

THE PHILIPPINE SUSTAINABLE SANITATION KNOWLEDGE SERIES

# Guidebook for Community-Led Total Sanitation



DEPARTMENT OF HEALTH





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## Guidebook for Community-Led Total Sanitation

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- *Guidebook for a Sustainable Sanitation Baseline Study*
- *Guidebook for a Local Sustainable Sanitation Strategy*
- *Guidebook for a Local Sustainable Sanitation Promotion Program*
- ***Guidebook for Community-Led Total Sanitation***
- *Guidebook for a Zero Open Defecation Program*
- *Guidebook for Onsite Sanitation Technologies*
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## FOREWORD



According to 2008 UN data, 2.6 billion people still do not have access to or have inadequate sanitation facilities.

Every 20 seconds, a child dies as a result of poor sanitation. That's 1.5 million preventable deaths each year.<sup>1</sup> In the Philippines, 23% of Filipinos or roughly 19 million still do not have access to sanitary toilets.

These realities necessitate tangible and concerted efforts that are owned by the people through the local government units (LGUs). The United Nations has already declared access to water and sanitation as a human right in its July 28, 2010 General Assembly. With the synergistic efforts of both the public and private sectors, the Philippines is also making significant gains in raising awareness and accelerating progress towards the Millennium Development Goal (MDG) on sanitation: to reduce by half the proportion of people without access to basic sanitation by 2015.

Through this Guidebook, we also emphasize that the National Government needs the support of its partners in order to achieve this goal. We need greater collaboration with our partners in the local government units. Likewise, we need to intensify our partnership with the private sector.



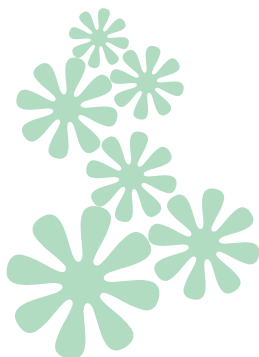
<sup>1</sup>Homepage of the International Year of Sanitation (<http://esa.un.org/iys/health.shtml>)

Attaining sustainable sanitation is a significant challenge. However, we believe that we have committed partners in the LGUs. Sustainable sanitation will happen because the LGUs are recognizing their roles and equipping themselves with the appropriate knowledge, tools, and skills.

This Guidebook is just one in a series of knowledge resource materials that we are developing towards one of our shared aspirations: ensuring health and wellness for all Filipinos through clean, safe, and life-giving water and sanitation facilities. The specific Guidebook for Trainers of Community-Led Total Sanitation (CLTS) Facilitators is designed for the use of trainers in building the competencies of CLTS facilitators in planning and implementing interventions to address open defecation (OD) in communities.

Open defecation prevention is one of the major programs of the National Sustainable Sanitation Plan (NSSP). Through local government units (LGUs), CLTS, a tried and tested approach, will be adopted in igniting action to stop OD practices among communities – considered to be the first critical step in introducing other total sanitation programs. This community empowering approach assigns to facilitators the important task of guiding the people in developing an action plan, organizing themselves, and sustaining efforts for Zero Open Defecation (ZOD) plan implementation.

This Guidebook is for the LGUs and the Filipino people. Use it well and then share it with other LGUs who may also find it useful in their pursuit of sustainable sanitation.



**ENRIQUE T. ONA, MD, FPCS, FACS**  
Secretary of Health



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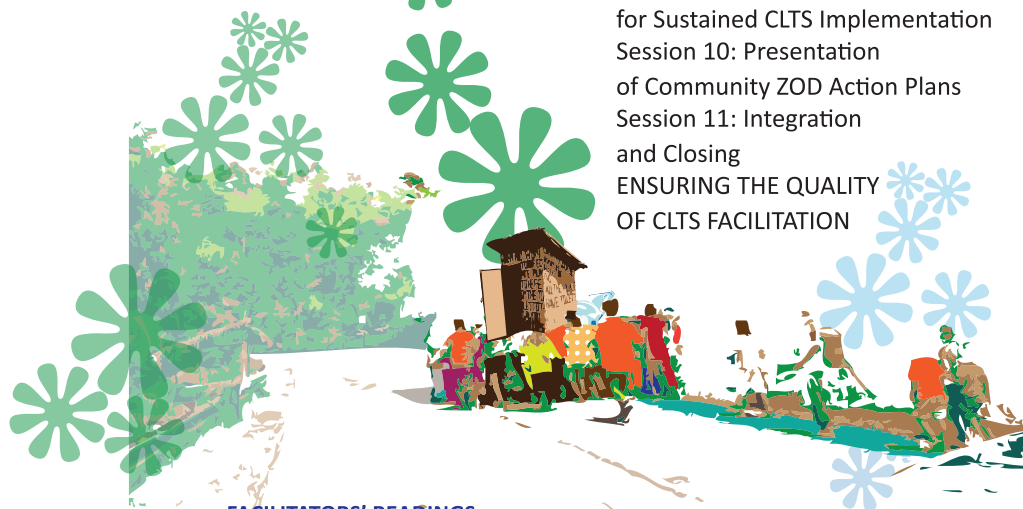
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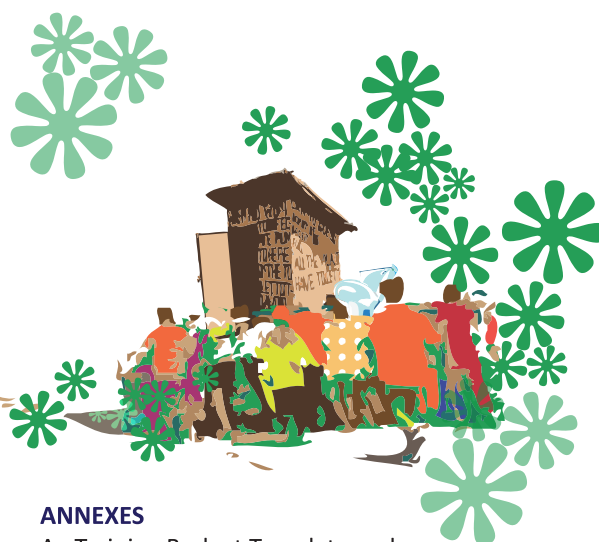
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1. Handbook on Community-Led Total Sanitation (Kamal Kar with Robert Chambers, 2008)
2. Update on Some Recent Developments in Community-Led Total Sanitation (Kamal Kar and Petra Bongartz, 2006)
3. Subsidy or self-respect? Community-led total sanitation. An update on recent developments (Kamal Kar and Katherine Pasteur, 2005)



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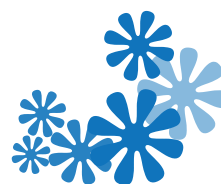


## ACRONYMS

<b>CLTS</b>	Community-Led Total Sanitation
<b>DOH</b>	Department of Health
<b>IC</b>	Informed Choice
<b>LGU</b>	Local Government Unit
<b>M&amp;E</b>	Monitoring and Evaluation
<b>CLTS</b>	Millennium Development Goals
<b>NL</b>	Natural Leader
<b>NSSP</b>	National Sustainable Sanitation Plan
<b>OD</b>	Open Defecation
<b>PHP</b>	Philippine Peso
<b>PRA</b>	Participatory Rural Appraisal
<b>SI</b>	Sanitary Inspectors
<b>SuSEA</b>	Sustainable Sanitation in East Asia
<b>VERC</b>	Village Education and Resource Centre
<b>WB-WSP</b>	World Bank Water and Sanitation Program
<b>ZOD</b>	Zero Open Defecation
<b>ZODP</b>	Zero Open Defecation Program



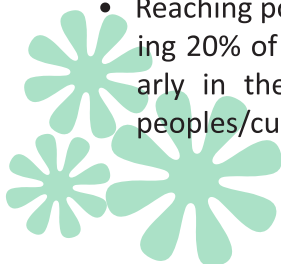
## THE SUSEA PROGRAM



The Sustainable Sanitation in East Asia Program-Philippine Component (SuSEA) supported by the Water and Sanitation Program (WSP) of the World Bank and the Swedish International Development Cooperation Agency (SIDA), and implemented through the leadership of the Departments of Health (DOH) and Environment and Natural Resources (DENR), is geared towards increasing access by poor Filipinos, primarily low-income households, to sustainable sanitation services by addressing key demand and supply constraints. Aside from this, the program hopes to learn from local implementation of sanitation programs as basis for national policy and operational guidance.

SuSEA Philippines commenced in July 23, 2007 as a learning program to support the Government of the Philippines (GoP) update its approaches and interventions in sanitation and needs that were not present or not addressed in traditional sanitation programs that focused on two extremes: 1) toilet-bowl distribution and hygiene education and 2) centralized sewerage systems. The most important of these emerging needs are:

- Complementing interventions related to the reduction of risks of sanitation- and poverty-related diseases such as soil transmitted helminthiasis and acute gastroenteritis
- Linking sanitation interventions with environmental objectives such as the improvement of water quality and water resources
- Sanitation in rapidly urbanizing towns and cities, including the occurrence of disease episodes that aggravate impacts of poor sanitation (such as flooding) on the economy and quality of life of city populations
- Reaching pockets of communities that comprise the remaining 20% of those without access to basic sanitation, particularly in the rural areas (among whom include indigenous peoples/cultural minorities) and urban slum communities







SuSEA-Philippines was designed using four different models as the platform for developing specific interventions (according to themes below). The learning gained and the tools developed from these models served to assist other local governments units (LGUs), as well as informing national sanitation policy and programs for GoP-led expansion and scaling up. The four models are:

- Model 1 Disease Prevention and Control – Sanitation interventions for the eradication/ reduction of disease
- Model 2 Water Quality Management – Sanitation intervention for the improvement of water quality within a water quality management area
- Model 3 Liveable Cities - Sanitation interventions for the improvement of quality of life in cities and low-income urban poor communities
- Model 4 Sustainable Rural Livelihoods - Sanitation interventions to support sustained livelihoods in rural areas

Six sites participated in the main program sub-component of SuSEA. These are: Bauko Municipality in the Mt. Province, Dagupan City in Pangasinan Province, Guiuan Municipality in Eastern Samar Province, General Santos City and Polomolok Municipality in South Cotabato, and Alabel Municipality in Sarangani.



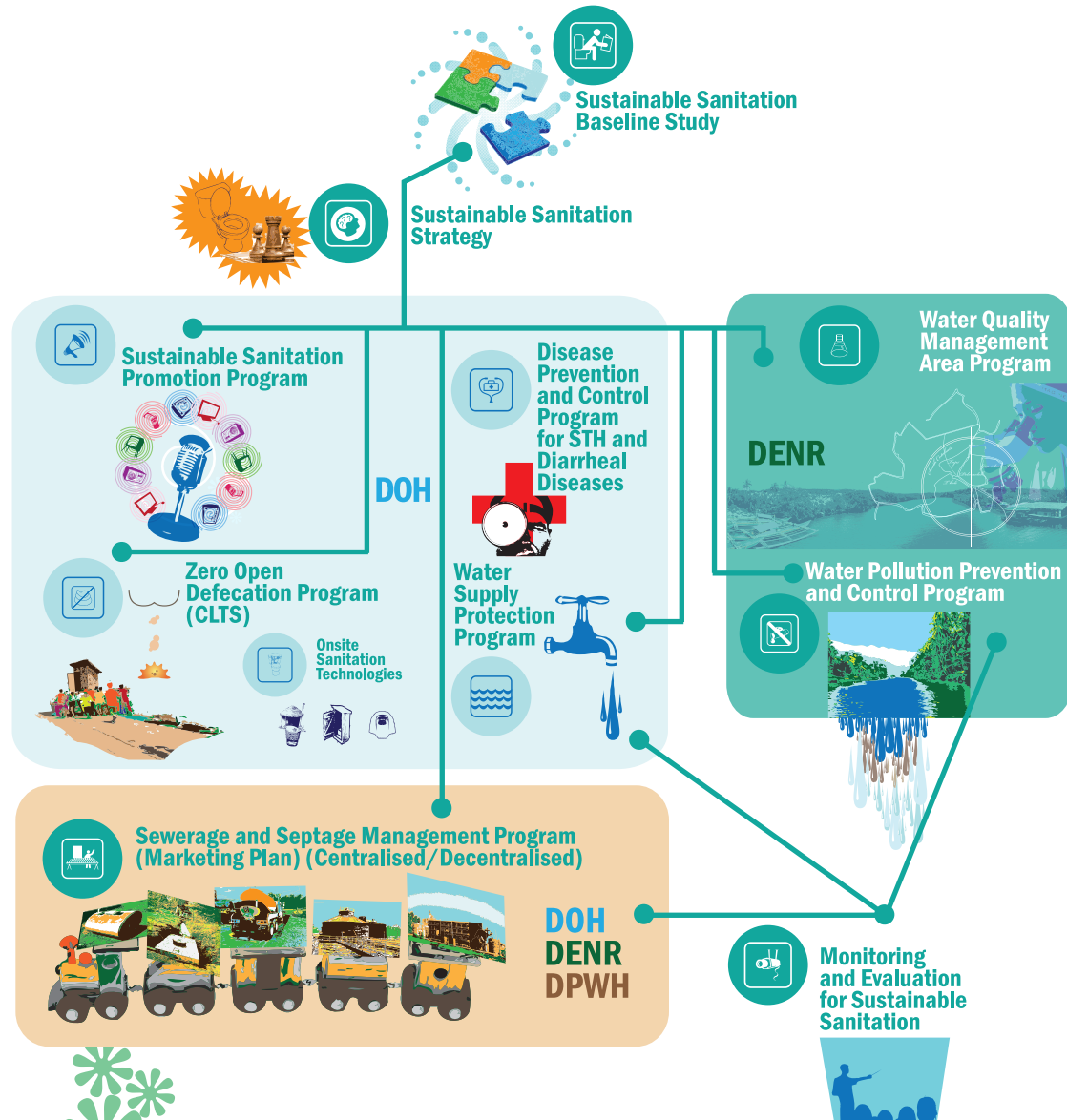
The desired outcome in each of the project sites varied according to the model and agreements by the Program Steering Committee and the local government. While outcomes varied per site, each of the projects were additionally intended to provide the LGUs with a fount of information on developing and running their own sanitation programs based on the on-field experiences of the SuSEA team and their partners.

This information has been packaged for your use in a Sustainable Sanitation Knowledge Series, to which this guidebook/report belongs. The reader is encouraged to familiarize himself/herself with all the guidebooks/reports in this series beginning with the Guidebook for Conducting a Baseline Study and followed by the Guidebook for Developing a Local Sustainable Sanitation Strategy.

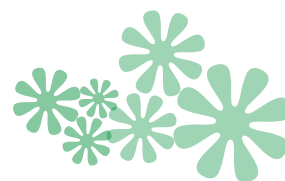
What guidebooks/reports you choose to utilize next will be determined by your community's particular needs and your LGU's proposed sanitation programs. On the succeeding page, you will find an illustration of the various sustainable sanitation programs (SSPs) under the National Sustainable Sanitation Plan (NSSP). For each of these SSPs, SuSEA has also developed materials under the Philippine Sustainable Sanitation Knowledge Series, intended to guide local government units in implementing the various sanitation programs and initiatives in their own area. The information gathered in the Knowledge Series is, in turn, based on specific SuSEA projects and activities in each of the six project sites.



# Sustainable Sanitation Programs




## INTRODUCTION



One of the foundations of total human development is adequate sanitation. Progress can only thrive where people are able to lead a quality of life that allows them to contribute to their own advancement. And basic to a good life is good health.

