Community Led Total Sanitation (CLTS)
An Approach;
Empowering Healthy Living Habits

Documentation of CLTS Program in Rautahat/Bara
2007

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<tr>
<td>CLTS</td>
<td>Community Led Total Sanitation</td>
</tr>
<tr>
<td>VDC</td>
<td>Village Development Committee</td>
</tr>
<tr>
<td>ECCD</td>
<td>Early Childhood Care &amp; Development</td>
</tr>
<tr>
<td>ALC</td>
<td>Adult Learning Class</td>
</tr>
<tr>
<td>BLOP</td>
<td>Better Life Option Program</td>
</tr>
<tr>
<td>PRA</td>
<td>Participatory Rural Appraisal</td>
</tr>
<tr>
<td>CMS</td>
<td>Community Managed Sponsorship</td>
</tr>
<tr>
<td>CCCD</td>
<td>Child Centered Community Development</td>
</tr>
<tr>
<td>ODF</td>
<td>Open Defecation Free Village</td>
</tr>
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</table>
Acknowledgements

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Sujeet Karn
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Birgunj, Plan Nepal
**Foreword**

While traveling in rural terai areas one can hardly avoid seeing unsightly scenes, people relieving themselves from the natural calls. Human wastes are disposed of in open fields, ditches, canals, watercourses and cropland. Sadly enough, this is one of culturally accepted unsocial and unhealthy behaviors being the major factor for their ill health. This open defecation practice contaminates drinking water and food thereby giving rise to a number of water-borne diseases including cholera, typhoid, polio, hepatitis and diarrhea. It is reported that in developing countries four-fifths of all diseases are caused by water borne diseases, with diarrhoeal being the leading cause of childhood death. Globally, an estimated 4 billion cases of diarrhoeal disease occur every year, causing 3 – 4 million deaths, mostly among children. Strangely enough, there are over 1.1 billion people who do not have access to safe drinking water and likewise, 2.4 billion people are without proper sanitation facility. It is reported that the incidence of diarrhoeal disease can be reduced by 36% through the use of a clean pit latrine and disposing of children’s feces in it.

To improve hygiene and sanitation behavior among the community people that we are working with, we have been emphasizing on both awareness in an extensive way and supporting toilet construction under a limited scale since 1994 when Plan Nepal started working in Rautahat and Bara districts. Over the years, we have already supported in constructing 5,260 family toilets and installing 2,744 tube-wells accessing 19,378 families. The figures are very impressive but proved limited inspiring undertaking due to one reason or the other. On the part of the community, there was no scaling up of the program implemented successfully rather it developed dependency syndrome.

It was high time for Plan Nepal also to incorporate learning and reverse the process of development strategy that of from Plan-implemented to a process oriented community-led and community-owned system. Child Centered Community Development (CCCD) Approach was introduced across Plan World for effectiveness and uniformity. The approach encourages taking the rein of the development in their total control and letting the agents of development contribute their roles by simply being catalysts and facilitators. It emphasizes in human capacity building and recognizing local resources, the imperatives of sustainability. Within the CCCD principle and framework, to address hygiene and sanitation issue in an effective and sustainable way, Community-Let Total Sanitation was introduced in Rautahat/Bara two years ago. It is a system in which the community after having realized problem decides to become “open defecation free village” by agreeing to adopt definite norms and practices along with certain physical provisions.

With some initial jolts in CLTS initiatives and having learned some lessons, we are making encouraging progress. Two communities have already been declared as open defecation free communities and many more are preparing themselves as CLTS villages. This is an outcome of good teamwork comprising Plan partners, R/B PU, NCO and OSU (C). All concerned not only praised for undertaking the CLTS challenges seriously.
further but also capturing processes and outcomes as they happened in a progress report form nicely.

WELL DONE.

Dr. Chandra K. Sen  
Program Unit Manager  
Rautahat/Bara Program Unit  
Plan Nepal  
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1. Introduction

Safe and adequate sanitation are essential for human health, protection of the environment, and sustainable development. Moreover safe sanitation is a basic right of every citizen. Researches throughout the world have claimed that water, sanitation and hygiene are the key to human development and poverty reduction in many of its dimensions. Safe drinking water is crucial to human life; adequate sanitation and hygiene are recognized as fundamental to human well-being. Hence environmental sanitation remains as a challenging issue of human concern.

Low quality of water or inadequate levels of water together with poor environmental sanitation and unhygienic behavioral practices are instrumental in limiting people's capacity for development. Research done by Plan Pakistan in Karachi, for example indicated that people who live in areas without adequate sanitation and do not have health and hygiene education, spend six times more on medical treatment than those with sanitation facilities. A research done by Nepal Living Standard Service (NLSS, CBS 1996) shows that at the household level, households spend 27.5% of the non-food expenditure on medicines and medical services in Nepal.

Implementation of safe and adequate sanitation coverage to the poor communities has been a challenge particularly in the rural tarai of Nepal. Report shows that sanitation coverage in rural areas is less than half of that in urban areas. The majority 80% is lacking sanitation services living in rural areas. Apart from other sanitation problems, open defecation has been discussed and analyzed as one of the major sanitary problems at development worker's platform. We also assume that communities living with poverty are often unhealthy and live in an unhygienic environment in which pathogens are more likely to thrive. While assuming so we severely undermine the potentiality of individuals for change.

The purpose of this report is to record the achievements and work progress in the area of CLTS in Rautahat and Bara Program Unit. This document describes the processes and events that have been undertaken throughout the process of CLTS implementation in the community. The methodology used in the process is one of participatory community empowerment approach with action oriented hygiene behaviour change program. Various cases have been presented to reflect the work and progress in CLTS implementation in the area of safe sanitation. Participatory diagnosis done to describe the situation in the village and the tools used gave community members the opportunity to reflect on the situation, which led to the joint formulation of report presentations. Simple data collection tools were chosen. Data collections were done while facilitating the program activities in the field; visits to sites, interacting to the community people.

"We never knew what clean environment is, What problem open defecation causes? We had learned how to work as a labourer in the field whether it is raining, severing cold or burning sun heat. All we had learned is to survive."

Daroga Saha Saud, 45, of Bharwaliya, Bara, Nepal.
Since 1978 Plan Nepal is trying to intervene in health and hygiene situation in Nepal. It has been implementing programs with different approaches and has relearned what could be possible and how it could be possible to bring about safe sanitary behaviour among the people in its working areas. Community Led Total Sanitation (CLTS)\(^1\) approach with Child Centered Community Development perspective is becoming a viable solution for implementation of programs in Nepal to deal with sanitation problem and re-socialize people for safe sanitation.

Various approaches have been adopted in developing countries to assure safe sanitation with different alternatives though expanding water and sanitation coverage to the marginalized poor in developing countries along with Nepal has been a major challenge, than the developed countries, where 100% water and sanitation coverage achieved long time back.

2. A few alternative approaches for safe sanitation

Different innovative technologies and approaches have been used worldwide for the poor and marginalized ones to address the need of environmental sanitation. We could acknowledge some of them for discussion that is relevant to Nepal.

2.1 Different approached to safe sanitation

![A few Approaches to Sanitation](image)

2.1.1. Condominium Model of Community Based Urban Sanitation in Brazil \(^2\)

This model works through informal community organization perspective. People organize themselves in an urban block or squire; define their own sewer network; and connect sewer with public network. The network within the condominium block is seen as private infrastructure and its investment cost is born by the residents. The users pay sanitation fees as cost occurred in developing infrastructure beyond the condominium branch sewer up to the treatment plant of Public Network. The Water and Sewerage Company of Brasilia has been using this model for over 10 years throughout the Brazil.

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\(^1\) CLTS as an approach and its implementation ways have been discussed in detail later in this paper.

\(^2\) Details reading on Condominium model can be drawn from paper written by Robert Lenton on "Water and Sanitation for the Unserved Poor"
Community participation is an integral part of the condominium model and is viewed both as a right and as a duty of citizenship; a way of helping to find solutions for the common interest within the block. In this way the block members feel ownership of jointly owned condominium sewerage.

2.1.2. Sulabh Sanitation Movement in India

Sulabh International Social Service Organisation operates with two innovative components to improve sanitation in India. They work on to have modifications of an existing low cost technology and institutional and social programs that combine sanitation objectives with social reform. The technology is the Pour- flush system. Pour-flush units have been modified technologically to produce biogas from human excreta for electricity generation, cooking and lighting. An attendant, staffs their public toilets 24 hours a day. Free services are provided to children, poor and disadvantaged in the urban slums of India. The key to success of Sulabh in India is to have public toilet systems with bathing and laundry facilities.

