campaign from one area to the other.

One of the indicators of alliance activism and spontaneity throughout the country is that none of the eighteen community allies in Parulia, thirteen of Baniajuri, and all of Nasirabad union allies remained absent in more than one meetings and campaign transect during implementation period. Sheikh Abdul Moyeed, Chairman, Parulia Bazaar Committee, Debhata, Satkhira is an influential elite person in the village. He extended his all-out support to the programme, attended about 20 planning meetings at IDEAL and Union Parishad office, joined

physically in almost all courtyard meetings, visited schools and mosques frequently, and maintained a strong communication network with every household. He visited all households of the northern part of the union, and tended to motivate members of every household towards proper sanitation on a regular basis. He credited all other allies, not from mere courtesy; for their similar attention to the movement. The role played by the imams as allies is also indicative. There are 45 mosques in Parulia union. All 45 imams of these mosques took training at IDEAL office. All of them addressed before the Muslim devotees the religious significance of health, hygiene and sanitation practice in every khutbas of jummah prayers. In Baniajuri, 22 imams but one received training, and used skills to train others. Abul Hossain, the Union Parishad member of the ward no 4 of Parulia, thus, credits the motivation campaign and its forerunners-community allies for bringing to an end the long-existed social division between the rich and the poor.

Participation goes hand in hand with motivation. Therefore, both go together. While motivation enhances participation, participation escalates the level of motivation of people. This intertwinement results in the accomplishment. Thus, the participatory activities adopted to carryout the motivation programmes resulted in comprehensive sanitation activism in the community. The allies reported of considerable level of positive impact of audio-visual motivational activities on people. Popular theatre, movie screening, rallies of children, miking, poster exhibition in different visible points of villages, and *jari-shari* (folk music) acted as effective promotional modes of motivation. Courtyard meetings with women and household members, repeated follow-up visits and motivation dialogues of women Union Parishad members with women household members, and peer-pressure resulted in achievement of the target.

Other union residents also reflected on this issue in a similar way. An influential community member of Shaghata union, Muktinagar, Gaibandha makes a similar statement – “if we could only be motivated towards reward, the coverage would not be achieved, because everyone of us would tend to expose ‘self’ than our community. As well, Union Parishad Chairman and members would have tended to centralize their leadership to harvest the credit of the success”. The Chairman of Parulia, as well, has recognized the contribution of the allies, and conveyed his gratitude to them repeatedly. The man also concludes his speech repeating the same expression of gratitude and honor to the allies – “I must say again and again that this success could never be accomplished without dedication, sincerity, integrity and unconditional participation of community allies towards reaching the goal within the stipulated deadline”.

“It was very difficult to motivate some people, something comparable like difficulties of making a person wake up who actually is already awoken but pretending sleeping. Yet we went to them again and again, sometime swallowed bitter remarks and harsh comments, but later on they joined our team of comrades in the movement”, states a Union Parishad member of the Mahadevpur union, Shibalaya, Manikganj. Most chairmen and other Union Parishad members have expressed that there were instances, although scanty, that they were compelled to report to the Upazila Nirbahi Officer to adopt “pressure principles” meaning issuance of legal warning and taking police action against non-cooperative community persons not installing proper sanitation. The Chairman of the Nasirabad union explains – “of course administrative intervention, especially legal actions, or pretensions of legal actions of the local administration frightens these people, but these people constitute just a finger countable number. Since we did

not use pressure policy for larger sections of people, I would say – not pressure principles, but participation principle deserve the actual credit for success of the programme.”

The media also played its positive role in favour of the Union-based Total Sanitation. The media representatives participated regularly in different meetings and fora organized as part of CLTS and made news & feature coverage in their respective medium. The news coverage highlighted on organization and conduction of various events that contributed mobilizing the community people towards hygienic latrine promotion. The media people also made it easy to transmit the news of these unions that reached the success after certain period of intervention. “*3 unions in Kurigram fully sanitized*”, is title of a news published in the *Daily Star* on 15 March 2005. The news states, “Three unions of Fulbari upazila in Kurigram district have been declared totally sanitized. Kurigram Deputy Commissioner (DC) Azizar Rahman Mollah formally declared this at a colourful function in Fulbari on March 9”.

The news also confirms, “Fulbari is the second upazila in the country which has been brought under total sanitation. Last year, Rajarhat upazila was declared fully sanitized. Being inspired, people of five other unions became interested and began to build sanitary latrines themselves. Because of spontaneous participation of people from all walks of life, the sanitation programme succeeded”.

Another news published in the *Daily Star* on 21 December 2004 with the title *Only campaign can sanitize villages* states, “Ratanpur, a remote union under Kaliganj upazila in the district, is now cent percent sanitized. All 3,701 families in villages in the union, rich or poor, now use sanitary latrines and are aware of primary health care measures. Only two years ago, most people in the villages could of think of such a situation”.

Participation reaches to such an extent that sometimes it increase community responsibility of the residents of most unions. Some community allies donated a portion of their hard-earned savings to ensure participation of the poor and marginally economically capable people. The Hunger Free World staff donated the money allocated for their meeting-time tea expenses and hospitality. During the movement, they did not take tea or snack in order to generate at least a small fund to supplement latrine installation cost of the poor people. The 20% of allocated ADP budget of the Union Parishad is already allocated to provide the ultra-poor who fails to contribute even the smallest portion of cost, free latrines. Yet, some poor people remain left out, may be due to incapability to manage only a small portion of required cost for latrine purchase. The donation of Hunger Free World helped a modest number of poor people receive small supplement of the total cost of latrine purchase. There were also some individual attempts of assisting poor people with partial funding for latrine purchase. These instances refer to that participation did not limit only in physical movement of people, rather it took shape of communal responsibility to ease financial burden of the poor people.

Therefore, participation brings manifold socio-economic advancement. It does not only reduce poverty, but also minimize social divisions, conflicts, clashes and disparity between people. Besides, it provides grand lessons for people of every walks of community life. While bureaucrats meets the grassroots people, or the grassroots people finds avenues to share their stakes with hard-to-reach administrative personnel, a greater social bridge of solidarity builds.

One might ponder what lesson the Union Parishad learns out of the success of the sanitation movement? “They are many”, states Abul Hossain of Parulia union, Debhata, Satkhira. His statement serves as a wrap up discussion over the three attributes of the CLTS approach. To him, not only the Union Parishads, but the whole nation can learn from the success of the sanitation movement the lesson that proper leadership, coordination and participation creates an unbreakable chain of strength and opportunity for people. To his words, “leadership comes first”. Perfect leaders can make every individual of a community realize and grasp the necessity of proper sanitation, and evils of unhygienic sanitation practices.

In the second place comes participation. Participation does not come through one-way communication. To Sheikh Abdul Moyeed, an influential local elite of Parulia, Debhata, Satkhira “making people participate in the realization of common community stake is difficult task indeed, but this is the easiest task too”. He explains that involving community people in the implementation process requires nothing but skill and dedication on the part of the leaders. When people realize that not “others”, but they “themselves” can serve own interests and stakes, they come forward. Therefore, this is a matter of motivating people towards meeting their own stakes. This approach asserts that a process must make people understand that individual benefit cannot be accrued through individual effort. When community benefits are safeguarded, every individual’s benefits become safeguarded.

In the third place come the needs of coordination. Amir Ali, a member of Shahbajpur union, Sarail, Brahmanbaria, thus, says—“previously it was commonly thought that Union Parishad could do so many things alone without help of the others. This patriarchal attitude is changed by now. It is a qualitative change in the administrative practice, and that now the Union Parishad strives to learn more from others, especially that of leadership capabilities”. Well-laid NGO approaches also create learning environment, because these approaches are often outcomes of repeated research and feedback. Therefore, these mechanisms are worth learning for the Union Parishads. On the other hand, the strength of the Union Parishad lies in their proximity with grassroots people. They are real representative of the grassroots people—real spokespersons of people’s stakes. Therefore, they hold advantageous social standing inside the community than outsider-interventionists. Therefore, powers and strengths of both NGOs and Union Parishads must be brought together. Ali opines, “Such combination should be called as coordination”.

The sanitation accomplishments bring community level well-being too. There are a few positive outcome of the programme throughout the country. The first of all is eradication of diarrhea and water-borne diseases from many localities. A dispensary owner in Shahbajpur union, Sarail, Brahmanbaria has informed that not even a single person of Shahbajpur came to his dispensary to buy medicines for diarrhea, cholera or dysentery over several months. This instance is indicative in the sense that people of the unions that accomplished Union-based Total Sanitation suffer from lesser frequency of diseases than older days.

Another important outcome of total sanitation coverage is somewhat relevant to gender development. Since women have much better access to proper sanitation than ever before, they are remaining healthy and much more productive at household level than earlier times. Such progresses are likely to increase girls’ enrolment in schools because most girls in earlier times avoided going to school for privacy concerns regarding sanitation.



The CLTS approach has also contributed to a meaningful development in the subsidy approach. Its lesson is that the mechanisms of administering subsidies should create various logical layers of participation. Subsidization does not necessarily mean exclusion of the subsidy recipient from participation. The CLTS process suggests that in order to ensure participation of the downtrodden people, the community, irrespective of the status of the beneficiaries, must bear at least 10% of total capital cost of sanitation. Sustainability of operation and maintenance (O & M) of sanitation is another important achievement of the CLTS approach. The 'user groups' in clusters pay 100% cost-contribution, but the hard-core poor groups, ideally contribute only 50% of the capital costs for sustainable operation and maintenance of sanitation devices. The hard-core poor households are liable to pay an upper ceiling of 25.00 Taka per installment per month. There is a provision of collecting this share from the hard-core poor people through their capital cost contribution on installment basis. The Gram Sarkar, on behalf of the Union Sanitation Committee, holds the responsibility of monitoring and support to ensure regular payment by the hard-core poor. This scheme-cycle strategy ensures minimization of stress of the target group in making their capital cost-contribution.