The Millennium Development Goals (MDG) recognizes access to safe drinking water and basic sanitation as a priority concern that must be addressed by the international community to pursue efforts to “free our (its) fellow men, women and children from the abject and dehumanizing conditions of extreme poverty.” While there has been a significant increase in the number of people in developing regions using improved sanitation facilities since 1990, this in no way indicates that the set target can be achieved by 2015. Indeed, there is a need to broaden sanitation coverage, especially among the developing world’s population. (MDG Report 2008)

In the Philippines, one of the major sanitation programs being implemented is the Sustainable Sanitation in East Asia (SuSEA). It aims to promote increased access to sanitation services among the Filipino poor through interventions focused on:

- 
- (i) testing, learning, and developing tools for scaling-up interventions;
  - (ii) capacity and institution building of local government units (LGUs) in implementing appropriate sanitation solutions; and
  - (iii) improvement of national sanitation policy and programs.

At the national level, the program spearheaded the development of a National Sustainable Sanitation Plan (NSSP) and a corresponding promotion program. On the other hand, its objective at the local level is “to improve environmental health and quality of life particularly benefiting low income households in the six partner LGUs.” These include the Municipality of Bauko (Mt. Province), Dagupan City (Pangasinan), Municipality of Guian (Eastern Samar), General Santos City and Municipality of Polomolok (South Cotabato), and Municipality of Alabel (Sarangani).



Open defecation (OD) was identified as a shared sanitation concern for all sites despite previous projects that were implemented to provide sanitation facilities. Community-Led Total Sanitation (CLTS) was introduced as an innovative approach to addressing the problem. Communities were facilitated through the process of analyzing their sanitation profile, defecation practices, and its adverse consequences. In contrast to traditional sanitation projects, no subsidy was offered to communities. CLTS is one of the approaches under the Zero Open Defecation Program (ZODP); it focuses on bringing about behavioral change and igniting communities to collectively act to become Zero Open Defecation (ZOD) areas.

Modest successes have been achieved so far. While eradication of OD in many of these areas remains to be a challenge, the program can claim credit for implementing an approach that has empowered communities to collectively act on their own problems. The experience has also led to modifications on the approach as appropriate to the local situation – thereby, evolving a Philippine brand of CLTS.

The stage has now been set for broadening the scope of the program beyond the pilot areas. This would entail training of a corps of CLTS facilitators who will work directly with communities in triggering CLTS and conducting follow-up activities. The importance of building their competencies cannot be overemphasized as the response of the community will, to a large extent, be a factor of how well the facilitation has been handled. This Guidebook will serve a main tool for trainers who will take on this critical task.

## **NATIONAL SUSTAINABLE SANITATION PLAN (NSSP)**

### **PREAMBLE**

- a. Sanitation as a human right and a public good.
- b. Sanitation focuses on the poorest population groups and the poorest barangays.
- c. Sanitation as essential for total human development.
- d. Sanitation that is gender and culture sensitive.
- e. Sustainable sanitation as a means to achieve the MDG.

### **OBJECTIVES**

By the middle of July 2016, the following would have been achieved:

1. All provinces and cities have sustainable sanitation programs.
2. Half of all municipalities have sustainable sanitation programs.
3. Half of all barangays will be declared open defecation free
4. Reduction of acute gastroenteritis and soiled transmitted helminthes by 50 per cent.
5. All major river systems designated as water quality management area.
6. Investments in sustainable sanitation increased by 100 percent.
7. The water and sanitation targets of the MDG.





Promoting sanitation among the poor can be a daunting undertaking. Considering their economic conditions, meager resources are always earmarked for what they think are more basic needs. The challenge for any sanitation program is to make them see beyond the obvious – that proper sanitation is vital to good health. They must be convinced that it is a worthy investment. They need to understand that they deserve a more dignified way of life. And that they have the capacity to provide for their own sanitation needs. The CLTS approach opens their eyes and minds to all these!

This Guidebook is for those who believe in this community empowering approach – for one cannot teach what one does not espouse. It is designed to be a tool for teaching... and learning as well. It is a work in progress in the same way that the Philippine CLTS approach is continuously evolving. There is always room for improvement if the objective is to develop a successful program that would ultimately reap desired results on the ground. We hope that the users of this Guidebook will adopt the same perspective.



## ABOUT THE GUIDEBOOK



The Guidebook for Community-Led Total Sanitation is, essentially, a Guidebook for Trainers of CLTS Facilitators that is designed to support scaling-up initiatives in the Philippines. As the country gears up for the implementation of the National Sustainable Sanitation Plan (NSSP), it becomes imperative to build capacities at the local level to enable them to lead efforts to develop and execute supportive plans.

Local government units (LGUs) play the important role of operationalizing national policies and strategies and are expected to take on the task of implementing CLTS among its constituent communities. Other partners from the government and non-government sectors likewise readily extend needed support. With various key players taking part in national and local programs, harmonization of efforts becomes all the more critical in ensuring alignment among the program implementers.

This Guidebook is one step in this direction. It was developed to serve as a guide in building the competencies of CLTS field facilitators in planning and implementing the program in targeted communities. It is designed for the use of trainers of CLTS facilitators, defined as those who directly trigger CLTS in communities and provide post-triggering follow-up to promote the attainment of becoming Zero Open Defecation areas.



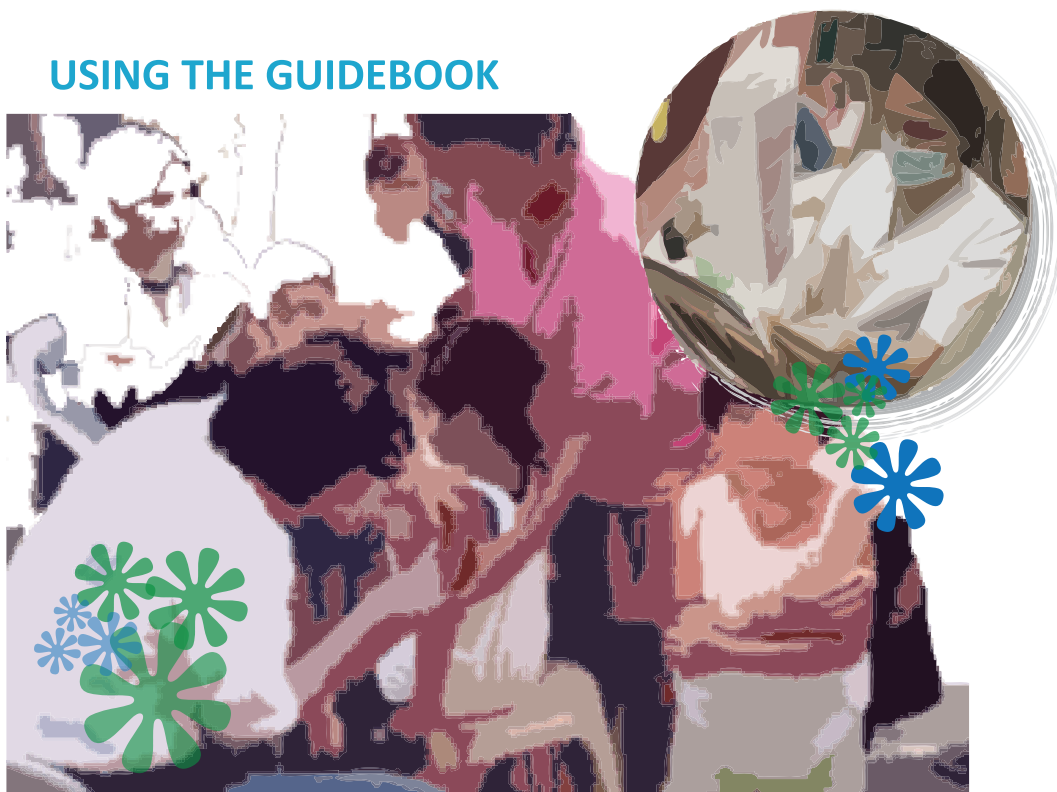
An underlying objective is also addressed – that is, to standardize the CLTS process in the Philippines. While mainly adopted from published manuals of CLTS innovator Dr. Kamal Kar, this document incorporates experiences and lessons in introducing and monitoring CLTS among pilot areas in the country thereby, evolving an approach that is deemed more appropriate to realities in the Philippine setting.

The Guidebook provides the basics and standards for CLTS facilitation but remains to be a work in progress – as CLTS in the Philippines has yet to produce the best results that it aims for. It will be updated and enhanced as the program matures and generates new learning from its implementation.





## USING THE GUIDEBOOK



The Guidebook is designed to be a ready reference and guide for trainers of CLTS facilitators in the Philippines. Users would include the Department of Health (DOH) as implementers at the national level, and their counterparts in the LGUs who are responsible for operationalizing the program at the local level.

Targeted trainees are front-line staff of government and non-government organizations, and members of triggered communities who have emerged as Natural Leaders and are being groomed to be Community Consultants. To ensure standardized implementation of the CLTS process, experienced and prospective facilitators will be required to undergo the training program.

The Guidebook is organized in three parts. Part 1 contains an overview of CLTS – intended to provide needed perspectives on this innovative approach. Part 2 discusses the training design and session guides for the CLTS facilitators’ hands-on training. It will be noted that the design specifies objectives from the trainees’ perspective to facilitate the evaluation of the effectiveness of the training activity.





On the other hand, trainer's objectives are indicated in the session guides. Part 3 is the main reference document for the training. It provides guides and tools for facilitating the four stages of the CLTS approach – Pre-Triggering, Triggering, Post-Triggering, and Scaling Up.

While the Guidebook introduces innovations to the original approach, it is still very much anchored on the principles, processes, and guidelines of CLTS. Hence, trainers must familiarize themselves with the Handbook on Community-Led Total Sanitation (included in the accompanying CD). It will also be noted that most of the discussions have been adopted from this Handbook.

Trainers are strongly advised to read the Guidebook in its entirety to be able to effectively conduct the learning intervention. References and tools have been included to complement the session guides and facilitate the standardization of the process of CLTS implementation. To ensure that local perspectives are considered, documentation of actual experiences in the field is made available in the various documents of this Sustainable Sanitation Knowledge Series.

The session guides provide details on how the different learning activities are proposed to be conducted. Variations may be introduced depending on individual facilitating styles of the trainers. However, to achieve the objective of standardization, basic processes must be followed and prescribed tools must be used, especially during the triggering meeting.

**The icons in the Guidebook refer to the following:**



**Reminders**



**Materials  
for posting**



**Notes**



**Handouts for  
distribution**

# Part 1

## THE CLTS APPROACH



## Part 1

# THE CLTS APPROACH

## INTRODUCTION AND BACKGROUND

### Sanitation Situationer

The Millennium Development Goals (MDG) Report 2008 cites that almost a quarter of the developing worlds' population live without any form of sanitation while an additional 15% use sanitation facilities that do not ensure hygienic separation of human waste from human contact. Worldwide, open defecation is practiced by 1.2 billion people. Of this, more than one billion live in rural areas comprising 70% of the world's poor.

In the Philippines, OD has been decreasing since 1990. While this is a positive development, the issue remains to be a priority concern considering the risks involved. Where OD exists, food and water contamination result in high incidence of diarrhea, cholera, soil transmitted helminthiasis or intestinal parasitism, hepatitis, and other related diseases among the residents, regardless of whether they practice

OD or not. In poor communities, this means that limited resources for basic needs are diverted to medical costs, further aggravating the community's poverty condition. The consequences are far-reaching – on the health, economic status, and dignity of life among those affected. Not to mention the extent of resulting environmental degradation.

### Estimated Access to Improved Sanitation

WHO/UNICEF 2008 Update

#### Urban Philippines

Year	Improved	Shared	Unimproved	Open Defecation
1990	71%	12%	9%	8%
1995	75%	12%	6%	7%
2000	78%	13%	3%	6%
2006	81%	13%	1%	5%

#### Rural Philippines

Year	Improved	Shared	Unimproved	Open Defecation
1990	46%	6%	24%	24%
1995	55%	8%	16%	21%
2000	64%	9%	10%	17%
2006	72%	10%	4%	14%



It is estimated that 23% of Filipinos or roughly 19 million still do not have access to sanitation facilities. Statistics also indicate that OD is more prevalent in the rural areas. On the average, the percentage of the rural population practicing OD is thrice as much as that in the urban areas.<sup>5</sup> This further underscores the urgency of addressing this sanitation problem if local government units (LGUs) want to improve the quality of life of their constituency, particularly the poor.

Sanitation interventions in the Philippines are mainly implemented by the Department of Health (DOH) through the LGUs. Programs essentially focused on (i) information, education, and communication; (ii) toilet bowl distribution; and (iii) latrine construction. However, these initiatives have not succeeded in producing the desired results – that is, improved health conditions in assisted communities. It was noted that OD does not necessarily translate to lack of access to sanitation facilities. For a number of reasons ranging from lack of funds to mere habit of OD, facilities that were provided remained unused. The programs were well-meaning but the approach adopted was not effective. People need to see the ill effects of OD and decide to change their behavior.

Moreover, with the devolution of basic services, LGUs lagged in achieving the developmental objectives of many sanitation programs. Scarce resources tended to relegate sanitation as a lower priority. Because of the “subsidy” orientation promoted by traditional sanitation programs, interventions to address OD are perceived to be a costly investment. In some cases, there is low awareness and political will among LGUs to improve sanitation, as indicated by an absence of policies and programs for pro-poor sanitation. This may also indicate an inadequate capacity to facilitate sustainable sanitation. Some LGUs need guidance in policy formulation, planning, and execution. There may also be a need to build skills among front-liners and/or program/project implementers.<sup>6</sup>

#### **National Sustainable Sanitation Plan**

##### **VISION**

Sustainable Sanitation for All Filipinos

##### **MISSION**

To create an enabling environment for all LGUs to initiate sustainable sanitation actions and programs especially in marginalized communities.

<sup>5</sup>WHO Sanitation Coverage Estimates, July 2008, [http://www.wpro.who.int/NR/rdonlyres/4C93B86C-E35E-4AEC-B5B7-8F6C965824EE/0/PHL\\_san.pdf](http://www.wpro.who.int/NR/rdonlyres/4C93B86C-E35E-4AEC-B5B7-8F6C965824EE/0/PHL_san.pdf)

<sup>6</sup>Philippines Sanitation Situationer- Rory Villaluna, 2009.

[http://www.ecosan.ph/index.php?option=com\\_docman&task=doc\\_details&gid=94&Itemid=45](http://www.ecosan.ph/index.php?option=com_docman&task=doc_details&gid=94&Itemid=45)



With the implementation of Sustainable Sanitation in East Asia (SuSEA) – Philippines, the necessary technical and financial assistance was provided to support the government in updating its approaches and interventions in sanitation, and responding to needs that were not present or not addressed in traditional sanitation programs.

One of its major accomplishments is the implementation of a National Sustainable Sanitation Plan that provides the needed anchor for LGU efforts to improve its sanitation profile. It seeks alignment of all government plans for implementing sustainable sanitation initiatives towards a vision of “Sustainable Sanitation for All Filipinos.” It is explicit in its focus on the LGUs as key planners and managers of sanitation programs. It highlights the importance of community participation and multi-stakeholder engagement in sustaining sanitation programs.

To address the country’s long-standing problem of OD, SuSEA adopted the innovative Community-Led Total Sanitation (CLTS) approach in the Philippines. Its success in bringing about social awakening and provoking collective action to stop OD in communities has long been established. It has since been introduced as a prescribed approach for sanitation programs being implemented by the DOH.



## The Birth of CLTS

Community-Led Total Sanitation (CLTS) was developed in 1999 by Dr. Kamal Kar, a specialist in social and participatory development, together a partner non-government organization (NGO) of WaterAid Bangladesh – Village Education and Resource Centre (VERC). The discovery of this pioneering approach started during the evaluation of a WaterAid-supported sanitation project in Bangladesh that involved household latrine construction with substantial external hardware subsidy.