2.1.3. Community Led Total Sanitation in Bangladesh

CLTS was first pioneered, tested, practiced and developed in a rural community of Mosmoil village in Rajshahi district of Bangladesh in 1999 by Dr. Kamal Car, an independent consultant working with the Village Education Resource Center in Bangladesh.

The data around the world shows the spread of approach that covers around 5000 villages around the world specially, Bangladesh, Cambodia, China, India, Indonesia, Nepal. These are the countries where CLTS is in practice and on spread. Also countries like Sri Lanka, Pakistan, Mongolia, Zambia, Uganda, Mozambique and Nigeria are looking forward to implement the programs in their countries with some improvements.

2.1.3.1. What is Community Led Total Sanitation (CLTS) all about?

Community Led Total Sanitation (CLTS) is an approach, a tactic or a process to empower and inspire rural communities to intervene in open defecation situations and involve them to stop open defecation totally.

Facilitator plays a vital role to shape the attitude and behaviour of the people regarding open defecation. The success of the program implementation depends on the skills of facilitation and mobilization of the people that largely governs the attitude and approach of the facilitator too. In this approach facilitator aims to stimulate a collective sense of disgust and shame with self-respect and critics among community members as they confront the crude facts about mass open defecation. Throughout the process community

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3 Information on Sulabh international can be found at www.sulabhinternational.org
members do visual analysis of open defecation and work towards collective action plan. Finally declare a community with total sanitation.

In reality, CLTS is not an easy approach to practice as it is talked about in the paper. It involves dedication and commitment on the part of a facilitator apart from skills and facilitation. Internalization of facts regarding open defecation by the community members is vital to react and act to practice safe defecation. It is assumed that if facilitation is mature, success is bound to take place.

3. Sanitation Policy of Nepal

Since a decade Nepal has shown growing need of sanitation coverage in its population. Efforts have capitalized to raise awareness and formulate clear practical sanitation policies. Nepal implementing programs in adopting the Millennium Development Goals (MDGs) has promised to reduce by half the proportion of people without access to safe drinking water and basic sanitation by 2015. Country has shown some progress in improving access to drinking water; but it remains plagued by extremely low level of sanitation. Reports vary in terms of data. According to the WHO/UNICEF report the population with adequate access to sanitation was only 27% in 2002 (WHO/UNICEF, 2004) where as the Government of Nepal’s clams access to safe sanitation with 39% coverage through NLSS report 2002.

The focus was most evident as documented in 8th Five Year Plan (1992-1997). This is the time when attention to budget allocation for water and sanitation was raised remarkably. Due attention was given for organizational changes to support improved and expanding sanitation implementation. In 1994, Nepal adopted the national Sanitation Policy Guidelines for Planning and Implementation of Sanitation Programs. In 1995, first ever, a functional committee called as a National and District Water Supply and Sanitation Coordination Committees were formed. The thinking and practice was further expanded in the 9th Five Year Plan (1997-2002) and continued in ongoing Tenth Five Year Plan. The Government of Nepal (GN) declared its intention to provide sanitation facilities to 7.421 million people (5.613 million from rural and 1.808 million from urban areas) by 2007. The target was set to cover more than 50% of population to have environmental sanitation (Tenth Five year Plan, Govt. of Nepal). Program implementation however have not reach to the desired expectation till 2007 due to the lack of budget allocation, management fallback, ongoing political turmoil and lack of institutional interest to see sanitation an issue of concern.

3.1. Sanitation Network

In 2004, to further enlarge the magnitude of safe sanitation coverage, an informal network of various organizations formed. The organizations were Plan Nepal, WaterAid Nepal, NEWAH, LUMANTI, the Nepal Red Cross Society, Environment and Public Health Organisation (ENPHO), Helvetas and the Gorkha Welfare Society but yet to be

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4 Details about CLTS approach could be drawn from working paper written by Kamal Kar. 2003, Subsidy or self-respect? Participatory total sanitation in Bangladesh, IDS Working Paper 184.
functional for policy advocacy to raise the sanitation coverage in rural communities of Nepal.

3.2. UNICEF's Sanitation Programs in Nepal

UNICEF Nepal’s experience is positive in implementing the School Sanitation and Hygiene Education (SSHE) program in Nepal. They have been piloting the approach called School Led Total Sanitation (SLTS); a mixture of CLTS and their school sanitation program, and have prepared a guideline for this approach. With recognition of positive experiences, Government of Nepal, Department of Water Supply and Sewerage (DWSS) in the Ministry of Physical Planning and Works, together with UNICEF, has developed a proposal to link CLTS with SSHE - through a school-community partnership. The approach is free from subsidy for hardware. However, revolving fund is set as seed money for the community people to construct latrines. The fund serves as a reward once communities achieve total sanitation. The funds later on may be used for other livelihood options. This innovative program implementation has helped change sanitation related behaviour among the people. Also there is provision of subsidy for constructing latrine to some extremely poor families to include the excluded one.

3.3. CLTS an intervention in sanitation

Community Led Total Sanitation (CLTS) as an approach in Nepal is the outcome of development thinking to incorporate sanitation as a primary indicator of community development. The concept of CLTS was excitedly borrowed in its original form from the experiences of Plan Bangladesh. In the beginning, the Staff of Plan Nepal with other network partners attended an orientation session on CLTS delivered by Kamal Kar the pioneer of CLTS, in July 2004 in Kathmandu and Hetauda. The participants of the workshop immediately carried out ignition PRA for CLTS in three Plan working villages - Nitanpur, Gamargama and Naya Behara of Chhata pipra VDC in Bara district. Since the process initiation, there are 9 communities declared totally free from open defecation, 4 in Morang/Sunsari, 1 in Banke & 2 in Bara districts. Numbers of CLTS ongoing communities in Plan working areas are increasing.

NEWAH, one of the organization implementing safe sanitation programs through CLTS approach has also successfully completed ten pilot projects in Dhading, Morang and Gorkha districts. These sites have now been declared open defecation free. WaterAid Nepal has played a key role in driving the CLTS process of NEWAH with the funding for CLTS program implementation.

Rural Reconstruction Nepal (RRN) has been piloting CLTS as well as part of its EU (ECHO) funded community water; sanitation and health (CWASH) project. Learning facilitating skills from Plan Nepal and NEWAH, RRN's field staff ignited the community for CLTS implementation in two villages of Salyan district that has proved incredibly successful. Every household in both sites has constructed a toilet, and which is being used and maintained. Field staffs have seen a dramatic improvement in sanitation and hygiene behaviours.
4. Plan Nepal; Sanitation Policy and Implementation

Plan Nepal has given due attention to water and sanitation activities since its program implementation in Nepal. In the beginning the sanitation program was mainly focused on the construction of latrines for sponsored families and local institutions. The program was mainly focused on hardware activities as per the community need. The program was heavily subsidized and was implemented in a hand out mode. There are shift-taking place in implementing the program at present. We could see the changing perspective in program implementation as follows.

4.1. High Subsidy Toilet Construction

The concept was extracted from a trickle-down approach in which direct services were provided to the poor population of target community hoping that other will follow the suit. It was target and technology driven with high subsidies provided for both toilet and tube well installation. Theoretically, it was agreed that there should be family participation and contribution to construct toilets but while implementation it was solely the work of Plan Nepal. Support provided to construct the superstructures were also from Plan Nepal. Ownership of toilets on the part of family was lacking, though there has been family participation in terms of labour and local materials. The program was mainly concentrated on the hardware activities based on the need of the community. Not much emphasis was given for software and social preparation.

4.2. Toilet Construction with Low Subsidy

2000 onwards, there was a shift in policy paradigm of helping people with infrastructure. Through the experiences it was learned that only structure does not serve the purpose as long as people are not prepared about change. Behaviour change became the focus of work. Therefore they need to provide with information and knowledge for change. Program implement with preparatory stage has to be worked out to implement the program.

In this way the understanding was to have a partnership of community in program implementation than direct service. Software part emphasized heavily with reduction in subsidy. Users were equaled as partners of change so there need to be contribution from their part. So that it could lead towards ownership of community. A six-month preparatory phase was devised to make people aware about the program; build the sense of leadership; and prepare for contribution.

Preparatory phase covered with various activities of knowledge and awareness generation such as orientation about program, training, water and sanitation user's group formation, street play, video show, sanitation related campaign, and regular follow ups among others. These activities were basically designed to strengthen people's capacity and institutionalize the change. Subsidies were provided to the families to construct the toilets. Programs were available for a person in need does not necessarily from a cluster.
The toilets constructed were in the areas haphazardly covered. In old VDCs, toilet construction with subsidy is still in amalgamation to cover the population.