Engrossed with unique merits and qualities, CLTS thus constitutes a body of development paradigm, the lessons of which can be imitated, adapted or replicated in other development interventions.

## CHAPTER - 6

### Capacity Building and Service Promotion

Capacity building is a built-in process of CLTS. It encompasses skill and efficiency component of all actors engaged in total sanitation- local government representatives, partner NGOs, community allies, youth groups, private sector operators and volunteers. While training is the most essential means of capacity building, GO-NGO initiatives for capacity building are limited in training component. Therefore, many other means of capacity building are also involved in sanitation movement. One of them is processual capacity building, meaning the implementers themselves learn and continuously nurture self-skilling towards the target. The other form of capacity building of the actors arises out of community-based dissemination of success stories of collaboration, coordination and leadership. When Union Parishad members discuss their successful strategies with other Union Parishad members, both parties capacitate mutually. Demonstration effect is another means of capacity building. It is observed that most unions achieving hundred percent sanitation lately imitated or replicated effective strategies used by the formerly successful unions.

In line with the capacity building principle, software services are part and parcels of total sanitation process. Different type of communication materials are being used throughout the process of implementation that strengthened the capacity building. These software services are the key ingredient for community mobilization about necessity of sanitation. The realization has created demand of hardware support among people that has enhanced the Union-based Total Sanitation.

#### 6.1 Training: A Means of Capacity Building

As the scope of training stretches far beyond the skill development, nowadays it constitutes an essential mode of human development, capacity building and keeping people updated with the changes of social contexts and global scenarios. The CLTS process prioritizes the need for developing actors' capacity to implement the sanitation programme at the community level. In order to ensure institutional development of partner organizations of the coordinating bodies, CLTS inspires the actors to gradually accomplish sustainability after hundred percent sanitation achievements. NGO Forum as an apex body of NGOs engaged in nation-wide WatSan campaign tends to assure through training the expected number of skilled work-force among its partner organizations at the grassroots level. These trainings ensure development of proficient human resource at the community level ensuring proper balance of gender, community management and governance aspect for sustainable Union-based Total Sanitation programme. As a role model for other NGOs in sanitation movement, training is imparted on two broad issues related to hardware and software services. These issues are:

1. Human Skill Development Training and
2. Technical Skill Development Training

Various type of trainings, workshops, orientation programmes and other human skill development measures can be put under the *three shades* of the broader capacity building umbrella. They are as follows:

**a) Capacitating the PNGOs**

As part of the CLTS process, capacity-building trainings are conducted for the staff of partner organizations. The trainings under this shade of the broader umbrella are: sustainable WatSan programme, WatSan programme planning and management, community-managed WatSan programme, participatory hygiene promotion, WatSan programme monitoring, etc. These trainings are conducted for different level of the staffs of partner organizations, so that they can become able to manage the programme in line with the set strategies and goal. These trainings substantially strengthen partners' capacity that perpetuates and gear up to meet the set deadline of hundred percent coverage in the respective unions.

**b) Building capacity of local institutions**

As responsible institution in leading CLTS implementation process under its Union-based Total Sanitation, it is felt that they need their capacity be built for smooth operation of the programme implementation. To enhance capacity of local government institutions with other institutions like school teachers, cultural groups, etc are covered under different trainings. The trainings under this shade of the broader umbrella are: programme planning and implementation for Union Parishad chairmen and members, effective participation of local government institutions for community WatSan management, training of school teachers on WatSan promotion, training of local cultural groups on WatSan campaign, WatSan orientation for Ansar-VDP, training for the women Union Parishad members on WatSan promotion, orientation workshop on WatSan issues for the religious leaders, etc. These trainings capacitate stakeholders of local level institutions that help the actors to grasp the essence of the programme and to act as per the guidelines of the programme. Such capacities ensure participation, increase efficiency of coordination and leadership and create pace for mutual understanding among different stakeholders. These training courses strengthen capacity of PNGOs, local government representatives, school teachers and cultural group members in effective implementation of Union-based Total Sanitation programme. These trainings enhance multifarious capacities of stakeholders that ultimately help smooth operation of the programme to reach the target.

**c) Technical capacity of mason**

Considering the socio-economic context of poor people, affordability of and access to hardware is precondition of Union-based Total Sanitation. To ensure easy access with an affordable price training is provided to masons on low-cost latrine production. Those masons are involved in latrine production in NGO-run production centre or working as producers at their private centres. The technical skill development of masons has been considered as integral part of the Union-based Total Sanitation to ensure access of people to quality hardware support.

The *training materials* used are of various types depending on the modes and traits of training needs. Besides core materials such as overhead projector and transparencies, posters, modules, audio materials, video film, handout and multimedia, NGO Forum manages to use booklet,

stickers and flip-charts, flash cards, field test kit and different water supply technologies. The participatory and triangulative techniques predominate these *training methods*. Taking into account the subject matter, place, environment and the number of participants, Participatory Rapid Appraisal (PRA), question-answer, exhibition/display, field visit, and practical demonstration, VIPP, lecture discussion, brainstorming, open discussion, experience sharing, fact analysis, role play and micro-lab methods are adopted.

The *post training activities* are other integral parts of the capacity building ventures of NGO Forum. After conducting each and every training course, NGO Forum undertakes *follow-up* activities to assess whether their demands have been fulfilled and also how effectively the training participants have accumulated knowledge and skills from the courses. And accordingly, refresher courses are organized upon detecting the deficiencies on the part of the trainees. A *training communication network* is also maintained all over the country involving trained staffs of the PNGOs. These staffs are introduced with new issues, and information and materials through this network. They also enjoy the opportunity to share experiences through this network. Monitoring is another important post training evaluation process. In order to observe the performance and progress of the trainees, visits are made in the field areas on regular interval. The effectiveness of the training courses is assessed through the training monitoring which eventually helps to make the training programme much more dynamic and effective.

### **6.1.1 Enhancing Leadership and Management at the Community**

As part of implementation process the partner organizations arranged trainings for each ward sanitation committees to equip them with adequate leadership capacity and management ability. These trainings helped the committee members learn about approaches of motivation, strategies to approach to people, and techniques of communication, discussion, reception of feedback of people, with hearing and giving them voice, and modes of conflict resolution. Throughout the process, these trainings provided the committee members additional social dignity and acceptability among people other than their predetermined social position just as community members.

Workshop on programme Planning and Implementation for Union Parishad Chairman and Members was held in all Union Parishads under the coverage unions under coordination of the PNGOs of the NGO Forum. Similarly, none of its partner NGOs left any union untouched in providing Training on Effective Participation of Local Government Institutions for Community WatSan Management. Training courses for School Teachers on WatSan Promotion were also conducted in all unions under its operational constituencies. A combined stakeholders orientation took place in Mohadevpur union of Shibalaya upazila under Manikganj district. The orientation programme involved imams of different mosques, school teachers, other NGO staffs, members of local government institutions, some commercial bank staff, staffs of upazila land and agriculture office. It was a locally adapted strategy of capacity building of different people of the community that has become proved as effective in capacitating people of different walks of life together. Some unions achieving hundred percent coverage conducted at least seven different type of trainings each month by rotation. These trainings contributed in building capacity of stakeholders on evaluation, monitoring and follow-up of sanitation activities.

Training for the Women Union Parishad Members on WatSan Promotion also conducted in most unions that achieved 100% sanitation coverage. The women members are utilizing their achieved knowledge in community mobilization for sanitation coverage. The women members of Mirzabari union of Modhupur upazila, Tangail, Muktinagar union of Shaghata upazila, Gaibandha, Bhatgram union of Mirzapur upazila, Tangail are just a few examples in receiving such training. The capacity they built through these trainings added newer dimensions to their participation in comprehensive sanitation activities and motivation campaign. The above-mentioned instances do not refer to success of trainings only in these areas, rather they were commonly practiced in other NGO Forum supported unions.

The Orientation Workshop on WatSan Issues for the Local Religious Leaders was held in all coverage areas. This training generated multiplication of efficiency in many unions. While imams, school teachers and influential community leaders were premier recipient of the training, they turned into trainers through providing their new-learned knowledge to others. An Imam was found in Mirzabari Union, Modhupur, Tangail, who received this training first. Then he conducted training for other imams based on the training contents he became familiar with earlier.

Some of these means are intended to disseminate sanitation messages to every people in communities including children and senior people. For instance, NGO Forum publishes a large number of school communication materials under its motivational package. Some NGOs also conduct tailor-made courses. The objective of such trainings is to fill the gaps and loopholes identified in the implementation process. Rectification and modification, thus, are not left behind the process mode of implementation strategies of the NGO Forum.

## 6.2 Promoting Partnership

The comprehensive sanitation movement flourished through partnership of Union Parishad – the lowest strata of local government in collaboration with NGO Forum, PNGOs, DPHE and other government officials like the health and nutrition workers, and the community people. The strength of partnership is a key criterion for immense success. The principle of partnership is that communication, collaboration and cooperation between the partners are reciprocal in nature. This does not at all refer to one-way provision of patron-client or donor-recipient relationship. The essence of partnership, thus, lies in the efficient involvement of the actors in using their own means and resources, as well as their local cultural contexts and human resources. This is why NGO Forum facilitates its PNGOs to formulate their own strategies instead of imposing top-down policy indications. Therefore, the PNGOs enjoy adequate freedom to design capacity building strategies corresponding with their respective locality concerns and available resource base.

It has been observed in the field level that reciprocal collaboration between the umbrella organization and the PNGOs help build mutual relationship, facilitative attitude and cooperative instinct towards the community stakeholders. Whenever the partners moved to conduct training, orientation meetings, ignition drive; the umbrella organization responded positively and instantly and provided instant support in accordance with the needs of the partners. These mutual relationships accelerated the pace of accomplishment of coverage by the unions.