The findings indicated that although the number of toilets increased, the practice of open defecation continued. Kamal Kar noted that the provision of external hardware subsidy was not the driver that led to a community's decision to stop OD. Rather, the decision was a collective one made by the community upon realizing that no one was safe until each and everyone stopped OD completely and changed their hygiene behavior.

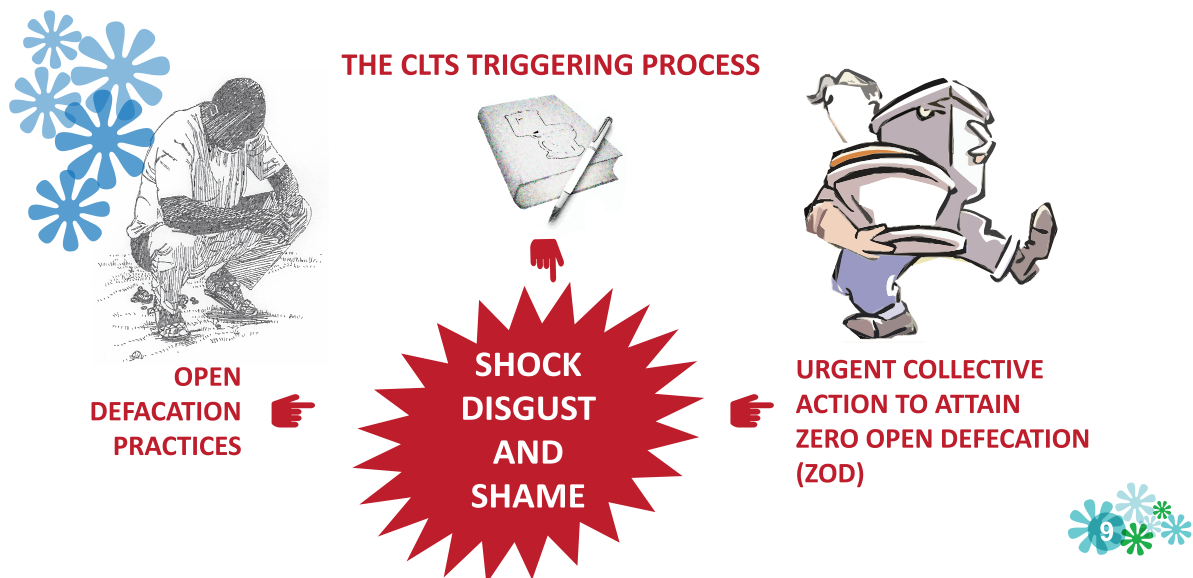
Thus, Kamal Kar's team recommended that communities be engaged in a participatory analysis of their sanitation profile. He believed that when triggered systematically, CLTS could provoke urgent action to attain ZOD. The success of this approach caught the interest of other organizations that readily supported or adopted CLTS. To date, it has spread to South and Southeast Asia, Northeast Asia, Latin America, Middle East, and Africa.

## The CLTS Approach

Community-Led Total Sanitation is an integrated approach to achieving and sustaining open zero open defecation (ZOD) status. It utilizes participatory rural appraisal (PRA) methods in facilitating communities to assess their sanitation profile, analyze their defecation practices and its consequences, and plan for action to address the problem. The objective of the approach is behavioral change – a resolve to totally stop the unsanitary practice of OD, borne out of a collective realization of the terrible impact of OD on public health and their environment.

Utilizing a hands-off approach, facilitators guide community members through the process of social awakening by conducting appropriate activities and asking the right questions that lead them to the desired insight – that they are ingesting each others' feces when one or more practice OD in their area. Analysing their poor sanitation situation elicits SHOCK, DISGUST and SHAME, and often leads to action for collective good. The approach is focused on awareness-raising to bring about change in behavior among the members of the targeted community.

CLTS is founded on the principle that communities can take responsibility and take action. Hence, it is fundamental in this approach that no hardware subsidy is offered and no latrine models are prescribed. Communities are encouraged to devise solutions within their means without any expectations of external financing support. The spirit of “bayanihan” is reawakened as households demonstrate social solidarity and cooperation in striving for a ZOD status in their community.





In the process, other important characteristics of CLTS are manifested. These include:

- Emergence of Natural Leaders (NLs). These are members of the community who actively lead efforts to achieve ZOD status. They normally emerge during triggering. NLs may eventually become community consultants who provide advice and assistance to other communities pursuing a ZOD status.
- Local innovations of low-cost toilet models using locally available materials. Since the approach encourages communities to design and develop latrine models that they can build without subsidy, it allows room for creativity and adaptation among members of the community. Various innovations of latrine models have emerged over the past years of CLTS implementation.
- Community-innovated systems of reward, penalty, spread, and scaling-up. Consistent with a hands-off approach, communities are given a free hand to plan rewards and sanctions for agreed plans and actions to achieve and sustain ZOD status. Initiatives for scaling up likewise become a collective community decision.

CLTS processes lead to the important first step towards total sanitation – ending the practice of OD and changing hygiene behavior. Other sanitation initiatives may follow or happen simultaneously, including:

- Improvement of latrine design;
- Adoption and improvement of hygienic practices such as:
  - ensuring that everyone uses a clean toilet;
  - washing hands with soap before preparing food and eating, after using the toilet, and after contact with babies' feces or birds and animals;
  - handling food and water in a hygienic manner; and
  - safe disposal of animal and domestic waste to create a clean and safe environment;
- Solid waste management;
- Waste water disposal;
- Care, protection, and maintenance of drinking water sources; and
- Other environmental measures.



When successfully implemented, CLTS:

- Is total – it affects all in the community and visitors as well
- Is based on collective community decision-making and action by all
- Is driven by a sense of collective achievement and motivations that are internal to communities, not by external subsidies or pressures
- Leads to emergence of new Natural Leaders and/or highly encourages new commitment of existing leaders who do not need or follow a blueprint but do things their own way
- Generates diverse local actions and innovations
- Revives traditional social practices of self-help and community cooperation
- Engages men, women, youth, and children in a time-bound campaign and local action to end OD followed by general cleaning up
- Attracts local leaders, elected people's representatives, the local government and NGOs to help, support, encourage and spread ideas
- Enables ZOD communities to gradually move up along the sanitation ladder and improve structure and design of their toilets through better linkages with other stakeholders
- Inspires communities to move on to achieving other collective common goals like “no hunger or starvation”, “no children out of school”, “equal wages for all”, “gender equality at work”





Traditional	CLTS
<ul style="list-style-type: none"> <li>Access to external financial assistance. Including hardware subsidy</li> </ul>	<ul style="list-style-type: none"> <li>Total absence of subsidy</li> </ul>
<ul style="list-style-type: none"> <li>Number of latrines constructed as indicator of success</li> </ul>	<ul style="list-style-type: none"> <li>Motivation and awareness raising as measure of success</li> </ul>
<ul style="list-style-type: none"> <li>Donor-beneficiary relationship</li> </ul>	<ul style="list-style-type: none"> <li>Promotes inter-community communication and contact through visits to and interaction with ZOD communities</li> </ul>
<ul style="list-style-type: none"> <li>Prescription of latrine models</li> </ul>	<ul style="list-style-type: none"> <li>Flexible use of technology as developed by the community</li> </ul>
<ul style="list-style-type: none"> <li>Teaching as a mode of learning with communities</li> </ul>	<ul style="list-style-type: none"> <li>Hands-off approach in facilitating awareness and triggering change in communities</li> </ul>
<ul style="list-style-type: none"> <li>Implementation externally driven by project personnel from donor institutions</li> </ul>	<ul style="list-style-type: none"> <li>Implementation of project activities facilitated by the community and anchored by Natural Leaders</li> </ul>

The table above summarizes the features of CLTS compared to with traditional sanitation approaches.

Central to the CLTS approach is the intent to restore the dignity of OD communities. This makes the task very challenging for the facilitator – as CLTS ignites action through shaming. He/she should be mindful of cultural and individual sensitivities in conducting triggering activities to sustain participation and interest in the sanitation program.

Needless to say, the success of the program is largely dependent on the skill of the facilitators in mobilizing active community participation and collective decision-making using this highly innovative approach<sup>7</sup>



<sup>7</sup>Kamal Kar and Katherine Pasteur, "Subsidy or self-respect? Community-led total sanitation. An update on recent developments," November 2005

## The Stages of CLTS Implementation

The CLTS approach is comprised of four stages, namely: Pre-Triggering, Triggering, Post-Triggering, and Scaling Up.

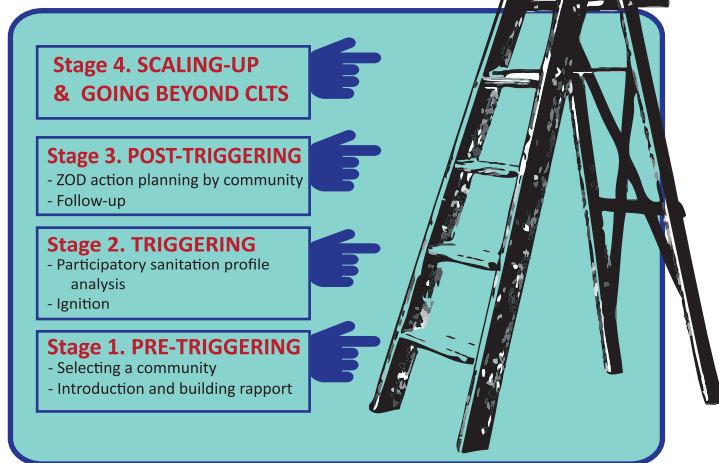
### Stage 1. Pre-Triggering

#### Description and Objectives

The Pre-Triggering stage is focused on conducting activities to identify and prepare a local community for the CLTS triggering. It consists of: (a) selecting a community; (b) introducing the team and building rapport; and (c) preparing for the triggering meeting. It normally takes between half a day to a week to complete the pre-triggering phase, depending on the condition in the area. Critical activities include meeting the local leaders, visiting the site, and initial profiling and assessment of the community.



#### STAGES OF CLTS IMPLEMENTATION



The selection of the community is the most crucial process in the CLTS process. Communities respond differently to triggering and an initial assessment of the community is necessary to determine the social, physical, and institutional condition of the community and evaluate whether the community is likely to respond positively to a CLTS triggering.



## 2. Introduction and building rapport

This sets the stage for the intervention and includes coordination activities with the counterparts in the community. Objectives and requirements (such as venue, participants, schedule, etc.) must be explained. A meeting with the formal community leader is arranged to build support at the onset of the intervention. The ocular visit and meeting should generate baseline information about the area needed for planning the triggering meeting.

## 3. Preparations for the triggering meeting

The facilitating team attends and makes arrangements for all the meeting needs such as materials, equipment, transportation, and meals. Based on the data gathered about the community, the team strategizes their approach in the triggering activity. Assignment of roles is also done during this step.

### Expected Outcome

- Identified community for triggering
- Agreements on schedule, venue, and participants for the triggering meeting
- Plan for facilitating CLTS in the community

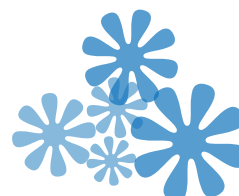
## Stage 2. Triggering

### Description and Objectives

Triggering is the main intervention of the CLTS approach. It is the process of facilitating a local community's analysis of its own sanitation situation and profile, using participatory exercises and tools, with the objective of eliciting a realization of the adverse effects of open defecation and a decision to take action to stop the practice. The activity takes place in the community and normally lasts between three to five hours. A team of five to ten facilitators are involved in the conduct of this intervention.

### Tools

Session Guides for Triggering Meeting



## Key Activities

### 1. Climate Setting

The first activity during the gathering of community members must be dedicated to establishing rapport and making them comfortable with the facilitators and each other. This is critical since the questioning and facilitating will focus on the sensitive issue of open defecation.

### 2. Defecation Area Mapping

Members of the community join together and draw a large map of their community using different local materials. They identify boundaries, landmarks, their houses and finally their defecation areas. The exercise effectively illustrates defecation patterns in the community.

### 3. Calculation of Tae and of Medical expenses

The facilitator guides the community in estimating the amount of tae that is produced by its community on a daily, weekly, monthly, and yearly basis. After this, they discuss the amount of money spent on treatment of diseases caused by the practice of open defecation.

### 4. Transect Walk

Based on the defecation area mapping, the facilitator invites the members of a local community to visit the areas where they defecate. This activity is most effective in provoking disgust and fear of contamination and disease. More importantly, it elicits shame that an outsider sees proof of their unsanitary practices.

### 5. Fecal-Oral Transmission Mapping

Glass of Water Demonstration

Food and Tae Demonstration

The facilitator leads an analysis and illustration of how tae is transferred in the community. The diagramming is normally followed by a demonstration of how food and water are contaminated by tae from open defecation. This is designed to demonstrate how they are actually ingesting each others' tae because of OD.

## 6. ZOD Action Planning

Triggering is successful when the community collectively realizes the dangers of OD and decides to immediately stop OD. If triggering is successful, then the facilitator initiates the development of a community plan for achieving Zero Open Defecation (ZOD) status. At this point, Natural Leaders should be encouraged to lead the planning. Committees may also be created for plan implementation.

The community is invited to present their plan to the facilitators and guests from interested sectors (government, non-government, and civil society) on a set date.

### Expected Outcome

Community ZOD Action Plan



## Stage 3. Post-Triggering

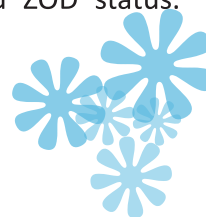
### Description and Objectives

Post-Triggering ensures sustained action in a triggered local community through follow up and monitoring of ZOD plan implementation. Participatory monitoring and evaluation is conducted as consistent with this community-led approach. The scheme is planned and executed by the community to monitor their progress.

Dr. Kamal Kar suggests that ZOD status is achieved between three weeks to three months. However, Philippine experience provides for a timeframe of six months to give communities ample opportunity to make the program work for them. The post-triggering stage ends with the certification of the community as having achieved ZOD status.

### Tools

Participatory Monitoring and Evaluation Indicators



## Key Activities

### 1. Community mapping for monitoring

Triggered communities transfer their ground map to large sheets of paper. This, together with their ZOD Action Plan, list of committee members, and list of families who have decided to dig pits or build latrines, should be posted in a public place. The sanitation status of every household should be marked by the community at regular intervals to indicate the progress in accomplishing plans.

### 2. Community action follow-up

Triggering without follow-up is bad practice so responsibilities for this activity should be defined ahead of time. Depending on the local situation, one to two staff should visit the CLTS triggered community one to two times in the first week, and then at wider intervals thereafter – enough to encourage and support.

### 3. Verification and certification of ZOD status

Certification is the official confirmation and recognition that the practice of open defecation has been completely stopped in a community. This must only be granted after verification through inspection of the site to assess whether the community indeed has ZOD. Formal or informal celebration of the achievement normally follows.

### 4. Monitoring and sustaining ZOD status

Natural leaders usually take responsibility for ensuring that the community maintains ZOD after certification. However, it would be best if facilitators could occasionally visit the ZOD sites to check for positive developments, such as building better toilet facilities (moving up the sanitation ladder). There may also be a need to encourage community members to follow through on their commitments.

## Expected Outcome

ZOD Certification





## Stage 4. Scaling Up

### Description and Objectives

Scaling up pertains to broadening the scope and spread of program implementation through institutionalization, thereby increasing the impact of the intervention. Efforts in this regard are primarily focused on the conduct of hands-on training for CLTS facilitators – a strategy that has proven to be effective in promoting the spread of the approach in many countries.

While there is general agreement that the country's experience in implementing CLTS is not sufficient to bring implementation to this final stage, this has not discouraged efforts for scaling up. On the contrary, SuSEA has pursued a very strategic initiative in developing a National Sustainable Sanitation Plan, which is a major step towards institutionalizing the CLTS approach in the Philippines.