4.3. Community Led Total Sanitation (CLTS); a new Approach

The concept of Community Led Total Sanitation (CLTS) came in to implement sanitation activities in new Plan working areas. In Plan Nepal, the idea of cluster coverage is the theme to implement the program. A shift from high subsidy to low subsidy is replaced by no subsidy for toilet construction. Total community participation, self-mobilization and motivation for toilet construction have been emphasized to work on environmental sanitation issues. Community people are encouraged to build toilets with indigenous resources and materials. Only facilitation and technical supports are provided for toilet construction. Support is available through cooperatives and micro finance institutions and saving credit groups to upgrade toilets after using indigenous self made toilets.

5. CLTS in Rautahat/ Bara

CLTS as an approach to safe sanitation is in progress in Bara/ Rautahat program Unit. 2 out of 10 planned clusters for CLTS has been declared as open defecation free cluster in Bara district since inception of the approach in 2004. The progress of CLTS in different clusters in Bara and Rautahat districts are presented in the table below.

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This report is prepared based on intensive field visits done during January 2006 to June 2006. Data collected through direct visits to different CLTS sites. Methods of data collection were indirect interviews, observations in the site and informal talks with the villagers. Data was supported with focus group discussions, facilitating mass meetings, participating in rallies and other activities incorporated while CLTS implementation in the area. Key players in program implementation were also interviewed informally from Plan and partner staff.
### Table 2: CLTS Progress in Rautahat/Bara

<table>
<thead>
<tr>
<th>SN</th>
<th>Cluster</th>
<th>VDC</th>
<th>Total HH</th>
<th>Remarks</th>
</tr>
</thead>
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<tr>
<td></td>
<td>I. Open Defecation Free Declared Cluster</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Gamargawa</td>
<td>Chhatapipra, Bara</td>
<td>128</td>
<td>Upgrading is ongoing</td>
</tr>
<tr>
<td>2</td>
<td>Bharwoliya</td>
<td>Bareiniya, Bara</td>
<td>117</td>
<td>Declared</td>
</tr>
<tr>
<td></td>
<td>II. Clusters under CLTS process</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Nitanpur</td>
<td>Chhatapipra, Bara</td>
<td>115</td>
<td>Reactivated</td>
</tr>
<tr>
<td>4</td>
<td>Gothgaon</td>
<td>Chhatapipra, Bara</td>
<td>19</td>
<td>Reactivated</td>
</tr>
<tr>
<td>5</td>
<td>Ekwaniya, Bhalui</td>
<td>Bhalui Bharwoliya, Bara</td>
<td>78</td>
<td>Under process</td>
</tr>
<tr>
<td>6</td>
<td>Bhalui</td>
<td>Bhalui Bharwoliya, Bara</td>
<td>116</td>
<td>Reactivated</td>
</tr>
<tr>
<td>7</td>
<td>Phulworiya, Batara</td>
<td>Bara</td>
<td>174</td>
<td>Under process</td>
</tr>
<tr>
<td>8</td>
<td>Chetnagar</td>
<td>Dumariya, Rautahat</td>
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<td>Under process</td>
</tr>
<tr>
<td>9</td>
<td>Nayabehara</td>
<td>Chhatapipra, Bara</td>
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<td>Stagnant</td>
</tr>
<tr>
<td>10</td>
<td>Uttarjhitkahiya</td>
<td>Uttarjhitkahiya, Bara</td>
<td>318</td>
<td>Under process</td>
</tr>
</tbody>
</table>

### 5.1. Community Led Total Sanitation in Chhatapipra VDC, Bara

Chhatapipra VDC is located at the western part of the Bara district, connected with Birgunj - Pathlaiya highway. Out of six major clusters in Chhatapipra VDC, Nitanpur, Gamargama, Nayabehara and Gothgaun were first selected to pilot CLTS in Bara district initiated by Plan Nepal. The VDC has total household of 919 with average family size of 6.47. The total population of the VDC is 5948. People lack lands and houses are closely constructed and grouped in clusters. Dhanuk is the major ethnicity of the VDC followed by Chaudhary, Dusad/Paswan, Teli, Rajbhar, Yadav and others. Agriculture and livestock are the major occupations of the villagers followed by services available as a labourer either on a regular or part time basis in different factories located in the VDC or adjoining VDCs. From the VDC on an average at least one person in every household works here in the factory.

Even though the VDC is linked with Birgunj - Kalaiya high way, sanitation situation of the VDC is extremely poor as other VDCs of the Bara district. There are only 24 family latrines constructed and in use in the VDC, which were also supported by Plan in previous years. Though a few families have constructed a few latrines by themselves,
however majority of these toilets are not in proper use. Majority of the people go for defecation in the open fields including roadside, bamboo bush, forests, and riverbanks.

5.1.1. Gamhargama; a successful village in CLTS

Gamhargama is one out of five cluster of Chhatapipra VDC, lie in the 10 Km North West to the district head quarter Kalaiya and one Km East from Birgunj-Pathlaiya highway (Nitanpur chowk). In this cluster, there are 135 households having population of around 870. The majority of the villagers are Native Tharus; most of them have some land for cultivation for livelihoods followed with labour work in nearby factories.

5.1.2. BLOP Adolescence; Advocates of CLTS in Gamargama

During the implementation period of the program different techniques were used. In the first step of the program, villagers themselves in presence of a group of facilitators analyzed present sanitation situation of the village through a PRA method. During the PRA practice social mapping, defecation area identification, calculation and flow of faeces were discussed. Discussions were also held with transect walk. Village people including adults, child club members, BLOP participants realized the bitter truth that they were eating faeces due to open defecation and immediately some of the villagers committed to end the open
defecation. But it was not possible before inclusion of BLOP girls.

5.1.3. Sanitation an issue for discussion in the families

BLOP girls started the campaign first in this village. The primary education about total sanitation came from learning at BLOP center. Girls learned about environmental sanitation at BLOP class. Learning of girls further transferred to families. They started sharing the learning through issues that they had covered in the class. Sanitation has therefore become an issue to discuss in the family too.

After first day's ignition, follow up visit had been arranged a day later. On the same day a short meeting was conducted with BLOP group members. Discussions were held to prepare the community for the CLTS process. Decisions held to construct latrine in the house of all BLOP group members at first. After initiation by BLOP group, pit latrine construction was started. In a quick move, within a week, 7members of the BLOP group constructed toilets. A girl from the toilet construction group says, "We dug the pit. Initially it was direct pits protected with bamboo and covered with sacs."

ECARDS formed various groups and gave training on sanitation. BLOP members, along with parents, prepared social map of the village. It was displayed in each meeting. Total household was displayed in the map and the toilet-constructed households were marked. Discussions and mass meetings were held on a regular basis.

In the second step, these BLOP girls started digging the pit on their own starting first with making bamboo mesh for constructing the toilets. They said it was just a temporary measure to make their parents aware about toilets and its need, importance and consequences. While doing this, they say they compelled their parents to think about toilets. At the beginning the compulsions also reflected as rage. Parents felt a bit irritated about the whole situation. And it was obvious because a practice from generation was being challenged.

By October 2004, 66 households had constructed toilets. In efforts of adults, villagers widened the road and open defecation in roadsides stopped remarkably. But, at the same time, some of the toilets constructed earlier at roadside got damaged.

5.1.4. Group dynamics and conflict resolution

In November 2004, supplementary meeting of BLOP group was organized and decisions were taken unanimously to use the constructed toilets properly. A group was formed to monitor the open defecation practices. Due to the time consumption of girls in the school, their zest became lessened and, parents gave less interest for toilets due to harvesting
season. Suddenly the progress in CLTS was slowed down. Traditional festivals like Deepawoli, Chhat and Gadhimai Mela further slowed down the movement of toilet construction.

To activate the people again, a mass meeting was organized by a group of girls and boys in December 2004. It was decided to form 2 groups to monitor the open defecation practice.

Some of the parents who were present in the meeting encouraged people to blow the whistle for the people practicing open defecation, by saying that if any problem comes, parents will call the village meeting and solve the problem. The monitoring group started to monitor and blow the whistle from the next day early in the morning. They kept it continued for some time.