### ***Power lies in partnership***

*“Success of any implementation activities depend on two things: leadership and process”, says Nazrul Islam, the Executive Director of IDEAL, a PNGO of the NGO Forum. He further adds-“it is impossible to implement any development project at grassroots level without the involvement of the Union Parishad”. His successive clarifying remark is “Union Parishad holds institutional leadership power, and people’s legitimate voice. However, this power often remains latent inside the system. This power needs to be ignited. NGOs are the ones that can play the role of ignition more effectively than any other forces”.*

*IDEAL stands for Institute of Development Education for Advancement of Landless. It is situated in Parulia union of Debhata upazila under Satkhira district. IDEAL has gained membership of the NGO Forum in 1993. Since then, it has been executing community health and hygiene development under the support of the NGO Forum.*

*In recent movement targeting accomplishment of hundred-percent sanitation coverage, IDEAL has played a grand coordination role. Its activities range from establishing collaboration with local government and turning sanitation movement into a social movement in a populist manner.*

*In April 2004, the Deputy Commissioner of the Satkhira district convened a meeting of the LGIs, DPHE personnel, LGD staffs and NGOs working in the water and sanitation sector. He proposed 2006 to be the deadline for the Parulia Union Parishad to accomplish 100% sanitation coverage. The Upazila Nirbahi Officer, however, wanted the target be reached much earlier – by mid 2005. The Chairman of Parulia union – an educated and dynamic person, took the challenge to meet the target.*

*IDEAL’s objective was to facilitate the Union Parishad maintain the leadership position, and assist in exerting its highest potentials to achieve target sanitation coverage. In this regard, IDEAL prioritized maintaining a chain of command among the actors. According to Nazrul Islam, the Chief Executive of the organization, “Chain of command took shape of a work flow where IDEAL frequently motivated and insisted the Union Parishad Chairman and members to launch various innovative tasks and actions. Union Parishad chairman deployed his team – the members on various posts as advised and planned jointly by the stakeholders and the PNGO. The members have maintained close relation and collaboration with the ward committees in their respective leadership zones. These ward committees further maintained communications and connections with local allies. The chain of insistence has stretched up to activities of the local allies too. They moved from home-to-home, door-to-door to record and share information regarding actual sanitation condition and sanitation habits of people in their vicinities.*

*IDEAL’s role was extended beyond the scope of capacity building only. It played major role in organization, mediation, coordination, collaboration, insistence, extension of moral support, training, formulation of guidelines and communication strategies. Beginning from the inception meeting at the Deputy Commissioner’s office, IDEAL pioneered a number of activities i.e. union selection, conduction of planning meetings, volunteer recruitment & training, conduction of sanitation surveys, preparation of work-plan and strategies of follow-up, comprehensive community-level motivation meeting, ward-level implementation meetings, weekly follow-up meetings of volunteers, monthly progress review meetings with the Union Parishad, conduction of various type of motivational activities, etc.*

*Among the motivational activities dramatization was a unique activity of IDEAL. It did not remain confined in routine activities. Rather, whenever some opportunities to expose motivational activities*

*appeared, it appropriated the advantage without any prior preparation. For instance, Whenever people gathered to enjoy some other festivities such as Eid, seasonal village fair, political meetings, and religious conferences (mehfils), IDEAL utilized these gathering to publicize its motivational messages about hygienic sanitation. IDEAL hoisted banners and festoons in many such festivals just upon instant decisions. Sometime some influential people such as MPs, ministers, Deputy Commissioner, UNO, Union Parishad chairman and other personalities attended other meetings with objectives different from sanitation. Even in these situations, IDEAL requested most people of rank and file to deliver short extra-routine speeches or invocations on the need of accomplishment of total sanitation. The eventual and incidental activities made possible spread of sanitation messages to every inhabitant of the union.*

*“Leadership can be dragged out of conventional administrative stereotype. The way of dragging out lies in the process of capacity building of people’s representatives. This is how IDEAL engaged Union Parishad members in leadership process”, says Nazrul Islam. He also adds – “capacity building must be regarded as an effective means in development interventions, especially in community-led development”. In relation to the sustainability of the CLTS approach and its success in Parulia union, Nazrul Islam states, “Sustainability would depend on extensive monitoring and follow-up of hygienic sanitation use and maintenance by community people. He has also suggested that sustainability can be availed through regular post-accomplishment follow-up for another two years”.*

For Union-based Total Sanitation, NGO Forum’s experiences of the village-level community-based WatSan approach is scaled up to the union level. The scaling up venture is especially designed to integrate and activate the institutional capacity of the LGIs for programme implementation. The macro level and micro level linkages are established for collaboration of the representatives of the local governments and the NGOs. The scaling-up strategy also puts into motion-combined efforts of programme’s development evaluation through community-based monitoring mechanism and follow-up.

### 6.3 Sensitizing People through Promotional Activities

NGO Forum views building the capacity and raising awareness of the implementing partners and the grassroots people a must for the sustainability of the total sanitation programme. The objective of the promotional measure is directed towards changing behavioral attitude and hygiene practice of people regarding sanitation. In the process of exploring effective and efficient aids to these actors, NGO Forum disseminates communication materials, maintains and enhances inter-personal communication activities and the media channeling. The mass people along with the community allies like the school teachers, students, local opinion leaders, imams and other potential partners at the grassroots as well as the staff of the partner NGOs become sensitized and empowered through the conduction of promotional activities.

Mostly the partner organizations (PNGOs) facilitate these promotional activities. The principle of promotion is to ensure equal participation of men and women. Different type of promotional activities are administered in different clusters based on the category of the target people. The clusters are:

With a view to achieving the Union-based Total Sanitation in the intervened unions following the CLTS approach the *partner NGO staff orientations* were organized. The performance of the

oriented staffs was found effective as they carried out different WatSan activities at the grassroots level mobilizing the community people.

*Formation and mobilization of VDCs* also proved efficient and effective in bringing total sanitation coverage at community level within the given time-frame. The PNGOs of the NGO Forum successfully conducted hundreds of *capacity building training courses & orientations* for the VDCs. The outcome was phenomenal. A large number of VDC members, of whom a substantial number were female, were capacitated to initiate village level sanitation hygiene promotion.

Capacity building of community allies also proved effective. NGO Forum facilitated *formation and orientation of school WatSan committees* in all unions of its operational areas in Bangladesh. Both male and female stakeholders in each union received capacity building trainings. *Religious leaders orientations* were also held, of whom most religious leaders receiving capacity building training have become directly engaged in the motivational campaign for total sanitation. Over the years, hundreds of *meetings with Union Parishads* were organized where Union Parishad representatives participated. For hygiene promotion and mass awareness, *community ignition drive* also produced expected level of positive outcome in the sanitation movement. Partner organizations have become engaged in repeated community ignition drives to cover both male members of target households.

#### ***Leadership comes out of mobilization***

*A devoted NGO worker, Ataur Rahman Mollick, Deputy Director Udoy, Mirzapur, Tangail played an effective role to implement Community-led Total Sanitation programme in Bhatgram union of Mirzapur upazila under Tangail District. As consequences of his effective coordination among stakeholders and restless effort to motivate stakeholders, including community people have made a tremendous success. The proper coordination, effective communication with community people, utilization of personnel other than this project of the organization, effective monitoring, supervision, and making involvement of concerned staff attributed to accomplishment of Union-based Total Sanitation within the short duration.*

*The target reaches through a process of activities that are ratified and adjusted time to time in accordance with the requirement of involving other groups of people as the community allies in achieving the success. Ataur Rahman Mollick contributed in the programme since the inception of the movement that followed a continuum in selection of areas, coordination meetings with different stakeholders, action plan preparation, making concerned personnel and community allies involved and youth groups vigilant. School teachers, volunteers, local elites, local government and government bodies also came forward under his leadership. From the beginning of the project, he could manage to integrate all efforts and converge the programme into other programme activities of the organization. It has brought fruitful results in achieving the goal of the programme.*

*In 9 March 2004, the Executive Director of Udoy vowed to bring 100% coverage in the union at the coordination meeting at Deputy Commissioner's office. The DPHE personnel, Upazila Nirbahi Officer and Executive Director of Udoy selected Bhatgram union with consideration of its lesser sanitation coverage compared to other unions in the Upazila. Following the union selection, the NGO staff organized a meeting with Union Parishad and set up a formal plan of action to implement the programme successfully. On 18 March, they conducted a baseline survey to get a comprehensive understanding about the existing coverage status. Again on 26 March Udoy recruited six volunteers to facilitate the*



implementation process. The process included participation of stakeholders like Sub-Assistant Engineer of DPHE, school teachers, volunteers, NGO staff. Under the assistance of the NGO Forum, they played effective role in facilitating the process coming into being. On the first day of April, he organized a two-day long volunteer training to orient them with the process and to allocate their in-process and post-process responsibilities. Each old ward went under supervision of two volunteers conducting motivational activities to enhance community participation. The initiatives Ataur Rahman Mollick took to ensure community participation were motivation of people for their involvement in sanitation movement, community level meeting arrangement, and continuous monitoring and follow-up of the progress. Being a responsible person of the project, he communicated and interacted with diverse people through manifold innovative means.

Being in-charge, Ataur Rahman Mollick met different community people to take decisions in consultation with head of the organization. To utilize potentials of other programme staffs of his organization, he launched motivational activities among them. In addition, he assigned his staff with specific responsibilities to monitor and supervise latrine installation, site selection and related credit operation. Five area managers of his organization who are inhabitant of this union, but working outside were also assigned with the responsibility of motivating their respective villagers in weekends. It has also led to reaching the coverage target substantially.