### Expected Outcome

Spread of CLTS  
Communities moving up the sanitation ladder

### CLTS in the Philippines

CLTS has been implemented by international NGOs in its work in the Philippines for some time now. However, it has remained relatively unpopular until the World Bank Water and Sanitation Program (WB-WSP) formally facilitated an exposure visit of major stakeholders of sustainable sanitation in the Philippines to a WB-WSP project site in East Java, Indonesia in July 2008. This was conducted as a capability building intervention to prepare for the implementation of the SuSEA project in its LGU pilot sites. The first CLTS hands-on training followed thereafter in the Municipality of Guiuan in Eastern Samar. The approach has since been consistently been adopted in other SuSEA pilot sites.



True to the views of Dr. Kamal Kar, the effectiveness of CLTS can only be proven based on experience in field implementation. In the Philippines, SuSEA has led efforts to harness the lessons and insights from its CLTS facilitators. The objective is to be able to generate recommendations on how the approach can further be refined as appropriate to the local setting. CLTS in the Philippines is focused on the following areas for strengthening the approach:

- **Support informed choice.** One of the major challenges faced by CLTS facilitators lies in providing information that would help communities design appropriate latrines/toilets. In some cases, community investments are wasted because of incorrect design. Informed Choice (IC) Catalogues can be developed to guide implementers in presenting a menu of low-cost options that are affordable and workable by the communities themselves. These can be made available from triggering until scaling up. This is particularly helpful when dealing with those who have been exposed to modern sanitation technologies and are unconvinced about indigenous methods
- **Mobilize partnerships and resources.** Facilitating access to hardware is an option that can be considered despite the “no subsidy” policy of CLTS. This could entail linking up with partner manufacturers of low-cost toilets so that they would offer discounts to interested communities. Or with organizations that can provide the needed training on building latrines. CLTS can also be facilitated with improved access to financing. It is, however, important to determine the appropriate timing of these interventions so as not to lose the essence of community empowerment.



- **Engage local leadership.** Sustaining CLTS entails strong leadership. While Natural Leaders may emerge, the support of the formal leader is still critical. Philippine experience has shown that modeling by the acknowledged community leader is an effective strategy for eliciting participation. Seeing the leader building a latrine and not doing the same is considered a shameful behavior. At the barangay level, it is important to strengthen the role of the barangay council.
- **Harmonize incentives.** The incentive scheme that is adopted contributes to the motivation of communities to achieve ZOD status. It was noted that rewards, which may be in monetary or other forms, are more powerful than sanctions in bringing about the desired behavior and action in communities. Still, non-monetary incentives such as recognition, exposure trips, among others, are highly recommended



- **Build capacities for CLTS implementation.** Facilitating CLTS is a very challenging task and therefore requires a high level of competence and commitment. However, it was noted that the assignment of facilitators affects the results of triggering activities. If they are from the LGUs, there may be expectations of subsidy. DOH personnel are associated with other funded health projects. To address these issues, it is ideal that the facilitator in community triggering meetings is from outside the community.

In addition to the training of CLTS facilitators at the local level, other mechanisms must be put in place to sustain CLTS beyond triggering. The designation of CLTS Focal Persons would address concerns about the insufficient number of deputized sanitary inspectors (SIs). Barangay workers can also be trained to become sanitation volunteers and serve as sanitation personnel at the community level.

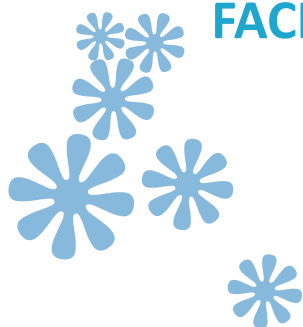


- **Strengthen suppliers, masons, septic tank builders, NGOs on ground.** The market must be prepared to respond to the demand that is generated by CLTS. With IC, models can be developed to guide implementers but there is a corresponding need to build the capacity to execute the models and/or develop more appropriate low-cost innovations. A major activity being undertaken in this regard is the training of septic tank builders with the assistance of the municipal engineering office.
- **Integration to a bigger program.** CLTS should be promoted as an approach in implementing sanitation programs and as such, can be programmed as one of their components. In this way, CLTS can be integrated into LGU plans and funded accordingly. Program monitoring and evaluation is also facilitated if the project is considered as part of a bigger sanitation or even health program. For example, the barangay can develop a simple barangay Zero Open Defecation Program (ZODP) that can be integrated into a ZODP that will apply to the entire municipality.
- **Promote a CLTS learning mechanism.** The CLTS approach is continuously evolving as lessons are drawn from experiences on the ground. A mechanism for gathering and processing insights, both from communities and facilitators, can be built into the program design to ensure that learnings are captured and translated to improvements on the approach.



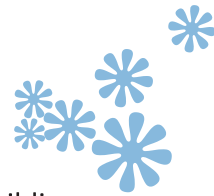
## Part 2

# TRAINING CLTS FACILITATORS



## Part 2

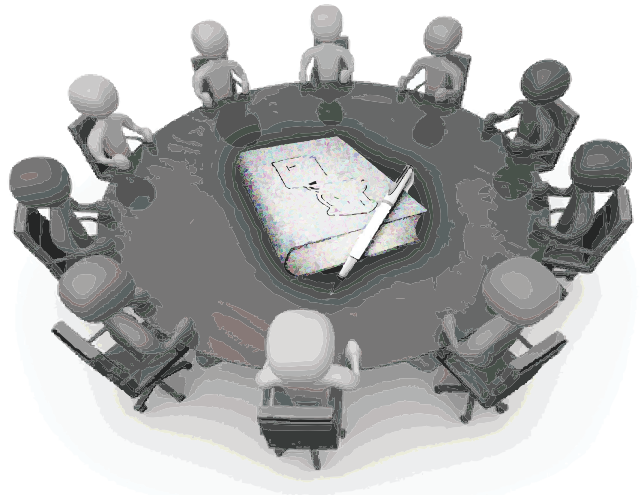
### TRAINING CLTS FACILITATORS



CLTS facilitators are tasked with more than building awareness among members of targeted communities. They face the challenge of igniting them into immediate action, driven by a resolve generated through the triggering process. In this way, experience and preparation come into play as activities are conducted to move communities from a state of complacency with their unsanitary situation and practices to that of complete resolve to have Zero Open Defecation (ZOD).

The role of CLTS facilitators cannot be overemphasized – they are key to the successful implementation of the program. However, not everyone can be an effective CLTS facilitator. It requires a set of attitudes and behaviors that works best when it comes naturally. What is needed is a combination of:

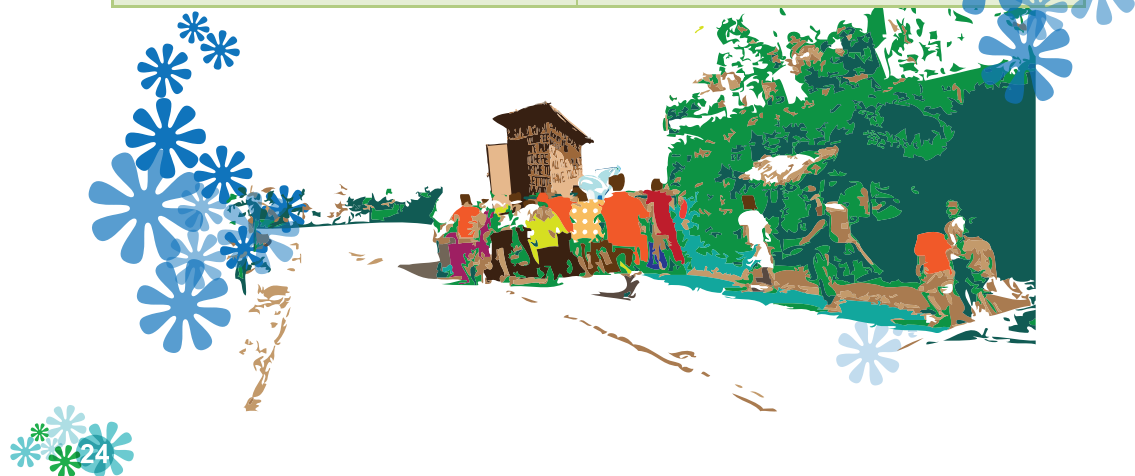
- **Boldness.** To be able to tackle the issue of open defecation, one must be fearless, daring, and courageous. Someone who is easily disgusted cannot lead nor participate in triggering activities.
- **Empathy.** Although the process takes the shaming approach, this must still be done with utmost compassion and respect for the dignity of others. Facilitators must be able to share the feelings of the community members.
- **Humor and Fun.** CLTS tames its relatively harsh approach with humor. Hence, it is important for facilitators to be able to induce laughter or amusement in the situations being examined.



All these are demonstrated as facilitators adopt this hands-off approach in enabling people to confront their unpleasant realities. And this requires a different style of facilitating – and not teaching or lecturing.

The following table contains the key attitudes and behaviors of a CLTS facilitator.

DO	DON'T
Facilitate the community's own appraisal and analysis of their sanitation profile	Do not educate, lecture or tell people what to do
Let people realise for themselves through their own analysis	Do not tell people what is good and bad
Facilitate to trigger self-mobilisation	Do not push for or demand action
Stand back, leave it to local leaders	Do not be in charge
Be cool and allow conversation between insiders – approaching the triggering moment	Do not interrupt when charged up community members start shaming their own people for open defecation practices or other hygiene behavior
Take a neutral stand and allow heated discussion for and against OD. Remember these are right indications and symptoms of approaching the triggering moment	Do not discourage members of the community from arguing amongst themselves or shaming each other, or quickly conclude that the “shaming” element between community members should be avoided as culturally insensitive
Appreciate those who take a lead and engage themselves	Do not overlook natural emerging natural leaders
Always encourage women and the poorer sections of the community to participate	Do not overlook women, children and others who often get left out
Appreciate community members' offers to help poorer members	Do not overlook people who come forward to help
Let people innovate simple latrines	Do not promote particular latrine designs
Trigger local action and encourage self-help	Do not offer hardware subsidy
Be bold yet cautious	Do not be too humble or too polite Don't try to convince too politely
Listen attentively to everything	Do not interrupt



## Roles of CLTS Facilitators

The CLTS triggering team is ideally composed of five to six members for adult groups. If children are facilitated as a separate group, an additional three to four members are required, bringing the total to ten. However, flexibility can be exercised in the distribution of tasks if less people are available to conduct the activity.

Assignment of team members is as follows:

- **Lead facilitator.** Leads the facilitation process and discussion by asking questions, initiating participatory exercises and steering the process through different collective activities.  
To perform this important role, he/she should:
  - Be fluent in the local language;
  - Possess skills in communication;
  - Have the right attitude to learning from the local communities;
  - Be experienced in participatory work; and
  - Not be a resident of the area.
- **Co-facilitator.** Assists the lead facilitator in managing the entire process of facilitation by "paraphrasing", "summarizing", helping to manage large community groups, carrying out participatory analysis, and helping in eliciting community responses.
- **Content and process recorder.** Documents what happens and monitors how the team is following the agreed strategy. Also helps the lead facilitator as and when required.
- **Environment setter.** Ensures conducive environment, makes sure that children are separated at the right time in the beginning and are involved in their own participatory exercises, deals with difficult people, and monitors for right timing of the adults' and children's groups for the children's presentation to the adults.



The facilitating team for children should be composed of a lead facilitator, co-facilitator, environment setter, and facilitator for slogans, rhymes, and procession.



Other features of an ideal triggering team are:

- Balance of men and women
- Presence of members who speak the local language



- Mix of different backgrounds
- Includes front-line extension staff from government or non-government organizations that will take responsibility for follow-up with communities after triggering



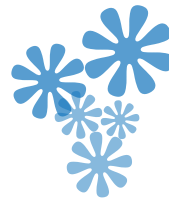
### Selecting CLTS Facilitators

Effectiveness in facilitating CLTS is crucial to the success of its implementation in communities. Although one of the strategies defined for scaling up is to expand the pool of facilitators, careful selection must be undertaken to ensure that desired results would be produced in introducing and sustaining CLTS. Skill and potential to trigger and manage groups towards ZOD goals lay the foundation for success in implementing the program on the ground.

The following criteria may apply in selecting prospective facilitators:

- Those who will actually conduct the triggering and monitoring of the CLTS in their respective areas.
- Those who are genuinely interested in and are fully convinced of the effectiveness of the CLTS approach.
- Those who are open to experiential learning and are not fixated on classroom training.
- Those who will have the capability to re-echo the CLTS knowledge and skills to other prospective facilitators.
- Those with presentation and/or community organizing skills and speak and understand the local language.
- Those who have knowledge of the areas/communities to be triggered especially its sanitation and health situation.
- Those who can follow-up, monitor, and assess developments in the communities triggered and can sufficiently document and report these.

## TRAINING FOR CLTS FACILITATORS



### Program Design

In his Trainers' Training Guide for Facilitating Hands-On Training Workshops on Community-Led Total Sanitation, Dr. Kamal Kar emphasized the importance of building the spirit, principles, vital behaviors, and attitudes to ensure practices that genuinely promote CLTS. This defines the kind of competencies that must be developed among the trainees – critical observable behaviors that manifest the capacity to be able to lead the process of eliciting resolve and action to have ZOD among members of targeted communities.

### Objectives

The overall objective of the training course is to introduce Community-Led Total Sanitation (CLTS) to field workers, project facilitators, health officers, and community leaders who are actively involved in community-based water and sanitation activities, and enable them to implement, monitor, and assess the CLTS approach and its outcome in their respective areas.

At the end of the workshop, the training participants should be able to:

1. Expound on the concept, rationale, origin, development, applicability, and spread of the CLTS approach;
2. Discuss appropriate methodologies, tools, and process in facilitating CLTS in rural communities at all stages of the process;
3. Demonstrate facilitating skills through real-life triggering exercises in selected villages;
4. Prepare and execute plans for improving facilitating skills based on identified individual strengths and areas for development;
5. Share experiences in CLTS implementation with the triggered communities and interested institutions; and
6. Develop/validate plans actions for introducing CLTS in their respective institutions/areas of work within the next six months.



The five-day learning program utilizes a combination of training approaches that include lecturettes, workshops, plenary and small group discussions, role-playing, and demonstrations. Immediate application of learning is ensured through the conduct of actual triggering and post-triggering activities with selected communities. The ensuing sharing and discussion of experiences in the field allows participants to assess the effectiveness of their facilitation and identify areas for improvement.

### Expected Outputs

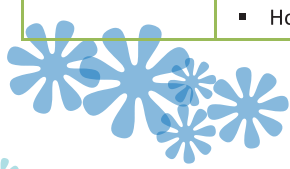
The facilitators' training program is expected to produce the following major outputs.

- Documentation of their hands-on CLTS triggering session
- Personal Development Plan for facilitating CLTS
- CLTS Implementation Plan for the next 6 months

However, more than these outputs, the program is concerned with achieving the desired outcome in the communities – that is, a decision and immediate action towards having ZOD. Hence, another deliverable for the program would be triggered communities that have committed to pursuing ZOD status.