During these efforts some of the open defecators scolded the group members; therefore they again called for mass meeting in the village. In the meeting few parents had participated. Boys and girls argued that, without active participation of parents this campaign couldn't be successful. Immediately parents were called and discussions were encouraged. Village people raised the issue of subsidy toilet construction. They commented that now roads are clean and the community people are no more practicing open defecation. Hence subsidy should be provided by Plan Nepal to construct toilets. In the meeting confusions and desires for subsidy were clarified, cleared and convinced to build toilets by the villagers themselves. In the same meeting realization about the importance of latrine raised. Villagers agreed to call an additional meeting same night to discuss with the whole villagers. After this initiation of parents movements took its momentum. They also decided to complete the toilet construction within 18th January 2005.

Again there was conflict to take the process through. Families not having BLOP participants had shown less interest to build the latrines at the beginning. The reason not constructing the latrines according to them were not having female adolescents child in the families.

During the follow up visits at different times it was sensed that the people are raising issues in the community. They started talking in terms of immediate benefits of toilet construction. Their fingers were on to point some or other gain that they could have in terms of program implementation. The questions remained of

- Toilets are only for adolescent girls
- What has been done by Plan in this village, so that, I should go to meeting?
- Give money to construct toilets
- My daughter is not in BLOP group to construct toilets
- My photo is not taken by Plan
- We are not sponsored families
- There is a river near by village for defecation, why should build latrine
Plan shows photos of constructed latrines to foreigners and collects money but they do not give for village development.

To minimize the confusion, facilitator along with the active BLOP participants gave strong messages on the benefits of having pit latrines and need of achieving total sanitation in the village. In addition facilitator called for a mass meeting, clarified Plan's program and its implementation guidelines maintaining transparency.

Suryakala Chaudhari, a BLOP student says "at the beginning family member gave little attention about these issues. Therefore they had to think of a strategy to let the campaign happen. At the beginning only two toilets were dug by children themselves. Then slowly campaign spread to another 50 households, covered the members of BLOP group."

5.1.5. Pressure group at work

To grab the attention of the villager and leaders of the community BLOP girls along with child club members organized a cleaning campaign. These girls' took local indigenous instruments like, kodalo (spades), hansiya (cyeths), kharaha (brooms) and cleaned the patch of road covered with faeces always used for open defecation.

First a toilet user groups committee formed at the beginning. Villagers started making pits and it happened in all households in the village. By April 2005, there were 45 toilets constructed. In the regular mass meetings commitments increased than earlier promises to construct toilets. BLOP Girls group continued door-to-door campaign for toilet construction. Girls of BLOP organized rally to stop open defecation in the village.

Shree Digo Bal Samuha members were also assigned to monitor the defecation process. In the process 4 groups were made to take care of activities so that they could control and monitor the behavior of open defecation of the people. Even they had managed a notice board that was placed at the center of the village. They use to write name of the person who had defecated in a particular day. At the beginning it was a sense of rage and despair converted into shame and embarrassment. If again they were not following the instruction a yellow flag would be kept in front of the house. It was further continuation of shame and indignity. Indirectly we could see child empowerment taking place with start from monitoring people who go for open defecation.

5.1.6. Habits in alteration

Habit of open defecation is now slowly changing. People of this village are socializing themselves to use toilets. They say relearning something is really tough at the beginning. Rupan Bachar 52 says “at the beginning it was irritating and stressful to sit in toilet to defecate. It took me almost two weeks to be familiar to use a toilet. Now, it has become a habit. He adds now to defecate in open field is shameful. Proudly he says he has now three toilets for consecutive use; one for elders one for ladies and one at farm house shed (Goath)."
BLOP girls, the advocate of toilets use in this village, recall the days they had struggled to lead the campaign to progress. They say “what all we did not do to make the village clean and finally have achieved total sanitation. We discussed all issues in the group. Finalized Punishment was finalized for those who disobey the rule. In the process, we use to make people feel shameful if we see any one using open place for defecation within village boundary; to make them feel humiliated and pressurize on such defaulters we used all sorts of detergents like ringing bells; blow horns; putting flags in front of the house practicing open defecation. We sometime had bitter arguments too.”

Sumita Chaudhary, a 10th standared student, also president of adolescence saving & credit group and former member of Sangani Ekata Kishori Samuha says “now, once in a month usually one Saturdays we clean our village. On the same day at least one member from each family get together to participate in the cleaning campaign in the village and for nurturing the planted trees.”

Dhanahi Bachar, 45 secretary calls back his fight for CLTS he says "at the beginning there were land problems to a few households and also dead set against having toilets near by home, now they are happy to use toilets.”

Kesab Bachar, president of the Yuba Samudai Khane Pani Samuha says conceitedly “now we are constructing 'pakka' toilets. The sense of community feeling and ownership is very strong and villagers are contributing 500 each to build 'pakka' toilets. Some of them have also taken loan from Nirdhan bank a micro finance institution gives loan for livelihood support.”

5.1.7. BLOP and livelihood integration

Surya kala Chaudhari, a tenth grade, married but 'gauna'6 is yet to take place, says collectively, "after 9months BLOP education, it was a big challenge for us to continue with learning and collective strength that's why we thought of forming a saving & credit group. Proudly she says “we sit in a group in an interval of 15 days every time we save rupees 10 each. At present we have already collected Rs.25000 in our group.” She adds “we lend money to the needy ones with minimal interest. She clarifies, for medicine related lending we charge only Rs. 2, others Rs. 3 and to person from outside we charge Rs. 5 per 100 per month. Earlier members of the group used to borrow money from moneylenders, now they have saving of their own."

These enthusiastic girls say they are active in regular home visits for the campaigning for school enrollment of all children. They are anxious how they could bring participation of boys to put further momentum to the work that should be the concern for all. Upgrading

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6 Gauna is a tradition in Tarai Nepal that takes place after marriage. Till 2 to 3 years of marriage girls stay with parents at parents place. After gauna only she is allowed to go to her husbands place. This is called as mini marriage that still prevalent among low case groups. In central Tarai of Nepal child marriage is rampant. Girls and boys get married at early age of 14 to 15 years. It also serves as a means of social control, growth and maturity in girls.
of latrine is underway through an ongoing ring pit with separate latrine) by receiving the loan from Nirdhan. Now they have Toilets - 85 dug pit/ others constructed one.

Chairperson, Bansi Mahto 45, says "once we got united, we were able to install 17 tube-wells with hand pump supported by Plan Nepal. We pressurized Village Development Committee to construct graveled road. Each family has contributed Rs. 5 each and also provided labour for road construction. Trees have been planted on both sides of the road. Rupan Bachad a member of user's committee says "We planted 850 trees. We are happy that we could save 650 trees that are growing fast."

Villagers are happy. Children of this village go to the school regularly. Motivation of family members as well as children is high. Children coming from poor families are being supported with scholarships to continue the education. School got repaired. Furniture was supported to the school. Early Childhood Care Development center runs regularly. Birth registration of all the children has been done to protect the rights of the child. Some 65 households of the villagers have also installed Sudhariye Ko Chulo (improved cooking stove). Also a check dam was constructed for irrigation purposes to promote agricultural activities in the village. Adult Learning Classes, supported by district education office are conducted to raise the literacy rate of the villagers.

ECARDS Nepal is working on improve village drainage while putting pipelines. Notice boards and bill boards have been put up at different places reflecting village information and growth. Marginalized and excluded in the village are included for livelihood options. Leasehold land farming is a new approach to help the marginalized for livelihood support in groups. They seem happy and look for Plan staff for more facilitation even after completion of program. Now follow up is in the progress. In one and half years, these villagers have experienced changes in terms of sanitation, organization and development. This is the village where mobilization of development resources was at optimum. They give all credit to Plan and NGO staff. In fact, development is taking shape. Villagers are successful people have organized themselves. In this village CLTS served as an entry point for development integration.

5.2. Constituent of Nitanpur

Nitanpur is one of the five clusters of Chhatrapipra VDC located 9 km North West of the district head quarter Kalaiya municipality and 0.5 km east from Birgunj-Pathlaiya highway (Nitanpur Chowk). There are 115 households in this village with a total of 840 inhabitants. Out of the total households, different ethnic groups are 41 Hajara, 29 Sah, 15 Raut, 7 Baitha and remaining are Sahani, Mahato, Ram and Thakur, Giri 2 and Lohar, Yadav, Paswan, Jaiswal and Raghubansi. The major occupation, the villagers rely on is traditional agriculture and livestock rearing. Thank to up coming factories nearby that have created avenues for employment for skilled and unskilled labour.