The volunteers worked with youth groups, Imams, Union Parishad members, local elites, influential people. They used to visit area office of Udoy to discuss the progress of their activities. Their visit helped the project run to the right direction in an effective manner. Considering geophysical adversities, they correspondingly changed and readapted strategies. Such adjustments geared up the movement. There were 56 micro credit recipients groups in Udoy's operational constituencies. The credit workers motivated these groups towards installation of latrines.

Ataur Rahman Mollick assigned each personnel to meet specific target within specific deadline. It helped to create a healthy competition among the staff members. He was successful to attach school teachers with the programme activities. As a result, teachers and students organized meetings and discussions on sanitation and its fruitful implementation. It made the programme acceptable to them and encouraged their active participation.

**Courtyard meetings** constituted a dynamic part of promotional activities. These meetings had special appeal to women. As mainstream role players in water handling and maintaining family hygiene, motivated women groups represented tremendous improvement in behavior change. Their behavior change had also become induced in other members of their respective families, who gradually became active participants of different community mobilization activities.

While **community meetings** generally constituted male villagers' attendance, their knowledge and exposure to new-found messages on safe water use, proper sanitation and hygiene practices transmitted among women through familial channel, **mosque-based discussions** disseminating the importance of hygiene from religious perspectives provided completeness to the proper sanitation approach. The imams who had received trainings and orientations delivered motivational preaching to devotees of the respective villages. As well, **tea-stall sessions** further complemented the venture to disseminate the sanitation messages to all people of a community. Thousands of male villagers gained orientation through these informal meetings. In view of even a much further coverage of people for orientation towards hygiene

promotion, local partner organizations conducted frequent *household visits*. These visits also covered monitoring and follow-up action need in the target communities.

Among other activities, *popular theatre and folk-songs* had contributed to the promotion and awareness of poor people towards hygienic sanitation. It was observed that most unions that achieved total sanitation coverage had arranged popular theater and folk-song concerts using various themes of sanitation and hygiene promotion. With visual aid of these programmes, general audiences who otherwise remained left out from receiving sanitation messages became aware and conscious about necessity of proper hygiene. These infotainment programmes reflected social commitment and inspired common people to be committed to participate in the total sanitation movement. Promotional activities extended even up to *child-to-child approach*. The approach was practiced in many coverage unions. With inspiring parents and elderly relatives in their households, the motivated children groups also played effective role in sanitation promotion.

The *rallies and miking* were other integrated activities that had always been proved as efficient means of improving mass awareness on sanitation and hygiene behaviour. Rounds of rallying and miking over the years promoted popular knowledge of health and hygiene at enormous level. These activities inspired thousands of female community members to attend those rallies. Added to these activities, *FGDs on hygiene promotion* were conducted in all target unions. These promotional FGDs involved different groups of community people in the implementation and action programmes. Triangulated with these activities, the national level content-rich orientation programmes of NGOs continuously kept adding newer promotional and motivational inputs in correspondence with local needs. The *observance of national and international days and other events* also addressed relevant issues and themes associated with proper sanitation, personal hygiene and environmental issues. In consonance with the themes of these events, NGOs organized and participated in different fora of collaborative partners and sectoral and trans-sectoral stakeholders.

Chairmen and members' *surprise visits* in programme areas also contributed to the achieving of sanitation coverage by target deadlines. The male and female members of respective wards worked and moved frequently to follow-up progress of the movement. Sometimes they initiated special moves to carry out door-to-door visit. It encouraged as well as constituted community pressure to the people who were disinterested in installation of latrines at launching of the movement. Upon facilitation and insistence of the partner NGOs, local government representatives took some additional and non-routine initiatives to turn the movement a success. Some of these initiatives were to make the UNOs visit door-to-door in order to signify the campaign to the mass people. Although it was not a usual practice, the UNOs issued pressure-policy to resolve the problem of some unusual instances of non-cooperation of the community people. Well-off persons capable of installing own latrines, yet not going for sanitary latrines were issued legal action notices. Those notices alleged the persons of polluting environment and community rights of proper hygiene. These steps were proved successful in most cases.

In order to motivate, sensitize and raise awareness of people towards hygienic and proper sanitation, the PNGO arranged rallies and miking in every ward and village. Thematic popular theatres, folk-song and cultural programmes played important role to raise awareness of

people. The themes of these cultural activities conveyed messages to people about the inevitability of proper sanitation use, and health hazards and woes caused by unhygienic sanitation habits. As well, this performing visual media enlightened popular mind with clear conceptions that sanitation is affordable even for the poor people. Thus, cost must not be considered a barrier for accessing to proper sanitation technologies. The popular theatre conveyed eventful messages to make the audiences realize that they spent a large amount of money in treating patients of diarrhea and other water-borne diseases, and that the cost of installation of latrines are much lower than this cost. Moreover, the plays helped in educating the people to grasp the fact that there were different types of sanitation technology, and that cost-effective options were widely available for different income groups. Consequences of these plays and concerts inspired and provoked audiences to break open latrines, and replace them with hygienic ones.

### ***Popular theatre: food for thought***

*Juger Jatri – a cultural group was formed by a group of motivated, dynamic and young people in 1998. They have been working in philanthropic motive on voluntary basis to make aware about various social and economic issues. The awareness of the people is needed for establishing conducive environment in encountering social injustice and challenges. To make people aware the cultural group has been performing issue-based street drama in respective communities. Since water and sanitation is striking problems so that they are taking active part in promoting sanitation from urge of doing something through Community-led Total Sanitation programme process under the leadership of Union Parishad. Shetu, a partner organization of NGO Forum facilitates the process. In addition to WatSan, the cultural group has performed street drama for awareness raising on prevention of women and child trafficking, violence against women and children, negative consequences of dowry, etc. The director of the cultural group, Imdadul Haq states that among all show the awareness campaign on WatSan got highest acceptance to the community people. This show helped realize the necessity of hygienic sanitation use, safe drinking water, drink arsenic free water, maintain personal hygiene, etc. After getting message from street drama, people became motivated and started installation of latrine.*

*Imdadul Haq says that the responsibility is distributed among the members of the group. SM Nijamuddin, a radio artist and coordinator of the organization is responsible for writing script and rehearsal. He writes script with colloquial language with comedy so that the people can understand messages as well as enjoy the show. The script of street drama on WatSan followed the same rules mentioning problems related to sanitary latrine use, dinking water, arsenic problems, etc. The information packages in each of the script presented sequentially as problems and knowledge on the problems, consequences of the problems, way of mitigation, and supporting organization and agencies to mitigate problems. Nijamuddin adds, “We have given a complete set of message on the safe sanitation as if people need not go to others for information on it”.*

*Since these problems are part and parcels of their life, so it became much attractive and acceptable to the community people. Nijamuddin mentions, “A character of Imam was created in the drama who used references of the Quran and Hadith that made those messages of drama more authentic. The immense response towards those shows encouraged us to be more active. It helps us to realize the outcome of our efforts”.*

*“Initially, we faced obstacles to organize shows from a vested quarter but the Union Parishad chairman, police force, Union Parishad members, Choukidar, Shetu and local elites ensured security during shows.*

*All stakeholders' participation made the show successful and turmoil the evil initiative of vested group", points out Sayem, a performer of the group. The coordinator says, " 25 shows (at least two shows in each ward) were organized in different locations. Audience in each show varied from 500 to 5000. After each show, the demand of latrine in VSC of NGOs and private producers' shop increased significantly".*

*Nijamuddin the script-writer for show mentions, "We got the chance to mobilize people through using our knowledge and skills, and we have utilized it effectively". The street drama shows were seem the best means for community people's motivation because it provided comprehensive messages on sanitation. It has immense impact on coverage of hundred percent sanitation in the union.*

Community children were also brought to motivation campaign through **formation of children group for village level inspection**. They received orientation and inspiration to consider sanitation as directly relevant with their greater health and growth stake. They also acted as pressure groups. It was observed in most instances that children played grand role of a junior pressure group to insist their parents towards ensuring proper sanitation. As well, these children group took part in inspection of hanging and open latrines. Either they reported the problems towards sanitation committees, or themselves took initiatives to sensitize respective users to install hygienic latrines.

Under **school WatSan programme**, motivation campaign was made to school teachers first. With giving them adequate orientation about sanitation hygiene, they were assigned to teach students about necessity of hygienic sanitation. Class-based model exercise constitutes another important part of this practical education. Students learn every ins and outs of proper sanitation habit – use of sandals, and soap and ashes for washing of both hands before and after latrine use.

Formation of the **student brigade** constituted a significant activity of the sanitation movement. Members of student brigade reported to their class teachers the conditions of development in their sanitation habit and regular practice, as well as their role to motivate their parents, other family members and community people. At activism level, student under leadership of the class teachers, brigade travelled around their villages to record prevalence and number of yet persistent unhygienic, open, unsanitary and improper conditions of latrines. They went house-to-house to motivate people yet lacking proper sanitation. To some extent, they were allowed to use pressure policy as an indirect mode of motivation. Student brigade used to take part in breaking open and hanging latrines, making community people realize that the awareness touched even the young children, and thus adults should behave rationally, keeping in mind that they should not be lagged behind children in terms of level of sensitization accomplishment.

Dhanarua Government Primary School of Muktinagar union of Shaghata upazila, Gaibandha formed student brigade consisting the student of class four and five. Each brigade consisted of five to ten students. To understand the status of sanitary latrine coverage through survey and to deliver messages on safe sanitation to community people and children out of school these brigades were formed. The school's catchments area was divided in different parts and distributed among brigades for conducting survey, follow-up of the achievement and motivate household members. Brigade members used to visit households once in a month on Thursday to monitor the improvement status. Sohel Rana a brigade member of class five of Dhanarua Primary School states that initially people did not listen to them and sometimes asked them

whether they would give latrine to those households. However, now people listen to them and show their interest in latrine installation.