### Schedule of Activities

Date	Session	Objectives
<b>DAY 1</b>		
AM 08:30 – 10:00	<b>Session 1: Opening Program</b> <ul style="list-style-type: none"><li>▪ Registration</li><li>▪ Opening Program</li><li>▪ Unfreezing</li><li>▪ Expectations Settings</li><li>▪ House Rules</li></ul>	<ul style="list-style-type: none"><li>▪ To set a climate that is conducive to learning</li><li>▪ To present the objectives of the training and level expectations</li><li>▪ To establish workshop norms</li></ul>



## Schedule of Activities

Date	Session	Objectives
<b>DAY 1</b>		
10:15 – 12:00	<b>Session 2: Understanding CLTS</b> <ul style="list-style-type: none"> <li>Review of past and present sanitation projects</li> <li>Overview of CLTS</li> </ul>	<ul style="list-style-type: none"> <li>To expound on the background and evolution of CLTS</li> <li>To define the CLTS approach – its basic concepts, principles, features and elements</li> <li>To explain the four stages of CLTS implementation</li> <li>To discuss ways by which open defecation (OD) in their communities can be addressed</li> </ul>
PM 01:30 – 03:00	<b>Session 3: Facilitating CLTS</b> <ul style="list-style-type: none"> <li>Conditions in facilitating CLTS</li> <li>Attitudes and behaviors of a CLTS facilitator</li> <li>Roles and responsibilities of the CLTS facilitating team</li> </ul>	<ul style="list-style-type: none"> <li>To discuss conditions that will facilitate CLTS implementation</li> <li>To expound on facilitators' attitudes and behaviors and their effects on the communities' response to CLTS triggering</li> <li>To define roles and responsibilities among the members of a CLTS facilitating team</li> </ul>
PM 03:15 – 05:00	<b>Session 4: Triggering CLTS with Communities</b> <ul style="list-style-type: none"> <li>How to prepare for triggering</li> <li>How to conduct triggering                             <ul style="list-style-type: none"> <li>The Community ZOD Action Plan</li> </ul> </li> <li>How to follow through the triggering session</li> </ul>	<ul style="list-style-type: none"> <li>To discuss preparatory activities that must be undertaken before triggering a local community</li> <li>To walk through the step by step facilitation of CLTS triggering</li> <li>To define the ZOD plan and its elements</li> <li>To identify activities that must be conducted as follow-through after triggering</li> </ul>

<b>DAY 2</b>		
AM 08:30 – 12:00	<b>Session 5: Planning and Conducting the First Hands-On CLTS Triggering with Communities</b> <ul style="list-style-type: none"> <li>Review of Day 1 learning</li> <li>Organizing for triggering activity</li> <li>Designating roles for facilitating triggering sessions</li> <li>Mock CLTS triggering sessions</li> <li>Preparation of materials for triggering</li> </ul>	<ul style="list-style-type: none"> <li>To gather learning and insights from the previous day's session</li> <li>To organize the participants for the hands-on triggering session</li> <li>To conduct a dry-run of the triggering session</li> <li>To prepare materials needed for the triggering activity</li> </ul>



## Schedule of Activities

Date	Session	Objectives
<b>DAY 2</b>		
PM 01:30 – 05:00	<b>Session 5: Planning and Conducting the First Hands-On CLTS Triggering with Communities</b> <i>(continued)</i> <ul style="list-style-type: none"> <li>Hands-On Exercise 1: Triggering in the first batch of communities</li> </ul>	<ul style="list-style-type: none"> <li>To conduct actual CLTS triggering in selected communities</li> <li>To guide the community in the preparation of the ZOD action plan</li> </ul>
<b>DAY 3</b>		
AM 08:30 – 12:00	<b>Session 6: Assessing the First Hands-On CLTS Triggering</b> <ul style="list-style-type: none"> <li>Reflection and review of Day 2 learning</li> <li>Presentation and assessment of first hands-on triggering exercise</li> <li>Preparation for the second triggering session</li> </ul>	<ul style="list-style-type: none"> <li>To gather learning and insights from the previous day's activities</li> <li>To present the highlights of triggering session conducted in the communities</li> <li>To assess strengths and areas for development in the manner of facilitation during triggering</li> <li>To discuss ways to improve the facilitating/handling of future triggering sessions</li> <li>To provide opportunities for teams to prepare for the second hands-on triggering exercise</li> </ul>
PM 01:30 – 05:00	<b>Session 7: Planning and Conducting the Second Hands-On CLTS Triggering with Communities</b> <ul style="list-style-type: none"> <li>Hands-On Exercise 2: Triggering in the second batch of communities</li> </ul>	<ul style="list-style-type: none"> <li>To conduct actual CLTS triggering in selected communities</li> <li>To guide the community in the preparation of the ZOD action plan</li> </ul>
<b>DAY 4</b>		
AM 08:30 – 12:00	<b>Session 8: Assessing the Second Hands-On CLTS Triggering</b> <ul style="list-style-type: none"> <li>Reflection and review of Day 2 learning</li> <li>Presentation and assessment of second triggering exercise</li> <li>Improving CLTS facilitation</li> </ul>	<ul style="list-style-type: none"> <li>To gather learning and insights from the previous day's activities</li> <li>To present the highlights of triggering session conducted in the communities</li> <li>To assess strengths and areas for development in the manner of facilitation during triggering</li> <li>To discuss ways to improve the facilitating/handling of future triggering sessions</li> <li>To develop a Personal Development Plan for improving CLTS facilitating skills</li> </ul>

## Schedule of Activities



Date	Session	Objectives
<b>DAY 4</b>		
PM 01:30 – 05:00	<b>Session 9: Following Through for Sustained CLTS Implementation</b> <ul style="list-style-type: none"> <li>Monitoring and Evaluating CLTS Implementation</li> <li>Scaling up CLTS</li> <li>Briefing on the Presentation of ZOD Plans</li> </ul>	<ul style="list-style-type: none"> <li>To discuss the process and tools for monitoring and evaluation of CLTS in the community</li> <li>To provide perspectives on scaling up CLTS</li> <li>To prepare for the presentation of the communities' ZOD Action Plans</li> </ul>
<b>DAY 5</b>		
AM 08:30 – 12:00	<b>Session 10: Presentation of Community ZOD Action Plans</b> <ul style="list-style-type: none"> <li>Presentation by community representatives of Community Action Plans for achieving ZOD status</li> </ul>	<ul style="list-style-type: none"> <li>To provide an opportunity for representatives of triggered communities to present their plan of action towards achieving ZOD status</li> <li>To affirm communities and/or recommend enhancements on the presented plans</li> </ul>
PM 12:00 – 01:30	<ul style="list-style-type: none"> <li>Lunch with community representatives and other guests</li> </ul>	<ul style="list-style-type: none"> <li>To establish harmonious and cooperative relationships among sanitation stakeholders and community leaders and representatives</li> </ul>
01:30 – 03:00	<b>Session 11: Integration and Closing</b> <ul style="list-style-type: none"> <li>Action Planning</li> <li>Workshop integration</li> <li>Assessment of CLTS training</li> <li>Closing Program</li> </ul>	<ul style="list-style-type: none"> <li>To develop a plan for implementing CLTS in their community for the next 6 months</li> <li>To integrate learning from the training activity</li> <li>To gather information on how to improve the conduct of subsequent CLTS facilitators' training</li> </ul>

## Preparing for the Training



The ultimate measure of the effectiveness of the training program is the achievement of the learning objectives of the participants. A good design will not be able to achieve this desired result if the training interventions are not implemented as planned. Hence, to ensure successful conduct of the training, it is essential to be able to plan and execute well. Following are some guides in preparing for the training.

### ■ **Organize the facilitating team**

Identify the members of the facilitating team. Coordinate with them for the schedule and confirm as early as possible to provide ample lead time for preparations. Organize a team meeting to plan the training activities and agree on assignments. Note that the local counterparts can also be tapped as part of the training team.

Composition of the team:

- **Lead Facilitator.** Responsible for overall facilitation of learning sessions.
- **Co-Facilitator.** Supports the lead facilitator in the conduct of the session. May also be assigned to handle some sessions. Plays a critical role in the conduct of the hands-on triggering meetings as each group of participants should be accompanied by at least one trainer/facilitator. The bigger the number of participants, the more co-facilitators are needed.
- **Training Assistant.** Attends to administrative requirements of the training. At least two personnel should be available to attend to the documentation and logistic requirements of the training. This ensures that an assistant is left to attend to the needs of the workshop while coordination work for the hands-on triggering meeting and other concerns are being done outside the training venue, if needed. It is important that assistants are also clear on their responsibilities during the conduct of the training.
- **Videographer.** The hands-on triggering session will be video taped for playback during the assessment session. Hence, if possible, every group of participants should be assigned a videographer. One option is to coordinate with the local counterpart for assistance in this requirement. This service may also be contracted out, if funds are available.

### ■ **Coordination with partner organizations**

Local organizations are in the best position to assist in organizing the training. Identify a counterpart who will serve as the contact person in planning the activities. Selection of participants and triggering sites can be done from their end. Be sure to give them the selection criteria. The ideal number of training participants is 20 – 25. If participants exceed this number, additional trainers should be invited to the team.





Scheduling should also be consulted with the local counterpart. It should not coincide with critical activities, occasions, or celebrations in the community to ensure optimal participation both in the training and triggering meeting.

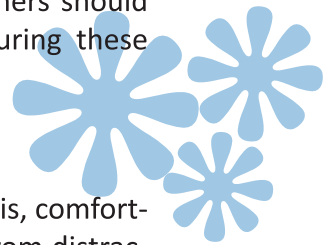
The local counterpart will be responsible for undertaking follow-up activities with the triggered communities after the training. Be clear about this assignment at the onset. If possible, request for high-level representation in major training activities, especially during the community presentation of their ZOD plans.

- **Work with a realistic budget**

The planned training activities entail costs other than those for workshop activities. It is important to be able to estimate expenses for the triggering activities and community presentation and consider this in budgeting. Ideally, all disbursements must be supported by the approved budget. Annex A contains a proposed template for preparing the training budget as well as an estimated costing list for the training of facilitators.

- **Manage logistics**

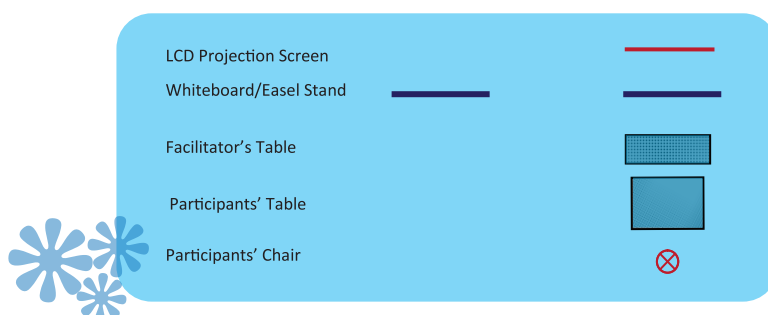
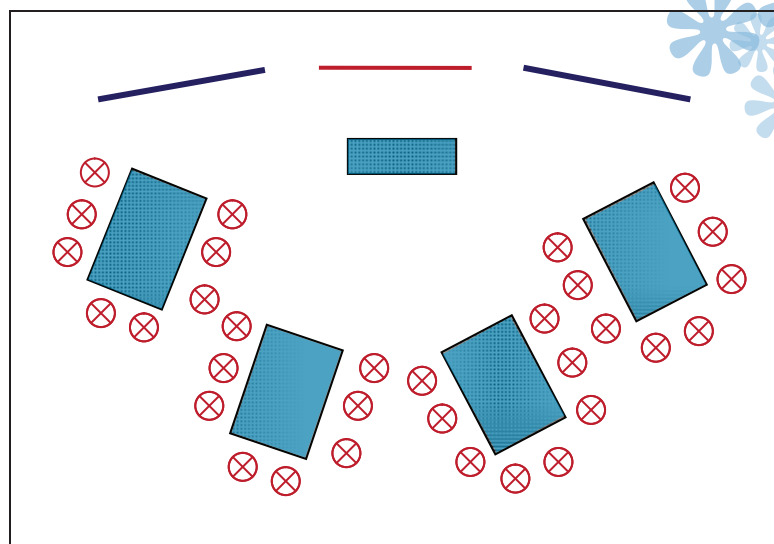
Arrangements for venue, supplies, materials, equipment, transportation, accommodation, and food must be managed well to ensure the smooth conduct of training activities. Trainers should provide adequate lead time in identifying and procuring these requirements.



## **Venue**

The training venue must be conducive to learning – that is, comfortably ventilated, well-lighted, adequately spacious, and free from distractions. There should be enough wall or mounting boards for posting of outputs. The seating arrangement should allow easy interaction among the participants and promote rapport with the facilitator. Ideally, break-out rooms should be available for group work. However, if there are none, then the room should be large enough, and the tables and chairs light enough, to be rearranged for this purpose. A modular or cluster seating arrangement is proposed.





## **Supplies and Materials**

General supply requirements for the training include the following:

- Registration forms
- Participants' training kit (containing notebook and pen)
- Blank ID cards (preferably with jacket)
- Flip chart papers (at least 50 sheets)
- Marking pens (assorted colors, 3 - 4 boxes of 10 each)
- Whiteboard markers (assorted colors, at least 1 box)
- Masking tape (1-inch, at least 3 rolls)
- Meta cards (at least 100 sheets, at least 4 colors)
- Scissors (at least 4 pieces)
- Art materials (art paper, crayons, clay, yarn, ribbons, etc.)
- Old magazines (for cut-outs)
- Glue (at least 4 tubes)



For the hands-on triggering meetings, the following materials should be prepared for each group for use in two triggering meetings:

- Big flip chart papers (at least 20 sheets)
- Colored cards (3"x5", assorted colors, at least 150)
- Masking tape (1 reel)
- Colored markers (at least 5 pieces each color – blue, red, green and black)
- Scissors (1 pair)
- Colored chalk (1 box)
- Saw dust or rice husk or ipa (at least 2 2-kilo bags, 1 per meeting)
- Stones (to keep cards in place)
- Glass and water (2 sets, 1 for each demonstration)
- Paper plate and food (2 sets, 1 for each demonstration)
- Paper and pens (for notes and computations)

These materials should be put together in one container (a sack can be used) for distribution to participants.

### Equipment

Considering the design of the training, the following equipment will be needed:

- LCD projector and projection screen
- Laptop computer (with video playback capacity)
- Whiteboard
- Flipchart stand
- Public address system
- Audio player (for music)
- Megaphone or any form of public address system (1 for every team)

### Travel and Transportation

Arrangements for transportation should be made for the following:

- Travel of the training team to and from the hotel and training venue
- Ocular visit to the training venue and triggering sites
- Travel of facilitating teams to triggering sites
- Travel of community representatives for the presentation of ZOD Action Plans



It is advisable to ask for the assistance of counterparts in arranging for local transportation.



### **Meals**

Meals for the training activity should be coordinated with the training venue. Where this cannot be provided, the training assistants are advised to plan ahead for food to be purchased outside the venue. They must ensure that meals are ready to be served during designated times. It would be ideal if flowing coffee and water can be made available throughout the training.

For the triggering activity, it is advisable to prepare light snacks and drinks to be shared with the community. These should be packaged for easy distribution on site. Candies should be purchased for children who participate in the activities. Remember to prepare the food and water that will be used for the demonstrations.

Anticipate the increase in the number of people to be served meals on the last day. Community members will be joining the session for the presentation of their action plans. They normally come in groups so it is best to ask the triggering teams for the number of expected guests. If other guests are invited, remember to consider them in the headcount for meals.

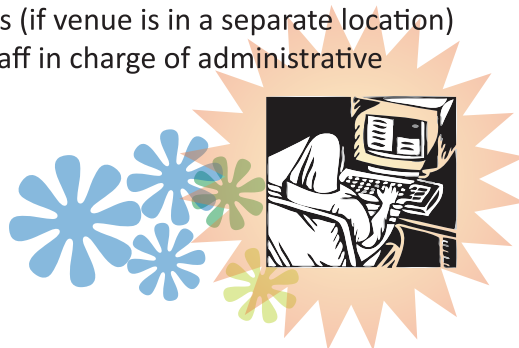
Prepare meal allowances for those who are entitled.

### **Accommodations**

If these are in separate locations, book the group in a hotel close to the training venue. Participants must be advised in advance about arrangements for accommodations for live-in training.