There is a sub health post and a primary school along with an ECCD center run with Plan support. There are 25 tube-wells for drinking water supply. The only one dug well of the village is not being used now. There are 16 family latrines in the village; out of that 4
toilets were constructed last year with the support of Plan. The remaining was constructed by the community people themselves. However, not all the latrines in the village are in proper use? People are practicing open defecation in roadside, nearby riverbank and cultivated land.

5.2.1. Nitanpur, first village selected for CLTS

The evolution of the process of CLTS in Nepal started with two days orientation and field level workshop held at Hetauda in July 2004 in the facilitation of Dr. Kamal Kar. In the joint leadership of Plan & Water Aid Nepal, 40 Participants from different organizations had participated in the workshop. The workshop further led to the field visits to pilot the concept in Nepal. Ignition PRA was carried out in three villages Nitanpur, Gamargama and Nayabehara of Chhatapipra VDC of Bara district to instigate the CLTS in Nepal. Nitanpur happens to be the first Nepali village where Dr. Kar initiated the process for CLTS.

The participants of CLTS workshop ignited concept of CLTS in the village during the field visit in July 2004 with community people. During the implementation period, different PRA tools were used for launching CLTS. In the first step, village people themselves in presence of a group of facilitators analyzed current sanitation situation of the village. During the PRA practice social mapping, defecation area identification, calculation of faeces defecated by the total population of the villager per day/week/month/year was calculated and their flow was presented and discussed. Discussion was further ignited by transect walk. Village people realized the bitter truth that they are eating faeces due to open defecation and immediately some of the villagers committed to end open defecation by constructing pit latrine. They were stanch to hold a meeting and discuss about demerits of open defecation with all villagers.

After ignition of CLTS approach, follow up visit has made on the 2nd day. Village people had organized a meeting for toilet construction on the same day. Child club members participated in the meeting.

A local, Shiv Pujan Sah initiated and prepared a pit for toilet in presence of village people. Continuous meeting held to scale up the process fast. Meetings had emphasized on preparing of social map, collecting household's lists, and to form pressure group to lead the campaign to success. Pressure group of child club
A group of young boys continued with the door-to-door campaign for toilet construction. Child club members further organized rallies to stop open defecation.

Separate meetings were held to motivate all the members to construct toilets. Landless families were identified and different dates were fixed to construct toilets. Families having land to construct toilets agreed to construct first, followed with landless one. Villagers also organized further mass meetings for preparing rules for stopping open defecation. At times members of the child club also became active for the cause.

A total of 19 new pit latrines were constructed after ignition in the village. But all new constructed toilets were not in use during last field visit. In this cluster, impetus was well set (20 pit latrine were constructed within a month) initially but after initial ignition adults lost their interest and distracted and did not give time for meetings and related works. Community people started to postpone the commitment dates with their religious, cultural binding, harvesting season, and other religious festivals etc. Pressure group formed at the initial phase also dispersed in their personal works.

5.2.2. Why yet CLTS is not happening in Nitanpur?

While doing continuous follow up it was understood that people lost interest because they did not get any subsidy for toilet construction. Villagers had confusion that people got money in other VDCs for toilet construction. A villager said 'Your staff from country office had told us last time, If you would finish constructing toilets, we would provide incentives of Rs.1000 for some other program" You have money for it, but not giving to us. In fact it was the prize that was set for individual those who will have first and best will get prize of Rs. 1000 and community people found confused with as subsidy.

Chotelal Baitha, a resident of the village, complains. He says proudly "we construct dug pit, you guys don't turn up. When it has vanished you have come."

He is right. He had never learned to use toilet. It is a new experience, an experience not very relaxing for him as he feels when defecating openly. He thinks toilets are to be made to show visitors from Plan so that he will have his share in development activities to support his livelihoods. There are cases of landlessness to construct toilets. We could see some of the households having direct pit latrines just in front of main gate. Family members proudly open the covered toilet to show Plan staff.

It is not only him in this village; there are many others who have same understanding. 38-year-old Chandra Mila Devi Shah was happy to show us her covered toilet. She persistently says, "You come & see our toilet but do not provide us with any incentive. You earn out of our photos. Even you don't include our children as Plan Child. In this rural village of Bara, People have learned that if a child is sponsored by plan they will get appropriate benefits.
Kalpatya Devi Paswan, another resident speaks out her helplessness in a focus group discussion with women group. She says, "We don't have land to construct toilet. Two dhur(100s.q.f) of land is not enough for house itself. How can we construct toilet?

These are the few snap shots that may reflect why CLTS in Nitanpur village could not progress. Though, again community people have restarted constructing toilets due to demonstrative effect that they had while visiting to near by village where Open Defecation Free (ODF) was achieved and maintained.

5.3. Naya Behara; why CLTS did not work?

Facilitators say "we could not succeed in Naya Behara in terms of CLTS implementation". This is also one of the first few clusters where first Bara PU started working on CLTS. This is a cluster of 147 households. The CLTS process had been utilized to extract the success but somehow not able to mobilize community for change. The understanding had been that people are not ready to change. Therefore they are not cooperative. People got to learn about the fact.

During the implementation period of the program different tools of CLTS has been adopted. They committed to close the open defecation in the village but never kept with their promises. Mr. Barat Thulung says, "We have learned a lot from Naya Behara. It was the attitude people had towards development projects in these clusters. The past experience of the villagers and lack of transparency in program implementation might have blocked their receptiveness towards CLTS. Plan Nepal tried all possible ways to motivate people in this cluster but went in vain. "

We failed in Nayabehara but learning has been applied in other locations and success is coming through. Of course facilitation could be the one aspect that controls the success of the program.

5.4. Goathgaon; mobilizating again for CLTS

This is a small cluster of Chhatpipra VDC In this cluster there are only 19 households. In initial phase of the CLTS, there were no toilets in this village. With the facilitation, 17 out of 19 households have constructed toilets, but did not make the proper use of it. These are no more there. People did not use them because they did not feel comfortable using toilets for defecation. In this little village facilitation largely failed to behaviour change. Process again restarted in this village. People are constructing toilets again. This time it seems they have understood the importance of toilets and internalized the fact to practice.
If one enters Bharwaliya village, finds a hoarding board speaking messages "Sarsafai ke nara ba bahar disa pisab karewala ke dand kada ba" (Total sanitation and clean environment is the slogan for the village, People defecating openly will have to bear hard punishment)

6. Bharwoliya; sustaining towards safe sanitation

It was 15th of June 2006, the village declared as open defecation free village. For sponsorship Plan Nepal's work in this VDC had started with situation assessment (PRA) that took place in early 2003.

This is a cluster of 117 households with an average 7 members per family. People here are mainly Chamar, Dusadha, Dhanukha, Teli and Giri; all belongs to so-called low caste groups with low economic income. People are mainly dependent on agriculture or their traditional work that followed from generations. Despite the fact that the village is only 7km from Birgunj the financial hub of Nepal, people of this village had secluded themselves from modernization. They were restricted themselves with traditions and cultures long ago cultivated and handed down by their ancestors. It was Plan Nepal which motivated them to think ahead through changes.

Panna lal Sah president of CLTS movement in Bharwoliya feels proud being the part of the change that is taking place in his village. He talks about the success story of CLTS sustaining in his village.

6.1. Enter into community

The process for CLTS starts with a mass meeting that was held to discuss about the sanitation and cleanliness issues, an entry point of Plan Nepal in the village. Of course before mass meeting several visits were made to build rapport with community people. Community Managed Sponsorships (CMS) and Child Centered Community Development (CCCD) trainings were availed to the community people to build relationships for almost six months. After initial relationship building, CLTS process integrated. It took almost one year of continuous work before the village was declared as an open defecation free village.

6.2. Gaining community trust

Continuous visits and facilitations led to realize trustworthiness for work in the community. With several regular visits and interaction with people in the community, the villagers developed trust to open up with the immediate problem to work on. It was realized that river induced flood and related disaster has always created havoc for the community people. People argued, "If our village remains then only we will be able to work here". People were diffident to work and solve other than flood disaster. It is Bangri
River that passes near by the village, always creates problem during rainy season for the villagers. Therefore the first intervention villagers wanted were to construct check dam to protect village from water-induced disaster. It was therefore decided to use Plan disaster fund to work on check dam. Further networking established with Parwanipur Nahar Bikash Yojana/ Jala Utapanna Prakop Department/ and District Development Committee to protect village from river induced soil cutting. First user groups were registered to work on river-induced problem and constructed canal over the river. A long 100-meter long check dam was constructed in a joint effort.