### **6.3.1 Institutionalizing Hygiene Education**

School-based programmes following the CLTS approach present a tremendous outcome in institutionalization of hygiene education. The school programmes made hundreds of students of schools of Baniajuri, Gheor, Manikganj, Khalilnagar, Tala, Satkhira and Dhanaroa, Shaghata, Gaibandha aware about basic health and hygiene issues. They were asked to explain what did they mean by hygiene, hygienic sanitation and hygiene practice. They provided correct answers. They were further asked about the diseases that spread through water and lack of hygienic sanitation habit. They proved their adequate orientation regarding sanitation-related hygiene. While asked about how did they learn all these facts, they credited their schools first. It was known that all schools of Khalilnagar union adopted the strategy to begin everyday classes with basic sanitation education. Teachers not only teach, but also ask them whether they are practicing whatever school teachers taught them about sanitation. They also remind them about observance of sanitation month and sanitation weeks, share ideas how to observe these ceremonies with festivity. These schools often arranged classroom-based debates, essay writing, drawing competition, football tournament, and assigned students to motivate their parents towards sustainable sanitation use.

School walls—both exteriors and interiors were painted with murals, depicting messages of proper sanitation and the woes of unhygienic sanitation practices. School children were asked whether all of them had access to proper sanitation. They replied in positive. Again they were asked to inform about some who they knew not installed or practiced proper sanitation. They answered that they did not know or see anyone in their community going for open defecation. They also explained that if they could trace some people still not maintaining proper sanitation rules, they would bring them to community-based correctional measures, such as rebuke, reprimanding, etc.

Both girls and boys in high schools learnt about health and hygiene and need of proper sanitation. It has become evident that their school-based programmes brought grand successes in changing the perception and attitude of youngsters of most unions. In Khalilnagar Girls' School, a class IX student explained that the students can bring considerable changes in the mind-set of the elderly people, because elderly people first treat learning from juniors a prestige-concern, although later they treat such lessons as worth considering. Moreover, parents of some students do not have formal education. Therefore, they value every word of their school-going children. Thus, students constitute a strong force in community-based sanitation movement.

Teachers of these schools reflected on progresses, prospects and every detail of their roles that they played during the social movement for sanitation. All of them explained that Bangladesh society bestows enormous dignity to school teachers. They are usually considered to be local-level think tanks or powerhouse of knowledge. With such customary dignified status, teachers' voices, comments and requests to people are regarded as much more venerable than those of politicians or Union Parishad representatives. When asked if there were any events that other people's voices were suppressed due to teachers' customary high position. They explained that

teacher never dominated the decision-making process. In the planning and strategy formulation meetings, they joined with other allies as like as any other members of society. Once decision is made, teachers along with all other community allies advocated those decisions in public.

The common area of teachers' motivation campaign was to enlighten the parents of their students. During every student-parents meeting, teachers always advised the parents of students to attach highest priority to proper sanitation use. Parents who were not responding to sanitation urge positively were treated with some sort of pressure policy too. They were informed that as per government directives, the scholarships and stipends of their children would be kept held up until proper sanitation is installed. While the teachers were asked whether these pressure principles did fit with the motivation approach, they explained that motivation also requires combination of counseling communication, advocacy and check and balance mechanism. To them, such pressure principles are neither violent, not punitive; rather convey a message that the government supports children's education so that they serve the community. Since human relation is reciprocal, government also deserves parental support to government initiatives exerted through practicing sanitation hygiene in return. Teachers state that they were playing the roles of facilitators to this moral direction.

#### ***Teachers-students: the institutional power-house***

*There are 3 boys high schools, 1 girls' high school, and fifteen different type of primary level educational institutions in Baniajuri union of Gheor upazila under Manikganj district. In June 2004, the chief executive of the partner organization of NGO Forum named Social Development Initiative (SDI) visited from school to school to share with all school teachers the message of the letter of the Upazila Nirbahi Officer about the target to achieve hundred percent sanitation in the union. Teachers in their classes disseminated the information among the students. The headmasters and headmistresses made further elaborated lectures and motivational speeches before all students of their respective schools about the obligations of schools to join the sanitation campaign.*

*Ten out of fifteen primary schools and all high schools, mostly teachers, spontaneously vowed their commitment to take the responsibility of providing substantial contribution and engaging students in the movement. About 2,400 high school students and 3,000 primary school students irrespective of their economic or social condition or gender identity took active part in the campaign and implementation of sanitation programme. While about 45% of the primary students were girls, girls comprised only 8 to 10% of the high school students. Thus, parents of high school girls initially expressed their conservation and apprehension that their daughters would not add much in the campaign, thus participation would not be an essential part in the campaign. However, teachers of these schools assured those parents that the apparent gender imbalance would not at all matter in the sanitation campaign. That way they also participated in the school-led survey of the sanitation condition in the community.*

*The survey of the sanitation condition in the union carried out by the school students was a robust outcome in situation analysis that inspired teachers, concerned SDI executives, Union Parishad executives and influential community members to such an extent that they received motivation of bringing the success of the school students steps further.*

*Since the time the target programme was initiated, the schools were monitored to conduct assembly-sessions prior to formal beginning of daily class-schedule. Teachers in all assemblies reiterated their*

mission towards the sanitation target. Students performed vows to provide their untiring effort until the meeting of success of hundred percent sanitation in the union.

As the succeeding steps, students made their parents meet other parents in SDI's parent motivation meetings. All schools conducted parent meetings about sanitation. Since the teachers hold a very respectable and venerable normative position in Bangladesh society, most parents valued all motivational words of the teachers. Besides parent meetings, students were assigned as part of their home tasks and assignments to monitor and report back about the latrine installation and use status in their neighbourhood.

Three large-scale colorful school student processions ornamented with banners-festoons and attractive slogans on sanitation made the union residents grasp the real need of proper sanitation for all. Four guardian meetings held in presence of the SDI Executive, school teachers and Union Parishad representatives resolved many confusions and lack of clarity of parents about sanitation message. They were encouraged to ask any questions in order to relieve from persistent misconceptions and prejudices. Teachers were facilitated to respond to their questions in a very convincing manner. All schools in this union formed their own Child Brigade that lately entered into a healthy competition of monitoring and evicting of open, hanging and unsanitary latrines.

Lutfunnahar, the Headmistress of the Baniajuri Government. Free Primary School tops the position of icons among teachers. Her contribution was an all-out-one that extended far beyond classroom responsibilities. Under her leadership and visionary initiative, the school itself arranged three school-children's rallies alone. Other schools took that instance as an influencing example for them, that ultimately led to their adoption of many other different types of innovative school-brigade programmes, such as highlighting sanitation issue in school sports, annual school cultural programmes and "dress as you like" events.

Lutfunnahar ensures that all her students recite, but learn as well as teach others the methods of proper sanitation and hygiene. It has been observed that all students of the school know in detail proper hygiene and latrine use principles. Upon report of her students, the Headmistress called parents not practicing proper sanitation systems to schools. Those who did not change even after her repeated motivation and request were put under some temporary pressure, such as halting of children's stipend until proper sanitation was installed. Students, to her opinion, need not to become raised or given lesson for mere graduation, but to become smart and responsible citizens dedicated to the betterment of the country. Lutfunnahar says, "I believe that good citizen is much more essential than good students, and that good citizens can be prepared through good practices from their early childhood. Basic awareness about basic health concerns teaches students about the beauty of life, and beauty of neatness and cleanliness in every other effort and tasks. Therefore, awareness of proper sanitation, to my opinion, serves as the beginning of their awareness about neatness in all other activities they will gradually become exposed to".

One of the important features of the Community-led Total Sanitation approach is that it has dug into deep the belief and faith based entitlement of people, and utilized such attachment for motivation-driven sanitation movement. The imams or mosque-based religious leaders played vital role in motivating Muslim devotees towards value proper sanitation as a part of prayer and compliance to religious principles. The Jumma-time *khutba*—religious speech in weekly prayer congregation has enormous appeal to the Muslim. The imams often use the *Khutba* time to deliver religious education, preaching and educating Muslims with principles of Islam and reminding them of the guidelines for religious living. The *khutba*-time speeches have

contributed to a great deal to the motivation of community people towards maintaining personal and community health.

### ***Performing beyond the boundary***

*Afzal Hossain, a Principal of Radhanagar- Brahman Bari Fajil Madrasha and Khatib (Religious Leader) of Radhanagar Jame Masjid under Mirzabari, Modhupur upazila, Tangail. He is reverent as well as influential by virtue of his position in education and religious institution. He has achieved reputation through working as a religious leader since the last two decades in the community. His immense popularity helped mobilizing the community people through mosque, education, social and religious function based activities. He says, "I delivered sanitation and hygiene messages for motivating people in each and every steps of my day to day activities".*

*"The Ibadat (prayer) is entreaty to Allah. It has many forms such as physical, economic, etc. Cleanliness is the precondition for any kind of prayer. If some one is not clean, Allah will not accept his prayer. As an Imam as well as conscious human being I delivered these messages five times in a day after and before prayer in Mosques and social and religions functions", says Afzal Hossain. "There is no humble prayer other than giving directive to good work. I only give directive to people for such good prayer"- he adds.*

*"After participation in this programme, my realization regarding sanitation has been changed because I do not think about sanitation as I thought earlier. In all meeting regarding water and sanitation at Union Parishad they invited me and I participated. I took responsibilities for motivational activities on hygiene practice including installation of latrine in houses. I performed through mosque, Madrasa, social and religious functions", Afzal Hossain narrates his involvement in sanitation campaign.*

*In addition, people used to invite us as religious leaders in several social and religious functions such as milad (religious gathering), marriage, etc. When they used to come to invite us then those who do not have latrine in their houses we do not accept their invitation. As a result, community people feel urge to install latrine.*