It is helpful if those who are staying in the hotel are informed about:

- Check-in and check-out time
- Billing arrangements (what will be on their personal account)
- Hotel amenities
- Transportation arrangements (if venue is in a separate location)
- Contact details of training staff in charge of administrative concerns



A Training Logistics Checklist is attached as Annex B.

▪ Inform participants

Participants would be better able to participate in the training activities if given proper orientation. While the first session is dedicated for this purpose, it would be good to inform them about details that they should know before they come to the training. These include:

- Training venue and schedule
- Booking arrangements (if live-in)
- Assignments and pre-work (for triggering)
- Contact details of training team (for any query or concern that needs to be communicated)

Annex C contains a template letter to participants providing information regarding the training.

## DELIVERING THE CLTS FACILITATORS' TRAINING

This section of the Guidebook contains guides for delivering the different sessions designed for the training of CLTS Facilitators. The program assumes that the participants are arriving on the venue on the evening before the training.

### Session 1: Opening Session

<b>DAY/TIME</b> Day 1 / 8:30 am – 10:00 am (1 hour and 30 minutes)	<b>METHODOLOGY</b> Structured Learning Exercise (SLE) Group discussion Lecturette Discussion
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To set a climate that is conducive to learning</li> <li>▪ To present the objectives of the training and level expectations</li> <li>▪ To establish workshop norms</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Blank ID cards Colored markers (or crayons) Art materials Glue Metacards Masking tape Scissors Lively music
	<b>PRESENTATION</b> Presentation 1 on CD
	<b>HANDOUTS</b> Presentation 1 on CD

1. Open the session asking the assigned participants to lead the opening prayer and singing of the national anthem.



Assignment of roles for the opening program must be given on the day before the training, or in the morning over breakfast, at the latest. If possible, ask for volunteers among the participants.

2. Ask the guest speaker to deliver the opening remarks. If no one was invited, the lead facilitator or training manager/coordinator should take on the task of welcoming participants.

3. Activity 1: What's in a Name? Introduce the activity by telling the participants that the first group activity will allow the participants to get acquainted (or better acquainted) with each other. Direct the participants' attention to the blank ID cards and colored markers (or crayons) that they have on the table. Give the instructions.

"On the bottom half of the ID card, please write your nickname in bold letters. Then think of an adjective starting with the first letter of your nickname that best describes your personality. Write this on the top half of the ID card. Decorate your ID as you please then put it inside the ID jacket. We will be calling ourselves with this name for the duration of the training. Also prepare your answer to the question 'Why am I here?' Be ready to share your answer with the group." As you explain, demonstrate how to prepare the ID card.

4. After about two minutes, ask the participants to stand up, pick a partner, and share their ID and answer to the question. Play lively music.

5. For the next round, ask pairs to join another pair. Have the participants explain their partner's adjective to the new pair. Go into the next round by asking the quads to join another quad. Follow the same process.

6. Request a representative to briefly introduce the members of their group to the rest of the participants using their adjective and nicknames. This should be fun as many would already know each other and may be amused at the descriptions.

7. Ask the group if there have been new discoveries. Allow a few minutes for their responses. Summarize by saying that there is always something new to discover about people.

8. Relate this to the training that they are undergoing and tell them that here they will be seeing a common issue with different eyes. In their groups, ask them to answer the following questions about expectations.

- What do you expect to gain from this training?
- How would you contribute to the success of planned activities?
- What are your expectations from the facilitators?



Change the colors indicated in the presentation slides according to the actual colours of the metacards that you will use.



Write the questions on 3 separate easel sheets and post them on the board.

9. Remind participants to write their answers in big bold letters - with only one idea per card. As they finish, ask them to post their answers on the board. Encourage them to organize the cards as they post so as to cluster similar ideas together.



Be ready with masking tape that will be needed for posting the cards.

10. After all the answers have been posted, start the discussion. For each of the questions, organize the responses (if needed), clarify where ideas are vague, and highlight the ones that are common to many. Discuss the following:

- On expectations from the workshop, expound on the objectives, schedule, methodology, and activities of the training.
- On expected contributions, generate norms. Remind the participants that they should be ready to behave in the way they expect others to behave. Propose other norms if what you have on your list (on the presentation slide) did not surface. Discuss the house rules, especially if this is a live-in training.



3. Proceed to the discussion of the definition and consequences of OD. To introduce the next activity, ask about how to eradicate OD.

4. Activity: Review of past and present sanitation projects. Begin the discussion by asking the participants if they are familiar with past and present sanitation projects implemented in their area. As names of these projects are given, write them on the board.

5. Inform the group that this session will give them an opportunity to assess these sanitation projects, especially the ones where they were involved in the implementation.

6. Form four groups. Give the instructions as follows:
- Review all sanitation projects implemented in your area.
  - Identify the reasons or factors that led to the success or failure of the project. Accomplish the following matrix.

Name of Project/ Year of Implementation	Brief Description (implementer, scope, area, etc.)	What was good about this project?	What was not good about it?

- Prepare for a three-minute presentation of your output.



Keep the matrix projected on the screen for participants' reference.

7. Start the presentation. As the participants are discussing, take note of the commonalities among the factors being presented. This should prepare you for the discussion that will follow to synthesize the ideas that have been generated.



Important points that must be surfaced are ineffectiveness of hardware subsidy, awareness of communities, contentment with the current sanitation situation, and externally driven sanitation projects, among others.

8. Ask the participants to review the outputs posted on the board (or walls) and identify common ideas. Encircle these as they are pointed out. Where there is a need to clarify, probe into the answers. After completing this process, ask the participants to share their realizations about what makes a sanitation program or project successful. Publish key ideas.



- On expectations from facilitators. Where all are achievable, express your commitment to try to meet these expectations. Remind them that in a way, this is also their expectation of themselves when they become full-fledged CLTS facilitators.



**Respond to the expectations by informing participants what can and cannot be met. This is the objective of this exercise and it is critical at this point to be able to level their expectations.**

11. Close the session. Announce the snack break.

## Session 2: Understanding CLTS

<b>DAY/TIME</b> Day 1 / 10:15 am – 12:00 pm (1 hour and 45 minutes)	<b>METHODOLOGY</b> Workshop Group discussion Video presentation Reflection exercise Lecturette Discussion
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To discuss the background and evolution of CLTS</li> <li>▪ To define the CLTS approach – its basic concepts, principles, features and elements</li> <li>▪ To introduce the four stages of CLTS implementation</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Easel sheets Markers Video clip Video player
	<b>PRESENTATION</b> Presentation 2 on CD
	<b>HANDOUTS</b> Presentation 2 on CD

1. Open the session with the question “Does tae matter?” Entertain answers.
2. Ask the participants for the local term for the word tae. Advise them that they should become comfortable with the word because it will henceforth be used for all the session discussions.



**Facilitator must also take note of the local term and start using it in the discussions.**

9. Deliver the short presentation of Sanitation Interventions in the Philippines. Discuss how these have affirmed their assessment of previous projects. Refer back to the key ideas to highlight what needs to be done differently. Segue to the overview of Community-Led Total Sanitation (CLTS), emphasizing how the approach considers the factors that increase chances of success in implementing sanitation projects.

10. Cover the rest of key points for discussion about CLTS, including:

- Definition and evolution of CLTS
- The CLTS Approach: Its features and elements
- Outcomes of CLTS

11. Present the 20-minute video entitled “No Kubeta.” After the viewing, ask the participants to reflect on the following questions and write their answers in their notebook.

- Do you see this situation happening in your community or where you work?
- What is your view regarding open defecation?
- How do you think the problem of open defecation can best be addressed?

12. Ask a few to share their thoughts. If no one is ready, close the session. Announce the lunch break and remind them to be back in the session room on time.



Advise them that they will not be asked to share what they have written unless they are ready.

### Session 3: Facilitating CLTS

<b>DAY/TIME</b> Day 1 / 01:30 pm – 03:00 pm (1 hour and 30 minutes)	<b>METHODOLOGY</b> Role Play Lecturette Discussion
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To discuss conditions that will facilitate CLTS implementation</li> <li>▪ To expound on facilitators’ attitudes and behaviors and their effects on the communities’ response to CLTS triggering</li> <li>▪ To define roles and responsibilities among the members of a CLTS facilitating team</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Cards containing roles to be portrayed
	<b>PRESENTATION</b> Presentation 3 on CD
	<b>HANDOUTS</b> Presentation 3 on CD

3. Remind the participants that the knowledge and skills acquired in the training sessions will be immediately applied through hands-on triggering exercises where the participants will be expected to conduct CLTS triggering in the field. They will be given an opportunity to plan and practice for the triggering meeting after this session.

4. Start the discussion on Pre-Triggering. Explain the objectives of this stage and the activities to be undertaken. It is critical to discuss the guidelines and criteria for selection of communities to be triggered. Entertain questions and comments as there may be issues and concerns that will be raised in this regard. Highlight the importance of proper selection since different conditions bring about different responses to triggering. Underscore the importance of conducting a study of the physical environment and social conditions of the community before triggering.

5. Discuss the Triggering Meeting Preparation Checklist. Agree on time-lines for the different activities that will be conducted as facilitators coordinate the CLTS triggering session with the communities.



**Distribute the Triggering Meeting Preparation**

6. Proceed to the walk-through of the CLTS Triggering process. Discuss the session guides that have been developed for the following activities:

- Climate Setting
- Mapping of Defecation Areas
- Estimating Tae and Calculating Medical Expenses
- Defecation Area Transect
- Fecal-Oral Transmission Mapping
- Glass of Water Demonstration
- Food and Tae Demonstration



**Distribute the compilation of session guides for the Triggering Meeting.**




Presentation slides have been prepared for a discussion of the triggering stage. Use the slides to introduce the general concept then proceed with the walk-through of the session using the guide. This should allow the participants to visualize how the activities should be conducted.

Encourage sharing of experiences and ideas during the walk-through. This is a good opportunity to be able to enhance the process. Remember that the manual is a work in progress and therefore, opportunities for enhancement should always be pursued.



7. Activity: What should you do? Introduce the activity. “In conducting the entire triggering activity, it is important to be able to work together as a team. There may be instances when facilitators commit mistakes or omissions that are critical to the success of the process. I will be presenting a number of situations. Let us discuss how we should respond to these.”

8. Present the scenarios one by one. Encourage the participants to suggest how other team members must act to correct the situation. After some discussion, present the response as proposed by Dr. Kamal Kar.



SITUATION	RESPONSE
A facilitator walks up and intervenes when the community is mapping.	Drag him/her away from the map.
A facilitator gives out cards for writing households and calculating <i>tæ</i> that is produced.	Take the cards and put it in the middle of the map for people to pick up on their own.
A facilitator suggests measures for calculating the amount of <i>tæ</i> .	Tap him/her on the shoulder or use other pre-agreed signal.
A facilitator writes household names on cards.	Take the pens and hand it to the people.
A facilitator starts talking on the mobile phone.	Discreetly remind him/her to end the call.
A facilitator begins lecturing and criticizing.	Tap him/her on the shoulder or use other pre-agreed signal.
A community member says “We are eating each other’s <i>tæ</i> ” and the facilitator does not hear or overlooks it.	Approach him/her and ask her to speak out. Ask those who agree to raise their hands.
A community member says “I am going to start digging at once” and the facilitator does not notice.	Bring him/her up front and ask him to repeat the statement. Ask everyone to give a loud applause.
A community member says he/she is too poor to do anything and would just wait for outside help.	Ask if others are willing to go on eating <i>tæ</i> until outside help comes.
A community member interferes with the map and raises objections.	Approach him/her and take him/her somewhere else for a friendly chat.
A community member denounces and criticizes the OD practice	Ask the people who among them agree.

9. Synthesize the discussion by presenting tips for teams during triggering.

10. Remind the participants that the objective of triggering is to provoke the communities to stop OD practices. Thus, it is important for them to be alert to any indications that the community has been ignited. Define the ignition moment and how to manage it.

11. Explain that different communities respond to triggering in different ways. Provide guidelines on how to deal with different responses to triggering.

12. Present the ZOD planning guidelines and template. Remind them that the community representatives must be invited to present their plan on the last day of the workshop. Hence, it is crucial for them to be able to help the community in drafting the plan. They must make the effort to complete the plan before leaving – although they should encourage them to review and enhance the draft on their own.



**Distribute the ZOD Action Plan template.**

**The illustrations of the direct pit latrine (Annex E) should be given for their reference in case they are asked during the hands-on triggering exercise.**

13. Group the participants into facilitating teams for the hands-on triggering activities.

- Label easel sheets with the name of the communities and post them.
- Start with the participants who are assigned to these communities. Ask them to sign up for other communities. Do the same for the residents of targeted sites.
- Request the rest of the group to sign up. Make sure that the participants are equitably distributed into the sites.

14. Close the session by reminding the participants to review and familiarize themselves with the triggering process. The following day will be allotted for preparations for their hands-on exercise where they will experience triggering with selected communities.



**Identify potential lead facilitators – based on your observations and advice from local counterparts who may be familiar with the participants. Make sure that they are distributed to the different groups to ensure a good mix of facilitators.**



1. Open the session by saying:

“Now that we have a common understanding about CLTS, we are ready to talk about how it is facilitated in communities. As you are gearing up to become CLTS facilitators, I am sure you are interested to know about the role you are aspiring for, its requirements, and challenges. Let us go into the next activity.”

2. Activity: Role Play of Facilitators. Divide the participants into four groups. Ask representatives to come to you and pick out a card from a pile laid down on the table. Explain that written on these are situations that they will discuss and role play. Give the participants 15 minutes to prepare for a two to three-minute presentation. Extend the time as necessary.

Write down the different types of facilitators on small pieces of paper. This will be used to draw lots among the groups for their role play.

Roles: **Authoritative:** top-down attitude or domineering

**Unable to control/manage the group:** incapable of handling a difficult situation

**Facilitative:** Assists the group in the activities; allows the group to accomplish tasks



3. Before the presentation, ask the participants to be guided by the following questions as they watch the role play:

- What is the situation that is being depicted?
- How was the situation handled in the role play?
- What type of facilitator has been portrayed?



4. Proceed with the presentations. After each role play, discuss the participants' responses to the questions posed.

5. After all the presentations, ask the participants what they think are the qualities of a facilitator, based on what has been portrayed.

6. Synthesize the discussion by presenting the Key Attitudes and Behaviors of CLTS Facilitators (on presentation slide). Remember to expound on the ideas, where necessary, and relate them to the CLTS facilitation process. Allow the participants to share their thoughts.

7. Explain that CLTS facilitation is ideally done in teams of five or more members. These include: the lead facilitator, co-facilitator/s, content and process recorders, and environment setters. Discuss the responsibilities attached to these roles (on presentation slide).



8. Ask the participants how they feel about becoming facilitators, now that they are aware of its demands.

9. Close the session by saying that no matter what role one plays in the CLTS facilitation process, it is important to bear in mind that all equally contribute to the success of activities that are undertaken for the targeted communities.

### Session 4: Triggering CLTS with Communities

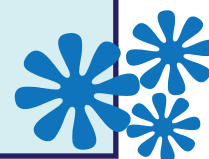
<b>DAY/TIME</b> Day 1 / 03:15 pm – 05:00 pm (1 hour and 45 minutes)	<b>METHODOLOGY</b> Lecture-Discussion Demonstration
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>To demonstrate the step by step facilitation of CLTS triggering in the community</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> None
	<b>PRESENTATION</b> Presentation 4 on CD
	<b>HANDOUTS</b> Presentation 4 on CD Session Guides: CLTS Triggering Triggering Meeting Preparation Checklist (Annex D) Design for A Simple Direct Pit Latrine (Annex E) ZOD Action Plan Template (Annex F)

1. To introduce the session, present the four stages of CLTS implementation. Explain the different stages and highlight how the participatory approach promotes self-determination and ownership among the members of the community. Reiterate the focus of the CLTS program – which is awareness-raising to bring about behavioral change. Hence, there is a need to ensure the full engagement of community members in the process, allowing them to assess their own sanitary practices and decide on actions to take to improve their situation.