With that initiation people started trusting and relying on the work initiated by Plan Nepal. The success people have experienced in protecting their village from flood led them to establish trust and build relationships. The way for CLTS finally started in Bharwoliya cluster. Trust built up and relationships established for work. Thus the process for CLTS started.

6.3. CLTS Process

In the beginning, a mass meeting was held with the community people. Plan and its partner in water and environmental sanitation ECARDS Nepal started working on CLTS in this cluster. The issue of environmental sanitation was discussed. Ignition process started. Steps were followed to ignite community people on open defecation issues. Identification of human excreta in the village was completed, calculated, interlinked with human food intake and health hazards. Transact walk was conducted further to make people feel ashamed, humiliated and disgusted to smell and see their own defecated faeces. Various groups were formed according to the 'tole'. They were provided with training on sanitation to raise awareness.
Figure 10: Flow diagram of community realization and action towards a totally sanitized village in Rautahat/Bar

To begin with a 9 member’s user group was formed. Exposure visit to Dumre, Morang for CLTS observation was arranged for the group members. 50 years old Dharma Dev Shah says, "Visit to Morang was an energizer and motivating event to see visually and think that toilet construction is possible. People can relearn to defecate than socialized earlier."

At the beginning, user’s group members decided to have toilets in their own households. They used indigenous methods and local materials to make pit made of bamboo batten ring mesh with thatched grass roofing. Tasks were assigned to the group members so as to collect the resources and to monitor the progress.

A meeting was organized for the involvement of influential persons to take lead for the movement to take shape. Dates were fixed for:
With this initiation user group members were able to pressurize others to think of making toilets. Their initiation became an example for the rest of the villagers. Other villagers could see it is possible to make toilets even without any support and with use of local resources. But still many were feeling reluctant to make a toilet and use it properly. The questions were how they will be able to sit for toilet in the same house where they live? Whether the pit will stink and be a problem to stay in the house? They were further concerned how they will relearn the habits to sit for defecation in a close set of room when they have learned to defecate in open field with fresh air. These were the questions that puzzled them more than to build a toilet.

Rendering to the slow process, people started coming up with problems of land to make toilets. There were villagers those who did not have enough land to have a house how they could be able to make toilets? This was a concern for villagers. Finally some of them found their own land and a few had assigned place to make toilets at the assigned place by the villagers unanimously. People raised problem of grass and bamboo for those who did not had it. But with support from the villagers those who did not had bamboo and grass availed from those who had. But they were told first to dig the pit then they will be supported with other materials needed for the toilets. Gopal Shah, who only has 4 ‘dhur’7 of land, is real poor in the village. He was in a problem while in a process of constructing toilet. At the beginning he was very resistant to build toilet. Angrily reacted "If you provide land to make toilet I will build toilet for defecation if not I will defecate openly." At the end villagers provided him with land to construct toilet.

Finally people agreed to construct toilets. People felt enthusiastic to share common interest to construct toilets. Within a few weeks varieties of bamboo nets were architected. Direct pits were dug. People used local grass to prepare roof with different styles. By and large, toilets were constructed. Now, it was a huge challenge how and whether people will use the toilets constructed eventually. Experiences of Plan's staff were tough. We had experienced in the past for constructing toilets but not put to use. Different methods were employed to let people feel that they should use latrine for defecation.

Relearning new habits to sit in a structured space for defecation was a big task. Child club members, BLOP adolescences members were came in front to monitor the process. Rules were set to punish, if somebody defy defecating in toilets. Village boundary was set to let the area be faeces free. Women's group was mobilized to pressurize the men defecating openly while standing in male defecating areas. Whistles were blown up if

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7 One Dhur refers to 16.5 meter
somebody found defecating openly. People's behaviour changed completely. At the end the villagers declared Bharwaoliya open defecation free village.

6.4. Community organization and conflict resolution

Villagers say we all got involved, mutually united, worked collectively; we supported each other the outcome is open defecation free village, a way towards progress. In the beginning it was a mystery nobody knew what is going on, all of us were confused. One of the villagers says “even we even played game of rat and mouse in the process of safe sanitation exercise in the village.” They recall back the memories of sub-group formation and conflict situations in the village during CLTS implementation. Situations got tensed with the incident when it was likely to fight take place between a villager and pressure group members. It was an incident of whistling while a villager defecating in the usual open place. The counter attack took place due to that incident. But it was clever leaders who intervened and managed the situation while discussing the issue in the mass meeting.

In another case Brahm Dev Prasad Saha had a conflict with CLTS user group committee. 85 years old Shah is a 'sadhu' (Religious priest), he had grown up defecating in open field. The movement for sanitation and construction of toilets in the village compelled him to literally leave the village because he was not able to defecate in open field and had heavy pressure from the villagers not to go out for defecation. He laughs shamefully and says, "Defecating in the toilets is wise. Lastly I have learned to practice it. Now he has again returned back to the village."

Jang B. Baitha, 28, says proudly "now even relatives hesitate to visit our home because they say oh no! Get lost! If we go to your place, I will have to go to toilet for defecation that I am not used to. They make fun saying that you defecate in the house. Now neighboring villagers are interested to have a look of our toilets and try to practice the same in their houses."

Even people like Hiralal Saha also have a toilet. He manages to construct toilet only in 2 'dhur' of land.
6.5. Bharwoliya; fully open defecation free village

People say it was Plan Nepal through which we came to know about environmental sanitation and its importance for health and hygiene promotion and poverty reduction. They say it happened though training that Plan Nepal provided to the people. People's awareness on health and hygiene were raised. Now a visitor from outside could not find open defecation in the village boundary. They have seen the control of water related diseases in their village. They say this year they did not have any cases of Diarrhea. Even other health problems occurred due to unsafe sanitation and lack of clean environment is minimal. People have felt that their expenses on health related problems except some major health problem has been drastically controlled.

Now people of this village are thinking of working on livelihood issues. They are united in groups and pressurizing Plan Nepal to get other livelihoods opportunities for them.

Ram Dhari Ram, a villager says "we have lots of benefits, if we have charpi (toilets). It helps to have clean and safe environment. Ladies are having more privacy while defecation. Communicable diseases especially diarrhea is largely minimized. He further says if there were no toilets you would not be able to sit here. I have toilet at home as well as at my farm house (goatha)"

There is integration with livelihood schemes as well as improvement in education and sanitation. Earlier in this village there were only 4 tube-wells supported by Red Cross Society. There are 16 tube wells installed with technical support from Plan and facilitated by ECARDS Nepal. They seem happy, as they are in group and getting livelihood support. At present the community has ECCD center for early childhood development, regular ALC classes for adult literacy and learning and BLOP class for adolescents. A few marginalized families have been selected for income generating programs.

People of Bharwoliya have vision with future plans for their village. Road construction, livelihood activities such as piggery/poultry/lease land vegetable farming/ goat rearing etc; tree plantation along the roads; public toilets for marriage and other guests for the
villagers to work on. Community group have united thinking of development. In reality community organization & development is taking place in this village.

Daroga Saha Gaud, 45, of Bharwoliya, Bara, repeatedly, says "Its Plan through which first time we come to know about the importance of clean and green environment. We learned to defecate in toilets made by ourselves. We are planning to plant trees at side ways of the village road to keep village environment clean and green." He adds "it is not that very easily we did it. To involve every household in the construction of their own toilets was a struggle for transformation towards development and further a break through from tradition to generation.

7. Bhaluhi; lessons to learn

Om Sanker Patel a member of Child Club says, "Only 7 households are having toilets out of 116 households, of that only a few are used by young ladies of rich and prestigious families."

It is one of the clusters where Plan’s Country Director then Mrs. Mintee Pandey visited while ignition process. It was her enthusiastic compulsion that allowed Plan staff as well as community to think of CLTS taking place in the village as a growth towards development. Thinking of implementing CLTS in the community took its momentum then after.

Several transect walks were made to discuss the situation of open defecation. 'Sarsafai Samiti' (sanitation committee) was formed to initiate sanitation campaign in the village. Street-drama, mass meeting, discussions took place in the initial stage. To let the process put in impetus a village CLTS facilitator was employed to take care of CLTS activities in the village.

Village is situated at the bend of Bangari River, just a kilometer from Kalaiya-Birgunj road and 6 kilometer from Birgunj. As river is near by and water is available in the river, riverside happens to be the best place for the villagers for defecation. Participants of the meeting say, "People were aware about the toilets even at the beginning of the process and they made toilets from indigenous resources. They prepared bamboo nets and made dug pits all vanished due to floods in rainy season. People did not have much motivation for toilets there after. People say it was not successful here because they got wrong message, as Plan will support with subsidy to construct toilets.