*A meeting was held to responsibility distribution among different stakeholders in a participatory manner, where the responsibilities of imam were determined as they are the respectable persons of the community. It was determined that the imam would deliver messages on sanitation and hygiene practices in weekly prayer, give messages to students of Mosque-based education, deliver messages in various religious gatherings and also follow-up whether the community people practice hygiene in Jumma through discussion with the participating people in Jumma prayer. Since imams are respective person, so people listen to them with respect and follow their instruction. Imams took this advantages and able to motivate people easily.*

*The imams of the respective areas also divided into several parts and performed their duties. Afzal Hossain says that there are nine Imams who are his students, always respect and follow him dearly. He invited all of them to take part in the activities, who positively responded and conducted motivational activities as their teacher do at the community. As part of this activities, NGO Forum conducted Imam Orientation where Afzal Hossain was the facilitator it created a big impact among the imams. They feel encouraged to be with their teachers and work under his leadership.*

*Afzal Hossain mentions that the students of his institution were motivated with reference from Al-Quran and Hadith so that they follow the instruction of their teacher. They instructed students who do not have*



*latrine in their houses to motivate their parents for installation and did follow-up regularly to get achievement status. He sent one student to another student's house to observe the status of latrine and instructed students those who still could not install latrine for motivation of their parents.*

*"As part of follow-up activities, by the name of using latrine I visited houses on the roadside. Who still did not have latrine, they felt shy for not having latrine", Afzal Hossain points out. Then Afzal Hossain requested them for installation of latrine immediately. Then he also delivered messages on negative consequences of not using latrine. It helped increasing rapid coverage in the union.*

*Sometimes on the way, the imams had to pray in another mosque then they discussed the issues there. On the way, people generally gossip on several issues then they intentionally raised water and sanitation issues and talked about it. Afzal Hossain says, "The achievement of Union-based Total Sanitation did not occur by the efforts of an individual or specific groups but became possible through an integrated and restless efforts of all stakeholders".*

## 6.4 Promotion of Hardware Facilities

Availability and affordability of hardware services is prerequisite to translate people's awareness into practice, which is the ultimate goal of Union-based Total Sanitation. It would not be healthy for programme success if the motivated people did not get access to necessary hardware support. Considering this issue production of hardware was made an integral part of Union-based Total Sanitation programme. Without making easy access to hardware it was very difficult to reach expected result in line with the programme design. The motivational activities were the impetus to generate importance of hygienic sanitation in the mind-set of the people. The changed mind-set through motivation created demand of hardware support that ultimately guided the community people install hygienic latrine.

However, to meet the demand of the community people various initiatives including training of private masons on quality latrine production, use of DPHE's masons for establishing mobile VSC, etc were run to make the hardware facilities available at the respective community. NGO Forum in collaboration with the PNGOs and Union Parishad provided many of the private production centres with financial support to set-up the new VSCs in relation to help meeting the community demand for to hygienic latrine along side the provision and facilitation safe water supply facilities. These initiatives were facilitated to increase community people's access to hygienic latrine facilities at their door-steps. The PNGO operated VSCs also made necessary arrangements to produce latrine sets in an increased number, which also contributed in meeting the increased demand providing quality hardware support. Samaj Kallyan Sangstha (SKS), a partner NGO working in Gaibandha district has been running a VSC with the financial support of NGO Forum. This SKS run VSC produced a huge number of latrine sets, which contributed in increasing access to hardware of the people of Muktinagar union of Shaghata upazila. Alongside providing the support for meeting demand of the well-off families in the Muktinagar union support for the hard-core poor families were also provided as per plan. Russel Ahmed Liton, Executive Director of SKS mentions, "We provided about 200 sets of latrine among the identified hard-core poor households free of cost to make the coverage of Muktinagar union ensured within the deadline".

### ***Private producer – the public server***

*Hannan Mia does two duties daily. He is an Imam of the local mosque and the producer of latrines in Shahbajpur union, Sarail, Brahmanbaria. Once his sanitary latrine production centre was not part of this union. During June 2004, sanitation campaign and movement turned into a social movement in Shahbajpur union. Although there were three centres in the union, these centres were being able to meet increased demand of local people for sanitation technology. Upon request of the Chairman of Shahbajpur union, Hannan Mia moved his production centre to a place near the main road, adjacent to neighborhoods and a close proximity from the bazaar that serves as a meeting place of people. He also received NGO Forum's orientation training and technical support throughout the time of distribution and sell of latrines.*

*To Hannan Mia, the production and selling of sanitation hardware was not merely an occupational venture, rather he treated it as part and parcel of his responsibility to community people. This is why he moved from one place to the other place to assist people in the proper installation of latrines free of charge. Although it cost his valuable time and money, he considered it as an enjoyable venture, especially seeing how small individual level needs can be turned into social movement per excellence. His selling practice was flexible and empathetic to people's need. While he distributed a few latrines to extremely marginalized people for free, most latrines were sold to people on credit. He kept that special option to ensure that not a single person delays in proper sanitation installation. Being asked whether he could realize credited amount Hannan Mia answers, "Although I was little bit suspicious that some creditors may not pay arrears, all of them paid me – much earlier than the time I actually set for collection of arrears". What caused people become so prompt in the payment of arrears do timely? He responds, "This was nothing but the impact of successful motivation campaigns of the NGO Forum and Union Parishad. People now attaches additional value to their latrines, thus do not hesitate to pay arrears instantly or whenever so becomes manageable for them".*

*To his opinion, October to December 2004 were pick-days for Hannan Mia. Sometime he worked until late night just to meet people's demand in an efficient manner. His personal level capacity was limited in the production of 25 slabs in a day. The level of selling was phenomenal. He sold 80 slabs in a day on an average during those days. Other than the people of Shahbajpur union, people from other unions used to come to purchase slabs from him. However, he did not compromise with quality, because the UNICEF, GOB, Union Parishad and NGO Forum have maintained frequent monitoring, supervision and follow-up on the progress of production and quality control.*

*Now that the sanitation coverage is achieved, selling of slabs and pans sharply declined. Sometime he has to wait two days to sell just 1 set of latrine. Does this create your annoyance to the sanitation movement, because it ultimately caused drastic loss in your income? Upon this question, Hannan Mia smiled and said that yet he was happy because that was not the end of life. If required, he would change his mode of occupation. However, he believes that demand for sanitation technology would not decline, rather some other new areas of development of this technology will evolve. Local level provisions of low-cost sanitation hardware, thus, will remain forever. He asserts that he would enjoy even moving to another unions running total sanitation scheme because that will bring him the pleasure of being 'real' one in society.*

## **6.5 Follow-up & Monitoring**

At the end of the sanitation coverage moves, PNGOs and the Union Parishads go through frequent and regular follow-up and monitoring of progress of their activities. Every monitoring

and follow-up was intended to retain jubilation of the sanitation movement until Union Parishads realize total sanitation coverage.

In most unions, stakeholders conducted follow-up and monitoring of latrine installation in their respective areas. Subsequently, the challenges of sustainability were also taken care of by different stakeholders like UNO, NGO Forum, partner organizations and Union Parishad. The monitoring occurred in multi-stages by respective stakeholders throughout the process of implementation. It is to be mentioned that NGO Forum and its partner organization facilitated the most of the monitoring process. The key issues of monitoring were the latrine coverage, e.g. number of households that installed latrines and households yet could not installed. The monitoring was also conducted on whether the people are using installed latrine in hygienic manner. Some individuals added newer dimensions in monitoring and follow-up process.

### ***Monitoring becomes a tool of motivation***

*Yaqub Ali Mia, a 28-year experienced Sub-Assistant Engineer (SAE) joined in Mirzapur upazila under Tangail district in July 2004. His commitment towards his responsibility made him an integral part of the Community-led Total Sanitation programme implementation process. He mentions that the district level coordination meeting headed by Deputy Commissioner (DC) decided that two less sanitation coverage unions from each upazila, would have to bring into hundred percent coverage. The respective Upazila Nirbahi Officer (UNO) was given directive as well as responsibilities in taking necessary initiative to execute government's decision. The local NGO, Udoy came with a proposal to UNO to implement the government's decision with support from the NGO Forum. Udoy also sought government official's cooperation. "Since DHPE is responsible for working on public health issues, the operational management responsibilities came to my shoulder", says Yaqub Ali Mia. A meeting held to discuss the issues for area selection developing an action plan. The DPHE, Udoy, UNO and Union Parishad, and NGO Forum participated in that meeting and prepared an action plan. As responsible person of DPHE, Yaqub Ali Mia became involved in Community-led Total Sanitation programme implementation and monitoring in Bhatgram union and played effective role in cooperation with the other stakeholders. Yaqub Ali Mia mentions, "The Executive Engineer, DPHE, Tangail gave direction in monthly meetings of DPHE to the engineers of respective upazilas. He acknowledged our efforts and encouraged engineers to gear up sanitation coverage, such appreciation encouraged me to be more active".*

*In implementing Union-based Total Sanitation, in addition to the software activities, there was need of hardware support which was not adequately available in the union level. Then Yaqub Ali Mia sought permission to use the masons of DPHE who worked at the upazila level and used them in latrine production in several spots of the respective union. Not only latrine production, but also in baseline survey at the inception level of the programme the masons were deployed that had played an effective role in success of the programme. Nine people from Udoy and 4 people from Department of Public Health Engineering (DPHE) had worked together. Yaqub Ali Mia also worked at the field level in each of the steps including conduction of baseline survey, follow-up of the activities, monitoring of the progress, and analysis of the information to identify the challenges in the process of the implementation.*

*The field level activities started in March 2004, where they had to follow a series of activities such as identification of households having latrine, types of latrine, hygienic status of latrine, etc. The community people had been segregated into several strata to understand the challenges and needs of different segments of society, especially to address hard-core poor. This categorization process helped understanding the reasons of not installing the latrine. The categorization were done based on people*

*having financial capacity to install latrine but did not yet install, people having no financial ability to install latrine and people having no financial capability but have already installed latrine.*

