
Background

- Worldwide, one in three people lack adequate sanitation, and more than one billion people practice open defecation (UNICEF, 2013)
- Inadequate sanitation causes widespread damage to human health (UNICEF, 2008)
  - Leads to preventable diseases which kill 5,000 children and 1,000 adults every day (Sanitation Drive, 2015)

(Wolfer, 2014)
Lack of sanitation especially affects the disadvantaged (WHO, 2011)
   – Directly increases poverty

Despite its consequences, government and nongovernment leaders tend to ignore inadequate sanitation (Kar & Pasteur, 2005)
   – Conventional response is to build public bathrooms and provide financial incentives for use

(Wolfer, 2014)
CLTS stimulates a sense of disgust to mobilize communities to address sanitation issues (Kar, 2005)
- Unlike traditional approaches, does not provide overt instructions or financial subsidies

Basic principles (Chambers, 2009):
- Grassroots approach
- Hands-off triggering
- Facilitation through questions
- Let people choose their own latrine design
- Promote community assistance to weaker members
- No provision of a household hardware subsidy

(Wolfer, 2014)
5 benefits compared to traditional approaches (Chambers, 2009):

- Quick success
- Community-wide scope
- Increased social solidarity
- Development of local leadership
- Applies to other contexts

Evidence demonstrates that CLTS may be significantly more effective than other approaches to sanitation

(Wolfer, 2014)
CLTS Tools

• CLTS tools are “simple, visual, and practical,” and accompanied by Socratic questioning (Kar, 2005)

• Enter community and build rapport
  – Solicit permission and support from local leaders
  – Goal is to recruit as many community members as possible
  – Learn the crude local word for feces and use that term for the rest of the intervention

(Wolfer, 2014)
• Transect walk
  – Walking tour of community with community members to visit areas of open defecation and latrines
  – Helps community members see they have grown accustomed to poor conditions
  – To stimulate conversation and reflection on open defecation

(Wolfer, 2014)
• Community mapping
  – Visualize scope of sanitation problem
  – Reflect on uneven distribution of sanitation problem

• Goo calculation
  – Participants estimate the amount of feces that an adult produces each day
  – Use a familiar container to help participants visualize total amounts

(Wolfer, 2014)
CLTS Tools (cont.)

- Diagramming fecal-oral contamination
  - Ask participants to draw a picture of what happens to the feces
  - Leads participants to realize that they ingest human feces
- Medical expense calculation
  - Reminds people of their vulnerability

(Wolfer, 2014)
CLTS Tools (cont.)

• Triggering
  – Facilitators collect feces and food and place adjacent plates
  – As they see flies alighting, participants realize they are ingesting each other’s feces on a regular basis
  – Facilitators turn the meeting over to community leaders
    • Remind members that they did not come to provide assistance
    • Encourage emergence of natural leaders

(Wolfer, 2014)
• Open-defecation-free (ODF) planning
  – Facilitators encourage natural leaders to plan next steps for community
• Follow-up
  – Early and repeated visits to the community stimulate and reinforce follow-through
  – Increase likelihood of ODF achievement

(Wolfer, 2014)
• ODF declaration and celebration
  – Often achieve ODF status within weeks or months
  – Can inspire communities to tackle other problems

(Wolfer, 2014)
Sanitation is necessary for poverty reduction and addressing health problems (Sanitation Drive, 2013)

Sanitation is both a cause and consequence of health and economic disparities
- A holistic approach to poverty must include attention to sanitation

Fits with emerging social work focus on environmental issues

(Wolfer, 2014)
Implications for Practice (cont.)

- Social workers experienced in Participatory Rural Appraisal, community organizing, and Socratic questioning may be good CLTS facilitators
- CLTS interventions empower communities and help build solidarity (Kar & Pasteuer, 2005)
- Social workers may find familiar roles in the community development projects that emerge after successful CLTS interventions

(Wolf, 2014)


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