2. Discuss the objective of the session – that is, to walk the participants through the CLTS triggering process and its preparatory activities. As the participants have already experienced CLTS facilitation, either as a facilitator or as a participant, inform them that the discussion will cover the process to be followed with as much detail as can be provided. However, consistent with Dr. Kamal Kar's guidelines, variations in the delivery of the sessions are allowed provided that the basic processes and principles are adopted.

## Session 5: Planning and Conducting the First Hands-On CLTS Triggering with Communities

<b>DAY/TIME</b> Day 2 / 08:30 am – 05:00 pm (6 hours and 30 minutes)	<b>METHODOLOGY</b> Reflection Group Discussion Workshop
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To gather learning and insights from the previous day's session</li> <li>▪ To organize the participants for the practicum exercise (hands-on triggering session)</li> <li>▪ To conduct a dry-run of the triggering session</li> <li>▪ To prepare materials needed for the triggering activity</li> <li>▪ To conduct actual CLTS triggering in selected communities</li> <li>▪ To guide the community in the preparation of the ZOD Action Plan</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Easel sheets Markers
	<b>PRESENTATION</b> Presentation 5 on CD
	<b>HANDOUTS</b> Presentation 5 On CD Hands-On Triggering



1. **Activity: Aha!** Ask the participants if they know the meaning of an Aha Moment. After generating answers from them, define it as “a moment of clarity, a defining moment where one gains real wisdom that can be used to change one’s life.” Together with the participants, list down the activities undertaken the previous day. Looking at the list, check if any of them experienced an Aha moment from yesterday’s sessions. Encourage participants to share these with the group.

2. Commend the participants for the insightful sharing and tell them that today will provide them more opportunities to learn how to facilitate CLTS. Introduce the hands-on triggering activity.

“Today is going to be a very exciting day for everyone in the group. You will have a chance to conduct an actual triggering session with a community. You have been organized into facilitating teams and will spend the rest of the morning preparing for a live triggering activity with communities this afternoon. Are you ready to get started?”

3. Ask the participants to move to their group. Assign tables and and given them the instructions for the next activity.

4. **Activity: Tanungan.** Give the groups some easel sheets and markers. Instruct them as follows:

- This is a group task. I will be showing you a statement on the screen. Your task is to come up with as many questions that you think will elicit this answer.
- Questions may not contain any of the words in the statement.
- At the end of the exercise, post your answers on the walls.

5. At the end of the exercise, ask the participants to walk around the room to look at the gallery of questions. Ask them to cross out any question that contains the words of the statement. Encourage them to put a star on those that they think would be effective in eliciting the desired response.

6. Invite the participants back to their seats and quickly go through the questions marked with a star. Facilitate a short discussion on the outputs, emphasizing that the challenge for them as CLTS facilitators is to ask these kinds of questions to help the community in their thinking process. Remember to give them your comments and suggestions. Close the activity by telling them that they now have a menu of questions that they can use for their hands-on triggering. Encourage them to frame their own questions as they plan the different triggering activities.



As the participants go view the gallery, make your own notes and comments on the questions, together with your co-facilitator.



7. Give the participants additional pointers by discussing the Do's and Don'ts of CLTS facilitating. Advise them that they can introduce innovations in the style of delivery but it is best to follow the prescribed process.

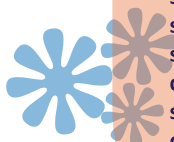
8. Instruct them to sit together and plan their triggering session.

9. Inform the groups that they are free to manage their time for the rest of the morning. Remind them to organize the materials that they would need and direct them to a specific area in the training room where they can get these. Tell them that the trainers will be available if they need guidance in their preparations.

10. Conduct the hands-on triggering activity in the afternoon.

Make sure that there are members of the facilitating team assigned to observe and guide the participants in the on-site triggering exercise. Each should be thoroughly briefed about what to observe and given the task of providing feedback on the performance of the participants.

The videographer, especially if a sub-contractor, should be properly oriented about what to cover. He/she should be advised to be discreet in performing his/her task so as not to disturb the process. The attitudes and behaviors during facilitation, body language and gestures, questioning style, and the highlights of the ignition process must be captured by the camera.



**Session 6: Assessing the First CLTS Hands-On Triggering/  
Session 7: Planning and Conducting the Second Hands-On CLTS Triggering with Communities**

<b>DAY/TIME</b> Day 3 / 08:30 am – 05:00 pm (6 hours and 30 minutes)	<b>METHODOLOGY</b> Group discussion Plenary discussion Workshop
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>To gather learning and insights from the previous day's activities</li> <li>To present the highlights of triggering session conducted in the communities</li> <li>To assess strengths and areas for development in the manner of facilitation during the hands-on triggering meeting</li> <li>To discuss ways to improve the facilitating/handling of future triggering sessions</li> <li>To provide opportunities for teams to prepare for the second practicum exercise</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Easel sheets Markers Video player Edited video footages of the triggering sessions
	<b>PRESENTATION</b> None
	<b>HANDOUTS</b> Hands-On Triggering Reflection Sheet (Annex G)



1. Welcome the participants back to the training room. Ask them how they feel about the previous day's triggering meeting. Tell them that you are sure that regardless of the results, it has been a good learning experience for them. After going through the exercise, the next task at hand is to discuss their experience and their performance.

2. Activity: Group Debriefing. Guide the participants thorough the process of assessing their triggering activity.

- Distribute the Hands-on Triggering Reflections Sheet and give the participants a few minutes to accomplish it.
- Ask the participants to share their reflections. Based on the sharing, instruct them to write their answers to the following questions on a flipchart paper:
  - What did we do well in yesterday's CLTS triggering activity?
  - What did we not do so well?
  - How can we improve our facilitation of our second triggering sessions?

3. Tell the groups to post their outputs. Designate an area in the room for the gallery. Allow the participants to walk around to read the reports.

4. Segue to the next activity by saying:

"You have just completed a self assessment. Now, we will be conducting an evaluation as a big group. The triggering activities have been video-taped and we will show you edited footages of each groups' triggering sessions. As we play back the video, please take note of the dos and don'ts and propose ways to improve the CLTS facilitation. Please note that this exercise is not intended to criticize your performance. Rather, by giving comments and suggestions, the entire group benefits from the learning."

5. Play the video and discuss feedback and comments. Probe and expound as needed.

6. Affirm the participants for their performance on the triggering. Encourage them to strive to perform better next time. Allow the groups to spend the rest of the morning preparing for the second triggering exercise.

Make your own notes to facilitate giving of feedback. Ask your co-facilitators to do the same and participate in the discussion. The slide presentation contains recommendations for improvement (Actions for Improvement). This is meant to be a synthesis of the discussion. Present this and update, as needed.



7. Conduct the practicum activity in the afternoon.

## Session 8: Assessing the Second Hands-On CLTS Triggering

<b>DAY/TIME</b> Day 4 / 08:30 am – 12:00 nn (3 hours and 15 minutes)	<b>METHODOLOGY</b> Reflection Group Discussion Creative Presentation
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To gather learning and insights from the previous day's activities</li> <li>▪ To present the highlights of triggering session conducted in the communities</li> <li>▪ To assess strengths and areas for development in the manner of facilitation during the hands-on triggering meeting</li> <li>▪ To discuss ways to improve the facilitating/handling of future triggering sessions</li> <li>▪ To develop a Personal Development Plan for improving CLTS facilitating skills</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Easel sheets Markers Video player Video footages of second triggering sessions
	<b>PRESENTATION</b> Presentation 7 on CD
	<b>HANDOUTS</b> Hands-On Triggering Reflection Sheet (Annex G) Personal Development Plan Template (Annex H)

1. Congratulate the participants on the completion of their second triggering activity. Ask them if they noted an improvement in their performance as compared to the first session.

2. Activity: Group Debriefing. Present the instructions for the activity.

- Step 1. Individual Reflection (1 hour)
  - a. Accomplish the Hands-On Triggering Reflection Sheet. (15 minutes)
  - b. Share reflections with the team.
    - Share your self-assessment. (2 minutes per participant)
    - Others will be allowed to give NEW feedback. (10 – 15 minutes)
  - c. Highlight major strengths and areas for development.
- Step 2. Team Assessment (1 hour)
  - a. On a scale of 1 – 6 (with 6 as the highest), rate the overall performance of the team.
  - b. Assess the community you triggered. Are they:
    - A match box in a gas station

- Promising flames
- Scattered sparks
- A damp match box
- c. Identify team strengths and areas for development. Agree on what the team would do differently to improve its performance in the 7-step triggering process. Include preparatory activities.
- d. Prepare a 10-minute creative presentation about the team experience and assessment. The theme of the presentation is: “Ganito kami NOON, Paano kami BUKAS.”

3. Start the presentations. Manage the time well.



Prepare time cards to indicate the time left for the presentation – starting with 5 minutes, 2 minutes, one minute and time’s up.

4. If available, present footages of the group’s triggering activity after the presentation.

5. Synthesize the discussion by highlighting the participants’ major learnings from the triggering exercises. Repeat the importance of having the right attitude and behavior in facilitating CLTS as this substantially contributes to the success of the community triggering.

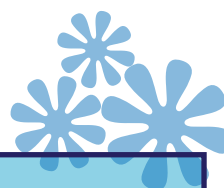
6. Introduce the Personal Development Plan template as a tool for sustaining efforts to improve their facilitating skills. Ask them to accomplish the form. Give the following instructions:

- Think of two things that you would like to improve in yourself as a CLTS facilitator.
- Focus on these areas for development as you accomplish your Personal Development Plan.

7. Assure them that this will not be submitted and will be kept for their own personal use.



## Session 9: Following Through for Sustained CLTS Implementation



<b>DAY/TIME</b> Day 4 / 01:30pm – 05:00 pm (3 hours and 15 minutes)	<b>METHODOLOGY</b> Lecture-Discussion
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To discuss the process and tools for monitoring and evaluation of CLTS in the community</li> <li>▪ To provide perspectives on scaling up CLTS</li> <li>▪ To prepare for the presentation of communities' ZOD Action Plans</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Metacards Markers
	<b>PRESENTATION</b> Presentation 5 on CD
	<b>HANDOUTS</b> Presentation 5 on CD CLTS Post-Triggering Monitoring Tool (Annex I)

1. Open the session as follows:

“While triggering is critical in building resolve and bringing about a decision to have ZOD, the behavioral change happens after this event. Therefore, equal attention should be given to the conduct of post-triggering activities.”

2. Define ZOD as the ultimate objective of the post-triggering stage. Present the definition and key ideas about post-triggering.

3. Introduce the concept of participatory monitoring and evaluation (M&E). Explain that this is the approach that is adopted in CLTS post-triggering as consistent with the community empowering agenda. Discuss the guidelines in conducting participatory M&E.

4. Activity: Identifying Progress Indicators. Form four groups and give the instructions.

- In your group, answer the following question: “How will you know if a community is successfully progressing in its efforts to have ZOD?”
- Think of as many answers as you can.
- Write your answers in metacards and post them on the board. As you post answers, try to cluster similar ideas.



5. Discuss the responses posted on the board, in the process identifying the indicators of process and progress in CLTS implementation. Summarize by presenting the slides on indicators.



6. Present and discuss a questionnaire that can be used to guide the conduct of a follow-up interview with representatives of a triggered local community.



**Distribute the CLTS  
Post-Triggering Monitor-  
ing Tool.**

7. Provide inputs on verification and certification of ZOD status. Emphasize that there are some communities that falsely report achievement of ZOD status, especially when there are rewards or incentives involved. Hence, it is important to guard against corruption and deception. Provide some tips for doing this. Close the discussion on this topic.

8. Segue to Scaling up by saying:

“While the Philippines has yet to generate the desired impact in CLTS, parallel efforts are already underway for scaling it up. Concrete recommendations in this regard address issues and concerns in responding to the demand generated by CLTS in terms of technology and resources for improving sanitation facilities. Let me share with you the proposed strategies and desired results in scaling up CLTS.”

9. Deliver a brief overview on Scaling Up CLTS. Focus on the definition and key concepts. Cite some initiatives that can be implemented during this stage. Close the session by underscoring the critical role of the CLTS facilitators in creating the demand that would drive the scaling up of CLTS in the Philippines.

## Session 10: Presentation of Community ZOD Action Plans

<b>DAY/TIME</b> Day 5 / 08:30 am – 12:00 nn (3 hours and 15 minutes)	<b>METHODOLOGY</b> Gallery Viewing
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>To provide an opportunity for representatives of triggered communities to present their plan of action towards achieving ZOD</li> <li>To affirm communities and/or recommend enhancements on the presented plans</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> None
	<b>PRESENTATION</b> None
	<b>HANDOUTS</b> None

1. Welcome the community members to the presentation session. Proceed with introductions, delivered in a way that would put the guests at ease.
2. Explain the process for the presentation.
  - Each community will assign one or two spokesperson/s who will be responsible for responding to questions about their action plan. The rest of the members will be allowed to join the rest of the participants in viewing the other outputs. All presentations will be assigned a number.
  - Groups will be formed according to the number of presentations. Each of the groups will be asked to stand before the presentation corresponding to their group number. They will be given marking pens for writing their comments on the presentations.
  - Upon the signal of the facilitator, the groups will move to the next presentation in a clockwise direction. The same process will be followed until all groups have read the plan of all communities.
  - During the plenary session, the presenters for each community will deliver a short presentation and respond to the comments and questions that have been noted by the other participants.
  - Make sure that all presentations are ended with applause or any form of recognition.

Remember to put a blank sheet of paper beside the presentation. Queries, comments, and suggestions must be written on this paper.



Ask the community members to come to the venue ahead of time to organize their exhibit/presentation. Assign areas for posting and agree on the two presenters per community. Outputs must be posted before the start of the session.



3. After the presentation, ask the community representatives this question “How do you feel about the participants in this class visiting your area?” The intention is to elicit their views on the CLTS process and the performance of the facilitators. This should be noted by all for its value as input to the assessment of the program.

4. Close the presentation by congratulating the communities for taking on the challenge of making the positive change. Commend them for taking the most important step of deciding to take action towards becoming ZOD. Express hope that their plans will be successfully executed. Inform the community members that groups from the LGU will be visiting them to monitor how they are proceeding with plan implementation.

5. Thank all the other guests who came to the activity, if there are any. Invite everyone to lunch.

## Session 11: Integration and Closing

<b>DAY/TIME</b> Day 5 / 01:30 pm – 03:00 pm (1 hour and 30 minutes)	<b>METHODOLOGY</b> Structured Learning Exercise (SLE) Assessment Tool
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>To develop individual plans for implementing CLTS in their communities for the next 6 months</li> <li>To integrate learning from the training activity</li> <li>To gather information how to improve the conduct of subsequent CLTS facilitators’ training</li> </ul>	<b>EQUIPMENT AND SUPPLIES</b> Art paper and materials Glue
	<b>PRESENTATION</b> Presentation 6 on CD
	<b>HANDOUTS</b> Facilitator CLTS Plan Template (Annex J) CLTS Training Evaluation Template (Annex K)

1. Start the session.

“Now that we are in the final stretch of this training activity, this would be a good time to plan for the transfer or application of what we have learned on the job. We will be distributing copies of the facilitator CLTS Plan template. Please work with your colleagues or co-participants from the same organization to accomplish the form. Discuss and agree on activities that you are going to implement within the next six months to promote CLTS in your area of assignment.”

Allow time for the participants to complete the form.