*As part of the implementation, a committee was formed comprising of the people who did not have latrine in their houses to way out how the coverage can be ensured. They identified challenges in coverage as unavailability of latrine nearby and shared it to Udoy and DPHE that to bring the latrine from distanced place increase carrying cost which is not affordable to them. Then they decided and conducted a day-long mason training where 14 persons were participated. The trained masons of DPHE produced latrine in four spots of the union, DPHE personnel managed one VSC. They produced RCC Pan and also selling plastic pan to meet the demand of community people, the demand was created through motivational activities.*

*To bring into hundred percent coverage of the union alternative arrangement of hardware was made. The poorest of poor households were suggested to buy one ring and one slab of cement and additional three to four clay rings to install hygienic latrine. The experience of using clay ring was positive. It reduced the cost and speed up the coverage. Yaqub Ali Mia says, "The notion of sanitary latrine has changed as consequences of motivational activities. Now people know that latrine without water-seal is not sanitary latrine. Though many organizations promoting sanitary latrine with various options but Ring-Slab latrine is affordable and well-accepted to the community people."*

*Yaqub Ali Mia continued that the acceptability is related to affordability of any technology. When anything is not affordable to the people that cannot be acceptable to the people because they cannot afford it. To ensure acceptability that should be considered from the context of affordability. During production of the latrine in mobile Village Sanitation Centre (VSC), the cost issues were well thought because of financial capacity.*

*Alongside managing the hardware support, Yaqub Ali Mia also participated to deliver messages to the students of all educational institutions located under the union on necessity of installation and use of sanitary latrine. His active participation and regular follow-up added value to the students while the students realized negative consequences of not practicing proper sanitation in their daily life.*

*The implementing staff faced challenges to motivate a few people, because they were not interested to install latrine in their houses. Then Yaqub Ali Mia in association with Chairman and NGO representatives had to force them by utilizing power such as circulation of messages through issuing order of UNO that every body has to install hygienic latrine. The households having unhygienic latrine was given directive to damage those otherwise legal action would be taken against them. Then SAE with assistance from the Union Parishad and NGO damaged the unhygienic latrines". This event increased demand of hygienic latrine at the community that has been met", says Yaqub Ali Mia.*

*Without coordination of DPHE, NGOs, and concerned stakeholder, it would be difficult to achieve meet deadline of coverage. The visit of government official carried value to the people and they became afraid. "The support of DPHE geared up and helped smooth operation of the programme. Since sanitation coverage is the declaration of government so that DPHE as the concerned government department is obligated to take stakes in carrying out the decision. I have used my long experiences in implementation of Union-based Total Sanitation", Yaqub Ali Mia adds. As a responsible person, "As part of regular follow-up I visited schools, madrasa, and other educational institutions in Bhatgram union that has made me known to people. Most probably I am the only government official of the upazila who is well-known to people, they show me respect. It has been possible due to participation in CLTS process. I feel proud of as a*

*government official because all people accept me as friend of them, which is exceptional in the context of Bangladesh”, Yaqub Ali Mia concludes.*

In order to change conventional unhygienic sanitation practices of rural people, NGO Forum in association with its PNGOs and Union Parishads identified several participatory tools under the CLTS approach. The processes were maintained in the operational areas as part of follow-up and monitoring on the hygiene practice followingly.

- Each ward was divided into six to seven groups. Each group was comprised of 25 to 30 persons. The objective of such grouping was to ensure representation from every households and families.
- Community Action Plan (CAP) was undertaken for each group. These groups went house-to-house and door-to-door to promote sanitation awareness among people in their respective communities. Under the action plan, they also monitored sanitation installation condition and post-installation maintenance condition so that no one breaks water-sealed-pan for otherwise use other than sanitation purposes.
- Hygiene promotion followed use of a number of PRA *tools* such as-
  - Household transect
  - Gender role analysis
  - Drawing of hygiene map
  - Hygiene habit analysis
  - Health maintenance expenditure and poverty analysis
  - Hand wash exercise
  - Sanitation ladder and cost-effectiveness review

## CHAPTER - 7

### Conclusion

As a unique approach, Community-led Total Sanitation (CLTS) is conceived with the objective of total sanitation coverage by targeting unions in Bangladesh. The approach encompasses a wide spectrum of development paradigms and people-centered policy considerations. CLTS redefines as well as revitalizes notions of pro-poor strategic standpoints. While the poor are conventionally treated as helpless and the weakest actors in their financial role-playing avenues, and that institutional backwardness and poverty compounded with lack of purchasing capacity are responsible for their downtrodden status, CLTS stands in opposition to the 'blaming the victim' mind-sets. It counts people's ability from the reverse order. Instead of tracing incapability, CLTS starts with the mission of exploration of capability of people. Those who lack economic power may constitute a powerhouse of other capabilities such as leadership skill, catalytic sensibility, mobilizing expertise, and participative instinct. These capabilities also serve as ingredients of community-driven development drives.

The social development agenda of hundred percent sanitation goal extends far beyond the quantitatively expected sanitation outcome parameters. Health and hygiene development can be considered the first and foremost need for poverty eradication. Apparently, this perspective and connotation seem to be non-befitting with literal economic rationalization principles towards battling poverty. However, the fact drawn from various field level instances reassert that CLTS helps diminish economic poverty, as well as capability poverty, and habitual poverty of people. Once the poor people establish their control over health and hygiene through sanitary latrine use and proper sanitation management, they eventually get rid of diseases and ailments. Correspondingly, monetary portion that they had to spend for medication and treatment purposes before constitute a potential savings or increments added comfort in livelihood. By turn, these revenues expand in scope through small-scale investment, petty-trading, commerce, self-employment ventures and human resource development drives such as education of children of capacity building of household members.

Besides this economic dimension, CLTS results in gradual disappearance of habitual poverty of people. A large number of Bangladesh people that had been accustomed to practicing open defecation and unsanitary practices in a century-old fashion, most of them have come forward to accentuate the fruits of proper sanitation and hygiene maintenance. It is evident that besides instilling in them the notion of hygiene, CLTS also contributed to the sharpening of their community responsibility towards sustenance of positive outcomes of sustenance. All these accomplishments indicate the strength of the approach not only at the implementation level, but also extends to the greatest extent of people's self-realization for sound livelihood.

This individual level achievement soon becomes translated into totality. While community as a whole strives to ensure sanitation for all, no one falls behind. Some of the constituents that make this process unique and comprehensive are peer-pressure, influence, inspiration, healthy-competition, demonstration effect, insistence, motivation and learning from the experiences of others. Collaboration and sharing of ideas and opinions and success stories bridges the gap between people of different strata and status. All these attributes compose the participatory

nature of the CLTS approach. Participation becomes meaningful through leadership, coordination, motivation, and mobilization of people by the people for the people themselves. Frequent monitoring and follow-up strategy of the CLTS keep the process alive through activity-cycles.

One of the phenomenal achievements of the approach is bridging gap between the policy-makers and the common masses. In the CLTS process, the community people, NGOs, and regional and local level government administration become equal parts of an integrated body of thoughts and actions. Thus far, CLTS reduces conventional and artificial communication gaps between the people and administration. As Bangladesh recognizes sanitation as a human right, the paradigm of proper sanitation and hygiene designates the principles of “people-centered, community-led, gender-sensitive and demand-driven” hygiene provisions in it. This is why the approach drew international attention towards the prospect of replication as a model.

Motivation is at the heart of achieving total sanitation following the CLTS approach. Motivation has always been viewed as a difficult task for the implementation workers. However, an integration of both vision and mission can make such apparent difficulties disappear. Whereby “leadership” is at the heart of the mission, turning leadership into a workable “leadership capacity” can be achieved only through infusing forward-looking vision in them. To say from an institutional perspective, the Union Parishads hold the legitimate and democratic leadership position. However, this institutional leadership in many parts of the country had been experiencing widened gap with people, and perceived problem of accountability and acceptability. Here comes the notion of intervention and collaboration of community people as a combined force. Thus, inclusion of the community leaders such as matbars, imams, school teachers, local elites, social workers, and other influential community personalities appeared to be the driving force of motivation processes.

The gendered conditions of social and community participation, however, were not forgotten. It has resulted in giving the women members of the Union Parishads due recognition to take part in this community venture. Given conservatism, patriarchy, religious barriers and veils, women in domestic premises constitute a closed entity, where male outsiders cannot reach for motivation campaign. Since women have greater access to community women and their domestic premises, inclusion of women members in the process was an unavoidable timely need. Moreover, women’s traditional entitlement with child bearing and rearing, maintaining healthcare and nursing of ill family members influenced considering them as prime target for motivation. Women’s greater sedentary status within household boundaries in comparison to migratory nature of income-earner men makes women-focused motivation a further stronger requisite.

One might argue that in the context of total sanitation, Bangladesh is on its way to accomplish mere proper latrinization, not total sanitation. This argument receives currency for its output-centered perspective, which in a way refers the reality of yet lagged total sanitation situation. Indeed sanitation is a holistic approach that covers motivation of community people, installation of latrine in their houses and proper use of latrine in hygienic manner. Yet, the success of NGO Forum facilitated CLTS under its Union-based Total Sanitation in practice of latrinization coverage refers to the possibility of its success replication in other ventures. If viewed from the step-by-step perspective, the accomplishment can be considered as the first

stage of total sanitation. Total sanitation means people's access to hygienic latrine, pure drinking water, access to proper waste disposal system, etc. Although GO-NGOs have been engaged in a mission to secure these rights for people over decades, totality component seem not to be accomplished overnight. In view of immediate public need, first comes the need of reverting the legacy of unhygienic defecation practice of people. It is strong argument in the hygiene promotion sector in Bangladesh that once bad bygone practice changes, and people assumes the essentiality of hygienic latrine use, it become their personal stake, and that since then they capture the possessive attitude for latrines. Once their inclination to possess a sanitary latrine is turned into an unavoidable demand for it, they themselves bring the other steps forward. Therefore, support services must be rendered to them in line with their immediate needs. For those having habitual poverty and needing hygiene education—latrine use in specific—necessarily become subject to motivation, sensitization and conscientization at the outset of the programme advancement.