Ram Ikbal a member of a toilet user’s group says that around 20 temporary toilets were constructed but due to rain all collapsed and filled with water. Earlier, villagers also collected Rs. 200 each to construct 'pakka'
toilets by themselves but due to problem and conflict in the group, things did not work out. Here, it was Bal Club initiated CLTS process first. Mass meeting were held, trainings were provided on health and hygiene and how to make dug pits but users feel that they did not have enough technical knowledge.

They have also gone for exposure visit to nearby open defecation free village. They had also visited Morang Program Unit where CLTS has been successful in larger community coverage. Different level of discussions took place including women, child, youth, marginalized and others.

7.1. Why CLTS is not taking momentum in this village?

The understanding is that people were not prepared for the change or they were not ready for change. Also they did not have awareness on CLTS and initial capacity building for the purpose therefore they showed less interest.

In fact in a meeting it was come out that there was group dynamism into play. The problem of group dynamics and inappropriate facilitation came as major fall back that caused further dissatisfaction among the members in the village. Rather than getting united, people of the group got dispersed and diluted in several sub groups.

7.2. How once collective group dispersed?

Deepak Das, a member of user’s committee says, “The very day when we returned from Bareiniya visit, CLTS stopped in our village. It was the problem of money distribution for lunch and feeling bad of not getting equal distribution.” Politics and group dynamics played in the village of which facilitators were unaware of.

Gokul Shah, previous 'mukhiya' and president of Bal Bikash Samuha a community-based organization says, "its conflict and group dynamics that stopped the process”. He blames "People have used Plan as to earn money than to work for people in the village. The problem of transparency remains there." He firmly puts his idea to be out in the group as well. Though he says he will support the movement from outside.

In the same mass meeting the issues of discomfort were discussed. There are grievances of the people that dug pit are not durable therefore they are not interested in constructing toilets. If rings for pit are available every body will be happy to construct the toilet.

Plan staff facilitated the process and made people aware about the facts. Conflicting issues were discussed and clarified in front of community people. Villagers again agreed to sit for next meeting and discuss and prepare the plan of action for CLTS implementation.

8. CLTS progress in Fulbariya

The concept of CLTS has come lately to the villagers in this village. It was already 5months when they first talked about CLTS in February 2006. The process was different
here. Being a new VDC, PRA was done and based on PRA data analysis; it was finalized that this cluster could be taken for CLTS implementation.

This is a cluster of total 174 households with an average household size of 7/8 member in each family. People here are largely dependent on vegetable farming except a few migrations to India and nearby towns. The population mainly comes from caste groups such as Yadavas, Dhanuka, Shaha, Pasawan, Dhobi, Chamar, and Muslim.

The process for CLTS started first with mass meeting held to discuss about health and environmental sanitation. From the same meeting 30 people were selected for sanitation related training and they were provided with knowledge on health and sanitation. Based on the interest these 30 people agreed to construct toilets first and slowly encourage community people for toilet construction. This was the group that primary started talking about open defecation in the community. The group members did social mapping to discuss the site and volume of open defecation in the community and agreed to construct pit in the beginning. That’s how ignition for CLTS started in the village.

8.1. Why no progress in CLTS - a glimpse from a Mass Meeting

To put momentum to the process of CLTS, Plan staff along with ECARDS called a meeting with the villagers to discuss the developments in CLTS progress in the village. Around 25 villagers including women, user’s group members and persons, who got training on health and sanitation, gathered in a mango orchard to discuss the issue. Throughout the meeting it was observed that the understanding about healthy environment and proper sanitary disposal was there but there was no community catalyst or community leader to lead the process.

A user’s group of 30 members from different ‘tole’ and caste groups was formed. They got training on health and hygiene but were very helpless to motivate people for CLTS. A few advisory committee members of child club led the process. There is no formal leader from the community to take the initiative through. Also, formation of pressure group was lacking. Villagers also had exposure visits to near by village where open defecation is not seen, but they could not be able to replicate the learning in their village.

A female member from user’s group says “she can't dig the pit by her self and men hardly cooperate. There are already 15 toilets constructed by rich villagers but again ladies only use them.

Sometime fear to succeed in new innovation also controls people to start. Villagers say bamboo made net and pit neither is very durable nor possible. They were frightened that it might stink later on. In fact, habit for defecation was the issue for reluctance to make toilets.

In every meeting, it was discussed that next meeting would take place at same night and villagers together would discuss the issue of sanitation. They will also discuss how they
should go about it in the future. In practice, villagers need continuous facilitation for CLTS in Fulbariya.

9. Uttar-jhitkahiya; on move for CLTS - a story towards success

It was Saturday May 20, 2006; we were on the move to Uttarjhitkahiya some five kilometers north from Kalaiya. It was nothing then enthusiasm of community people waked us up to their village. It was a home-to-home campaign day for CLTS program implemented by Plan Nepal Bara/Rautahat Program Unit.

In the summer, even mornings are humid and suffocating in central Tarai. The very morning was also not pleasing at all. It was pretty hot at around 9am, struggling to bear sunny hot day but gusto to be the part of the movement that community is leading by themselves. We were delighted to see villagers carrying a banner informing about having environmental sanitation campaign in their village. The message on the banner goes like “environmental sanitation awareness campaign”. It was amazing to learn about the involvement of people in environmental sanitation activities.

The village with total 236 households with an average of 7 members in each family comprises of various caste groups are largely dependent on traditional agriculture. By and large people seem busy and occupied in their fields usually to work for their livelihoods. In this community, Plan has already finished first phase of community work as road construction; construction of sewage system; biogas installments and toilet constructions for marginalized but has largely failed to convert these into practices.

A village with rampant practice of open defecation by all; environmental sanitation happened to be a dream for development workers earlier. Toilets were constructed with subsidy but used as store rooms for goat, grains and other agro-products than to store faeces. Only a few with rich financial resources had toilets for defecation, limited to female members of the family. In the tarai it has been observed that toilets are for the rich people to protect privacy of their women. At times it is also a symbol of prosperity and civilization. In some cases, learning comes from family member’s mobility to outside world and compulsion to use toilets for defecation and therefore learned behaviour change.

In these socio-cultural setting, environmental sanitation is a challenge. Plan Nepal is risking this challenge in its various working areas. Facilitators were elated to see the progress taking place in Uttarjhitkahiya. We were pleased of moving towards success, looking at community members with banner and slogans.

A few Mukhiyas (the leaders of the community groups) and user’s committee members were leading the show this time. They were visiting door to door with banner and instructing their fellow villagers to construct toilets as soon as possible. They were also dialogued with the family members for their commitment and deadlines. They were also convincing the household heads to construct the toilet and also informing them that if they have been seen defecating near by roadsides they will be punished Nepali Rs. 501.
Of course, they were not going to act as they said but their motive was largely for creating pressure to households for constructing toilets. While walking through the village with Mukhiyas, we could see people busy in either digging pits, or making bamboo nets; while others were working on toilets. This time it is all with self-motivation.

CLTS as an approach to total sanitation seems working in this village. The process started with mass meeting, converted to group formation for problem analysis and collective action for stopping open defecation. Different activities incorporated such as transect walk to discuss and calculate the faeces; training on environmental sanitation; exposure visits to near by ODF village; training on use of indigenous technology. This has played a vital role for self-motivation of people to have total sanitation in their village.

Nanpari Devi Ram, a member of toilet user’s committee claims, "This time we have support of all villagers. We are going to announce our village as ODF village." Similarly Lalita Baskota, Development Coordinator of the area, working since last five years is happy to see change coming through in the attitude and behaviour of the people.

However Sib Nath Patel a community leader is caucus says the habit that we have learned from childhood takes time to re learn it. We are trying our best and we are near to success.

Hey says this time we are hopeful that CLTS could be a new entry point to lead the community people towards progress.

10. CLTS ignition in Chetnagar, Rautahat

CLTS in Chetnagar is in-infancy stage, started only during late 2006. The concept of CLTS is thriving among community members in this village. This is a new VDC taken by Plan Nepal for community development activities. Chamar a dalit group and Chaudhary, Tharus a Janjati group, cover the major population of total 236 households. Participatory Rural Appraisal is done of this VDC earlier.

The process involved was the same as one used elsewhere. To initiate CLTS process, people got together to see the site of defecation. This was done in two groups; one of male and other of female. Social map was prepared with Identification of school, houses, and other sites of importance as well as defecation sites.