Although latrinization movement comes first, it essentially includes advanced hygiene education leading to total sanitation. Proper latrine use education delivered to common people is bundled with set of lessons on use of water, identification of proper source of water, water purification, water management, waste management, physical and locational environmental hygiene maintenance and basic health education. Therefore, people arriving at the level of accomplishment of hygienic latrines become prepared to leap ahead for total sanitation.

Another argument that predominates in the sanitation development sector is that the latrines or sanitary hardware would be cost-effective, environmental friendly and sensitive to indigenous technical knowledge of the people. The arguments proceed further with the theme that any research on sanitation technology innovation and use should be guided by the principle of utilization of available local natural resource base, local knowledge, skill, craftsmanship attending indigenous needs and priorities. The argument indeed is dynamic in perspective. It must be acknowledged that this argument rightly dignifies people's choice and stakes above everything else, as well as depicts moral sensitiveness to economic, regional and gendered concerns of people. Yet, this powerful argument loses its strength to some extent due to its lesser attention to 'environmental hygiene' and 'sustainable' sanitation technology issues.

In order to analyze the above-mentioned position, it is worth mentioning that several organizations operating sanitation promotion activities throughout the country are actively engaged in serving the poor people in the most cost-efficient manner. Thus, some of these organizations innovated various types of sanitation technology within the reach and affordability of the poor people. These cost effective services indeed increase the number of the users of better-covered latrines, however, their environmental hygiene is compromised to some extent. Despite these latrines are fenced, pitting, and cemented; they do not resist to an expected level the spread of excretion odors and exposure of insects and flies to excreta. Having no ring slab layers and water-sealed bowl, some latrines drain human wastes into sources of water such as canals, ponds and lands. Therefore, these latrines may reduce the propensity of spread of cholera, diarrhea and other water-borne diseases, but do not ensure complete resistance of diseases.

These latrines pose some risks to 'sustainability' of sanitation technology too. The low-cost venture often ended up in production of less-lasting latrines. Although poor people apparently



enjoy immediate benefit of low-cost latrines at installation, the real cost incurred against cheap technology may exceed the cost of possession of little more expensive but safe latrines in the long run. For instance, a low-cost latrine may remain useable for two-three months making it difficult for a poor person to afford another new latrine again. There is another risk too. Being incapable of affording a new latrine, a person may return to old-day practice of open defecation once again, or at least until being able to install another new set of latrine. It was learnt from people in some unions that ring slab latrine technology is much better technology in terms of their longevity and disease-preventive features. As they neither spread bad odors nor allow excreta and waste to mix with open water bodies, ring-slab latrine technology ensures individual and environmental hygiene safety. Moreover, the water-sealed bowl feature of these latrines resists exposure of insects and flies with human waste. Therefore, it is suggested that the NGOs implementing sanitation programmes throughout the country would build further strong collaboration to learn from their mutual sharing on research outcome on technology innovation and use.

Despite these few operational leakages of the NGOs in hardware provision, software services in the sector portrays the richness of visions and missions of the NGOs forerunning the total sanitation movement. Integration of their decade-long experiences and richness of software service provided the CLTS approach with added strength, merit and credibility—a bright prospect for replication in similar programmes inside Bangladesh and elsewhere in the world.

## REFERENCES

- Ali, M. A. & M. S. Hossain 2000. J. Halder (eds). *Propelling Participation*. Dhaka: NGO Forum.
- Ali, M. R. 2005. "Participation & Sharing: Private Development Organizations in National Sanitation Movement". *National Sanitation Movement: Sanitation for all by 2010* (In Bengali) Pp. 29-34. Dhaka: LGD.
- Ali, M. R. 2005. Sanitation for All by 2010: Strategic Options.  
[http://nation.ittefaq.com/artman/publish/printer\\_22464.shtml](http://nation.ittefaq.com/artman/publish/printer_22464.shtml)
- Dhaka Ahsania Mission 2005. "Sanitation for All by 2010: Strategic Options." (Discussion Paper for Round Table Discussion In CIRDAP, July 31, 2005). Dhaka: Dhaka Ahsania Mission.
- Halder, J. (eds) 2003. *Counting on Catalysts*. Dhaka: NGO Forum.
- Halder, J. 2004. "Awaiting the National Sanitation Strategy". *WatSan*, 8<sup>th</sup> Year 2<sup>nd</sup> Issue, October-December. Dhaka
- Halim, A. 2005 "Community Led Hundred Percent Sanitation Approach". *National Sanitation Movement: Sanitation for all by 2010* (In Bengali). Pp. 51-55. Dhaka: LGD.
- Islam, S. R. 2005. "Problems of Rural Sanitation in Bangladesh". *National Sanitation Movement: Sanitation for All by 2010* (in Bengali). Pp. 56-58. Dhaka: LGD.
- ITN-Bangladesh 2003. *Sanitation Strategies and Technologies: Flood-prone and High Table Areas of Bangladesh*. Dhaka: CWSWM, BUET.
- ITN-Bangladesh 2003. *Situation Analysis: Water Supply & Sanitation Sector Research in Bangladesh*. Dhaka: CWSWM, BUET.
- Kar, K & R. Chambers 2004. "Keynote Speeches." in M. F. Ahmed, A.J. Shamsuddin *et. al. Proceedings of South Asian Conference on Sanitation SACOSAN 2003*. Dhaka, Bangladesh, 21-23 October 2003. Pp. 44-62. Dhaka: LGD.
- Kumar, S. D. 2005. "Mass Awareness: Preconditions of Sanitation for All." Pp. 48-50, *National Sanitation Movement: Sanitation for all by 2010* (In Bengali). Dhaka: LGD.
- LGD 1998. *National Policy for Safe Water Supply and Sanitation*. Dhaka: LGD.
- LGD 2003. *National Sanitation Movement 2003: The Report of the Baseline Survey on Sanitation*. Dhaka: LGD.

- LGD 2004. "The Dhaka Declaration of Sanitation". *Proceedings of South Asian Conference on Sanitation SACOSAN 2003*. Dhaka, Bangladesh 21-23 October-2003. Pp. 257-264. Dhaka: LGD.
- LGD 2005a. *Pro Poor Strategy for Water and Sanitation Sector in Bangladesh*. Dhaka: LGD.
- LGD 2005b. *National Sanitation Movement: Sanitation for All by 2010* (in Bengali). Dhaka: LGD.
- LGD 2005c. *National Sanitation Strategy 2005*. Dhaka: LGD.
- NGO Forum 2004. *Annual Report 2004*. Dhaka: NGO Forum.
- Rahman, M. M. 2005. "Formulation of the National Sanitation Strategy". *National Sanitation Movement: Sanitation for all by 2010* (In Bengali). Pp.35-37. Dhaka: LGD.
- Rahman, M. M. 2005. "Sanitation for All by 2010: Progress until December 2004". *National Sanitation Movement: Sanitation for All by 2010* (in Bengali). Pp. 19-22. Dhaka: LGD.
- UN 2004. "UN Millennium Development Goals (MDGs)."  
<http://www.un.org/millenniumgoals/>
- Annual Report 2004-2005. 12 No. Khalilnagar Union Parishad, Khalilnagar, Tala, Satkhira.
- Annual Budget 2005-2006. 12 No. Khalilnagar Union Parishad, Khalilnagar, Tala, Satkhira.

## ABBREVIATIONS & ACRONYMS

---

ADP	:	Annual Development Programme
BMSL	:	Basic Minimum Service Level
BRDB	:	Bangladesh Rural Development Board
BUET	:	Bangladesh University of Engineering & Technology
CBO	:	Community-based Organization
CHP	:	Community Hygiene Promoter
CHW	:	Community Health Worker
CLTS	:	Community-led Total Sanitation
CWSWM	:	.....
DALYS	:	Disabilities Adjusted Life Years
DC	:	Deputy Commissioner
DPHE	:	Department of Public Health Engineering
GO	:	Government Organization
GoB	:	Government of Bangladesh
HIES	:	Household Income and Expenditure Surveys
IDEAL	:	Institute of Development Education for Advancement of Landless
IWSSD	:	International Drinking Water Supply and Sanitation Decade
LGD	:	Local Government Department
LGED	:	Local Government Engineering Department
LGI	:	Local Government Institution
MDG	:	Millennium Development Goals
MFI	:	Micro Financing Institution
NGO	:	Non-Government Organization
O&M	:	Operation & Maintenance
PNGO	:	Partner Non-government Organization
PRSP	:	Poverty Reduction Strategy Paper
RCC	:	Reinforced Cement Concrete
RMP	:	Rural Maintenance Project
SACOSAN	:	South Asian Conference on Sanitation
SAE	:	Sub-Assistant Engineer
SDI	:	Social Development Initiative
SEDA	:	Socio-economic Development Agency
SKS	:	Samaj Kallyan Sangstha
SRDS	:	Society for Research and Development Services
UN	:	United Nations
UNICEF	:	United Nations Children's Fund
UNO	:	Upazila Nirbahi Officer
VDC	:	Village Development Committee
VDP	:	Village Defense Party
VGD	:	Vulnerable Group Development
VGF	:	Vulnerable Group Feeding
VIPP	:	Visualization in Participatory Planning/Process
VSC	:	Village Sanitation Centre

WatSan : Water and Sanitation  
WSSD : World Summit on Sustainable Development

## **Dedication**

- To all concerned who have employed efforts together to promote Total Sanitation of their respective community by themselves.
- To all concerned who helped themselves to promote Total Sanitation in their respective community.
- To all concerned people who have incurred all the pains on the way to promote Total Sanitation in their respective community.