Discussions enforced with questions like where people go to defecate at normal times. In case of emergency, where people go to defecate? Discussion guided towards letting people feel disgusting and ashamed about open defecation practice. Questions raised

Siba Hari Adhikari, a community facilitator for CLTS in the community is occupied thinking of various strategies and activities to let the community continuum nurture the success.
were how each one of the villagers eats human excreta. The volume of human excreta generated was also calculated. It was shown that only 'Ram tole', generated 60kg of human faeces every day. Discussions further deepen on questions like only rich can make the toilets but how poor will make the toilets? Humiliation was further stroked with answers like ok! So everybody will have Poor's faeces? Facilitation led to realize community responsibility and people were decided to go for CLTS in their village. Committees were formed to take CLTS for implementation. Till the preparation of this report 9 latrines have been completed and 44 latrines are under construction. Community is on the move towards safe sanitation while implementing CLTS in the village. People seem enthusiastic. The dream of ODF village might take more time to claim but certain of success.

11. Facilitation; key to CLTS success

Bara and Rautahat districts have very low awareness on sanitation issues. In totality, only 17 percent of the population do have toilets for safe sanitation. In the communities, total sanitation is a concept beyond people's dream. Success in a few sites in CLTS implementation have created the environment for Plan Nepal and its partner organisation to think of CLTS as an approach for total sanitation. Facilitation in CLTS implementation remains the key to success.

In Rautahat/Bara CLTS facilitation is guided by Dr. Kamal Kar’s prescription to CLTS implementation, coupled with total program implementation strategy of Plan Nepal. Including self-criticism and self-awareness, bargaining tactics are also employed in CLTS implementation. Bargaining takes place in terms of over all package of Plan's development activities. There are cases when people are ready to initiate CLTS in their community. Community people if not ready for CLTS, they are provided with awareness raising programs on environmental sanitation & hygiene and further motivated towards safe sanitation through CLTS. Thus they are bound to initiate CLTS; organize themselves in the process; and prepare themselves in-groups to benefit from other development activities of Plan Nepal.

Apart from usual facilitation for CLTS, facilitation also takes place in terms of problem formation to solution generation. Community members are trained in hygiene and environmental sanitation issues. In the process facilitation comes as prescription along with awareness. Continuous dialogue is one of the tactics that takes place between facilitator and community people so as to create awareness among the people. The process of conscientisation thus starts. Apart from awareness, it is also the understanding of people that if they will adapt to CLTS, they will enjoy safe sanitation and will be able to assess other development benefits coming from Plan Nepal. Of course, in the process, people get united and work together for the development of their community. At the end there is an experience of success. The community organization takes place for development.
The level of facilitation at Rautahat/Bara Program Unit

Technical Coordinators (Program Unit/Country Office)

Development Coordinator (VDC) --------- Partner Organization Staff (VDC)

Community people (Cluster)  CLTS Facilitator  WES Coordinator

Figure no. 7 Level of facilitation

12. CLTS; sustainability an issue

While talking about CLTS success, sustainability issues become a question for consideration. Sustainability in CLTS has two aspects. One talks about permanent toilets and other about defecation related behaviour change.

Permanent toilets have been a major concern of community in terms of sustainability to CLTS implementation. We have learned that temporary toilets made of local materials have often been damaged in rainy season. Once it is vanished, people feel reluctant to reconstruct the toilet. Slowly, they again start defecating in open places. A contradiction between CLTS and subsidy in toilet construction remains at community level and had further restricted in early success in CLTS implementation.

Sustainability ladder of toilet needs to emphasize in strategies to implement CLTS in long run. Upgrading of toilets has been a major challenge. Community people often feel hesitant to invest money for toilet construction. Revolving fund and linkage with financial institution has potential to help people for toilet construction that need to be worked out systematically.

Behaviour change itself is the other aspect of sustainability issue. Realization has come in terms of behaviour change with people's psychology. Most of the time habits are learned through socialization. Open defecation is a behaviour coming from early socialization. Changing the habit open of defecation is rather challenging for the people themselves. Compulsion related to life style is motivation for sanitation in Bara and Rautahat districts. Exposure through migration and sites of CLTS implementation has contributing effect on behaviour change. But sustainable behaviour change remains an issue of concern. There is a need to look at how people will be able to continue with new learning and if they continue how they are managing. It is imperative to learn about the underlying factors for both success and failure in CLTS undertaking. These will further guide in refining and launching CLTS program in new communities.
13. Conclusion

CLTS is in progress, as an approach, towards total sanitation in Nepal. Some successes have been achieved in CLTS implementation in Rautahat/Bara. Gamhargama and Bharwoliya are already declared as open defecation free villages. There are a few other clusters in a move to be declared open defecation free clusters.

The CLTS undertaking has given us opportunities as a poor people's appropriate tool for a healthier living in one hand and on the other it is a challenge for us as our target people found easily in other options to relief themselves.

It has been difficult for Plan Nepal Rautahat/Bara Program Unit to follow CLTS approach completely in its sanitation program. The pace has been slow. People say open defecation in rural Tarai of Nepal is a culture, a fun, a place for social gossiping and in addition an avenue and time for relaxation. Freedom of choice to defecate openly is easily taken and culturally accepted as a part of socialization process.

In Bara/Rautahat, it is also an issue of socio economy. Awareness is coming from socio-economic status and learning that people have towards sanitation. Most of the time, it is a related issue.

Contradictions exist in terms of questions of alternatives. Whether rural masses of Tarai Nepal are worthy to have modern defecating facilities? If they can, whether they would be able to in-culture the behaviour that is required to use modern toilets? All these can remain at the discussion forum as long as we don't reach out to the people and find out what is the genesis of it all. CLTS has been understood as a new intervention for new communities restricts it's scaling up in old working areas.

Moreover, partial subsidy approach for total sanitation is available for Plan’s old working communities. Hence contradiction remains. Thus, it has not been able to set good examples for new communities to take CLTS with their own leadership. Also, long term sustainability has been a question. Some of the temporary structures have been either damaged or destroyed by heavy rainfall and land erosion. Low-income households do not have the financial resources to build new structures. This demonstrates the need for continuous follow-up till up-grading of toilets and satisfactory behaviour change towards defecating habits takes place.

At times, it has problems in terms of the community engagement with the CLTS process. The enthusiasm of the user groups for continuous community level monitoring and evaluation is important. It is also essential to know more about where CLTS works and where it is unlikely to work well.

Plan Bara/Rautahat is thinking about how they might promote the establishment of appropriate financial mechanisms, so that community themselves could be able to mobilize funds for long-term operation and maintenance. Microfinance has been found as a new option to fund families for toilet construction.
Moreover, it is remain the issue of behaviour change. Largely we are able to reach to the people to reflect and act on sanitation issues. A process of social development has started but in its slow pace.

In totality, CLTS as an approach has distinctively contributed in organizing people for sanitation. People have also become an active participant in different other development activities in the community. CLTS could serve as a tool for community empowerment than to limit it to total sanitation. But facilitation remains the key to all success.

14. A Few Recommendations

- Intensive follow-up is required from the part of facilitator to change the behaviour and strengthen the knowledge base of the people towards CLTS.
- Facilitation should also focus on light torch support effect for self-spreading movement. All community people should internalize (adult, youth and children) the essence of CLTS. Natural leaders may also be incorporated as facilitators. We need to look at various ways to conscientise people's long lasting behaviour change.
- After habitual change it could be worthy to help families with finances to construct toilets with subsidies.
- Specific staff should be trained for CLTS facilitation for its wider spread.
- Strong leadership by community people should be encouraged to facilitate the process.
- Integration with other program activities is needed for sustainability of CLTS.
- Neighboring clusters should be focused for CLTS as it has demonstrative effect of the CLTS.
- Homogeneous clusters have been seen as easy to implement the approach therefore in the beginning small homogeneous cluster should be focused for CLTS.
- Linkages should be established with micro finance institutions and revolving funds could be established to serve the purpose while upgrading toilets.
- Facilitation remains the key issue for CLTS implementation. People should be identified from the community, partner as well as Plan staff for training for facilitation.
- Community level monitoring system should be institutionalized for sustainability and bringing about the timely changes both in behaviour and approach.
- Continuously introducing innovations and keeping abreast with the changes elsewhere.
- Establishing strong network with relevant local institutions and exchange learning.
- CLTS if implemented with community groups could serve as entry point for community organization.
- Different groups such as women's group, youth groups, Child Clubs, BLOP groups should be used as entry point to prepare the environment for CLTS implementation.
- A specific module should be developed for CLTS awareness for different groups.
References


6. www. Plan-international.org