2. Collect the accomplished forms. Inform the participants that these will be forwarded to the CLTS focal person who will finalize the plans with them and conduct the needed monitoring.

3. Activity: Souvenirs.



**Remember to identify the focal person for CLTS in the area who will be responsible for monitoring accomplishment of the plans.**

This being the last session of the training, engage the participants in an activity that will enable them to share their learning and insight from the training. Introduce the activity by saying:

“We Filipinos enjoy taking home souvenirs from wherever we go. More than being a reminder of good times we had, these items serve as a token of a new experience and new discoveries that come with it. In the same way, we would like to end this training by giving away souvenirs. But what is different in this case is that you get to create your own.”

“We have made available a variety of art materials that you can use in designing your souvenir. Please prepare a short explanation of what your souvenir stands for. We will be sharing this with everyone during the closing and presentation.”

4. Allow 15 – 20 minutes for the participants to work on their creations.

5. For the presentation, ask the participants to come to the front by triggering groups and present their souvenir. Take note of shared insights. At the end of the session, synthesize the learning and relate it to the challenges of facilitating CLTS.

6. Thank the participants for the sharing. Affirm them for the hard work they have given to the training during the last five days. Congratulate them for completing the training and wish them well in their mission of bringing about behavioral change towards better sanitation practices in rural communities.

7. Distribute the training evaluation form and request the participants to complete them before they leave the room. Project the training objectives on the screen for their reference.

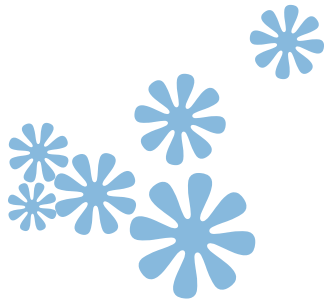
## Ensuring The Qualities of CLTS Facilitation

One of the challenges of scaling up is ensuring high standards of preparation, facilitation, and follow-up among CLTS implementers. To address this concern, the following actions are recommended:

- Appraise trainers carefully. CLTS requires a different style of facilitating that may not sit well even with those who are very experienced in the field. One of the foremost requirements is for trainers not to be “madidiriin” (easily disgusted with filth). Performance in the hands-on training would be a good indicator of capacity so it is best to be deliberate in spotting potential CLTS facilitators during this activity. It is also important to advise counterpart organizations to screen participants at their level and send only their high-potential personnel.
- Monitor quality of performance. Carry out random and unannounced visits while training is in progress. Establish effective performance measures – those that focus on outcome rather than outputs, specifically, the achievement of ZOD status and not number of triggering meetings conducted. Schedule regular audits.
- Promote accountability for managing the entire CLTS facilitation process. Mechanisms should be in place to ensure that the intervention does not end with triggering. With clear responsibility centers, there is greater assurance that follow-up activities will be conducted and sustained.
- Provide avenues for learning and sharing of experiences from CLTS implementation. Organise cross-country and in-country (states, provinces, districts) visits with face-to-face interaction with ZOD communities, natural leaders, and champions of CLTS. Convene workshops and meetings for sharing lessons and experience, including successful cases to show what can be achieved. Hold follow-up meetings and discussions for policy change where it is needed.
- Develop CLTS literature and documentation. Development of competencies for CLTS facilitating would entail continually being updated about developments in the implementation of the approach. Document, publish, and disseminate regional, country or organisational stories of success and failure, training and learning materials, guidelines, videos, and the like. Guard against misleading materials which might disseminate bad practices.

## Part 3

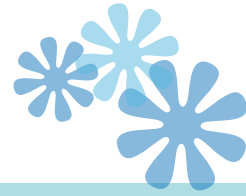
# CLTS FACILITATING GUIDES AND TOOLS





## Part 3

### CLTS Facilitating Guides and Tools



#### STAGE 1. PRE-TRIGGERING

##### Selecting the Community

The responsibility for selecting the community to be triggered is shared between the LGU leaders and the CLTS implementers. While the barangay leaders recommend areas for the intervention based on the prescribed criteria, facilitators perform the important task of gathering the community profile and confirming the selection of sites based on available data. At the onset, the appropriateness of the CLTS approach to the community should be established.

##### CRITERIA FOR SELECTING A COMMUNITY FOR TRIGGERING


- Incidence of open defecation
- Status of morbidity/mortality due to sanitation-related diseases
- Preferably no history of sanitation hardware subsidy
- With strong leaders at the local level
- Demonstrated readiness to set up local organizations for follow-up activities

Triggering activities, in most cases, happen as part of a hands-on training and should therefore consider other factors such as:

- Proximity to the training venue  
The location of the site should be conveniently accessible from the workshop venue. The place should also be secure and free from any risk to the life and health of both the facilitators and community participants.
- Size of the community  
For better manageability, CLTS should be triggered in a purok or whichever the smallest unit is within the barangay. The ideal size is between 30 to 100 households. The number of communities to be triggered will be determined by the number of facilitators available.

A pre-assessment or baseline instrument survey appears in Annex L.

##### Introduction and Rapport-Building

The objective for conducting this activity is to prepare the community and pave the way for an effective triggering session. In entering the 



community, it is important to coordinate with the barangay LGUs through the local CSWD, MSWD, and/or midwives, and BHWs – whoever could be the best conduit for communicating with the LGU, about the planned CLTS triggering.

Schedule a meeting with local leaders to arrange and agree on the schedule and venue for the triggering. Avoid market days, holidays, festivals, and special occasions like weddings. Emphasize that everyone in the community should be informed and invited. It is critical that participants are truly representative of the wider community as absence of people from all categories weakens the collective power of the triggering decision. There should be a good mix of residents attending without toilets and with toilets, male and female, rich and poor, and old and young. The barangay leaders (formal and traditional) should be informed beforehand that no hardware subsidy will be provided.

The residents in the communities to be triggered should be given a general idea of what to expect in the triggering sessions without identifying the specific activities. It is important to note that at no point should the community be informed that the meeting will discuss OD. They should be told that the activity is part of a research that is being conducted for community sanitation profiling and that the objective is to learn from them. They should also be informed in advance about the schedule of the exercise.

One of the important tasks during this stage is the gathering of data about the targeted community. It is ideal for facilitators to conduct a study on the physical environment and social conditions in the community before triggering activities. This will aid careful planning before actual triggering.



## Coordinating the Triggering Meeting



Conducting a triggering meeting can be very challenging for a facilitator. The primary constraint that must be anticipated is the lack of needed logistics for the activity. Hence, it is all the more vital that every detail is considered and prepared for prior to the triggering day.

### Venue

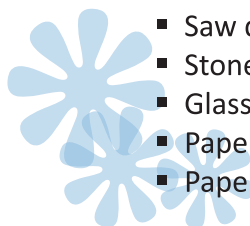
The meeting must be conducted on a big open space where the community members can draw a map on the ground. It should be relatively secluded and free from distraction (e.g., people passing by or noisy surroundings) so that everyone can focus on the task at hand. Security of the selected area is of prime importance to ensure safety of the participants and facilitators. People should have easy access to the triggering sites to facilitate the conduct of the activity.

Advise the community to bring chairs that should be arranged in a circular set-up around the open space.

### Supplies, Materials, and Equipment

Each group should have the following set of supplies and materials for the triggering meeting, packaged for transporting to the site.

- Big flip chart papers (at least 10 sheets)
- Colored cards (3"x5", assorted colors, at least 75)
- Masking tape (1reel)
- Colored markers (at least 5 pieces each color – blue, red, green and black)
- Scissors (1 pair)
- Colored chalk (at least 5 pieces)
- Saw dust or rice husk or ipa (at least one 2-kilo bag)
- Stones (to keep cards in place)
- Glass and water (for demonstration)
- Paper plate and food (for demonstration)
- Paper and pens (for notes and computations)



Where possible, bring a megaphone or any form of public address system. It will be difficult for a facilitator's voice to carry far in a big open environment. The community may also be requested to lend one for use during the meeting.



### **Transportation**

Adequate transport arrangements will be needed for all the triggering teams to travel to their assigned communities separately. On the last day of the training course, there should also be vehicles that will bring community representatives who will be invited to present their ZOD action plans to the training venue.

Prepare light snacks and drinks to be shared with the community. These should be packaged for easy distribution on site. Candies should be purchased for children who participate in the activities. Remember to prepare the food and water that will be used for the demonstrations.

A Triggering Meeting Preparation Checklist can be found in Annex D.

### **Planning for the Opening Program**

A Local Chief Executive from the provincial or municipal level may be invited to grace the opening program and deliver a welcome address. His/her presence would demonstrate the importance of the activity.

Representative/s of the Local Health Office (PHO or MHO) can also be requested to give a short presentation on the sanitation situation of the area (province or municipal) at the start of the training course.

## STAGE 2. TRIGGERING

Triggering is the main intervention of the CLTS approach. For this section, you will need the session guides that will guide facilitators in conducting the triggering meeting with communities. The guides have been prepared to standardize the triggering process and provide a common experience that could provide basis for evaluating the effectiveness of CLTS in the Philippine setting. While it is acceptable to deliver the sessions according to individual facilitating styles, it is advised that the proposed content and process be adopted to ensure the consistency in the conduct of the triggering intervention.

### TRIGGERING MEETING DESIGN

#### Objectives

At the end of the meeting, the participants should be able to:

- Analyze their sanitation practices in their communities;
- Demonstrate shock, disgust and shame over their OD practices;
- Assess the magnitude of the problem resulting from continued OD practices; and
- Understand the impact of the practice of OD on their health and that of their families and communities.

The ultimate objective of the triggering activity is for the target community to be able to collectively resolve to stop OD practices. This would come with a complete realization that they are ingesting each other's faeces, a firm decision to take action to reverse the situation, and a demonstrated change in behavior among the members of the community.

However, failure to elicit this desired response is not an indicator that the triggering process was not successful; hence, this was not included as part of the specific objectives of the program.

#### Target Participants

The triggering activity will have higher chances of success if there is adequate representation from all sectors of the community – men, women, and children, with and without sanitary facilities. Hence, all members of the community must be invited to the triggering sessions.

## Expected Outputs

The three to five hour meeting should be able to yield the following outputs:

- Mapping of defecation areas (this will be redrawn from the ground to a flipchart paper and displayed in the community for all to see);
- Calculation of fecal matter and medical expenses; and
- Draft community ZOD Action Plan.

## Session 1: Climate Setting

<b>TIME</b> 30 minutes	<b>MATERIALS AND EQUIPMENT</b> None
<b>OBJECTIVES</b> <ul style="list-style-type: none"><li>■ To establish rapport with the members of the community and gain their interest to participate in the activity</li><li>■ To initiate a discussion about open defecation and community sanitation practices</li></ul>	

1. Greet the attendees. Introduce yourself and explain the purpose of your visit. Say:

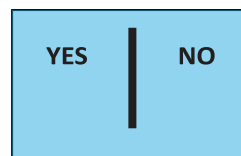
“Good morning/afternoon! I am \_\_\_\_\_, from the (name of organization). With me are the members of our team – (introduce the other team members).

We are pleased that you were able to join us in this meeting. We are here in relation to a study that we are conducting to come up with the sanitation profile of the villages in (cite the name of the area). We are interested to know the number of villages that are practicing open defecation and the effects of this practice in the overall situation of the village. We will be asking you some questions and hope that you will be open and candid in sharing information with us. We look forward to an interesting discussion with all of you.”

2. Introduce the activity by telling the attendees that you will be playing a short quiz. Draw a line in the middle of the area and explain the mechanics of the game.

“I will be asking you a series of questions. If your answer is a Yes,

go to this side of the area (point to the designated place). On the other hand, if it is a No, proceed to this side (point to the designated place). Please remember that there will not be a right or wrong answer. We simply want to know the situation in this community. Again, we would like to request you to be open and honest in your responses. Are there any questions?”



3. Entertain and respond to questions if there are any. If there are none, proceed with the exercise. Ask the following questions. After each question, briefly ask the community members to explain their answer.

- Who has seen or smelled human feces today?”
- Who has seen a neighbor or any member of the community defecate in the open today and in the past?
- Who has a toilet at home?
- Who has defecated in the open today?



4. At the end of the discussion, there should already be a verbalized confirmation by the participants that OD is being practiced in the community. Close the session by emphasizing this point and introducing the next activity/session.

**It is most likely that participants will readily answer with the first two questions. However, the last one hits close to home and may not get the same response as with the first questions. It is important for the facilitator to be able to prime the participants for this question by maintaining a relaxed and non-judgmental discussion of the answers to the first two queries.**

## Session 2: Mapping of Defecation Areas

<b>TIME</b> 30 minutes	<b>MATERIALS AND EQUIPMENT</b> Big flip chart papers Colored cards Colored markers Colored chalk Saw dust or rice husk or <i>ipa</i> Stones (to keep the cards in place on the ground)
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To guide the community in preparing a simple map indicating households, resources, defecation areas, and water points</li> <li>▪ To illustrate the magnitude of the OD problem</li> </ul>	

1. Open the session by saying:  
 “Since we are here to learn about your community’s sanitation profile, we would like to start by asking you to draw a simple map of your commu-








your community. We will tell you how to go about it but we need you to prepare it for us. On the table (point to where the table is located), you will find the materials you will use for this activity. Please feel free to get the supplies you need to participate in this activity. I will give you the instructions as we go along.”

2. Ask the attendees to stand around the meeting area. Invite volunteers to draw a boundary to indicate the perimeter of their community using the colored chalk.


3. Ask the group to identify landmarks (such as schools, places of worship, parks, etc.) by writing the name of the places in cards of a specified color. Designate a member to plot the locations in the map by putting the cards in the appropriate area.

4. Have a member of the group write their present location in a card and lay it down on the map.



**Remind them to use the stones to keep the cards in place.**

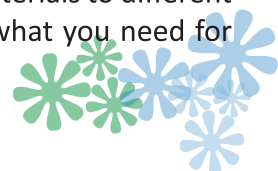
5. Then select a young boy or girl and ask him/her to step inside the map and mark the location of his/her house in the map. Ask the gathering if he/she did it correctly. If so, ask the group to clap their hands to recognize the good work.



**Have other members of the team move the table with supplies just outside the boundaries for the map.**

6. After this series of actions designed to help the group understand the task, explain the rest of the instructions. Say:

- “Please designate a representative for your family. This person will then pick up a card from the pile on the table and write the name of the family on it.” Give them time to do this.
- “Representatives may now step into the map and stand on the spot where his/her house is located. Please place the card on the location (where he/she is standing).” Allow time for people move to their proper places in the map.
- “Now, please draw a line from your house to where you defecate. You may use the chalk to connect your house to the place where you defecate. We have moved the materials to different areas just outside the map so you can get what you need for this part of the activity.”

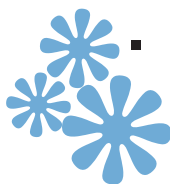


- Show the participants the sawdust (or rice husk or ipa).

Give this instruction:

“Use the sawdust (or rice husk or ipa) to symbolize your tae. Sprinkle them over areas where you defecate, spreading more where there is more tae and less where there are less tae.”

**Remember not to hand out materials to the participants in the activity. This would encourage a lot of movement and exercise of creativity. It is also important to allow them to enjoy the experience as this is expected to generate a lot of teasing, fun, and laughter among the participants. Give them sufficient time to finish this part of the exercise.**



- Request everyone to go back to their house locations once again. Instruct them to put sawdust (or ipa) in the areas they go for emergency defecation. Explain that this refers to times when it is raining, in the middle of the night, when they are sick, etc. Allow time for the participants to finish the task.
- Ask them to step out of the map carefully so as not to disturb the cards, lines, and sawdust (or ipa).

7. Looking at the map, guide the group in analyzing the information that is contained in it. The following questions are suggested:

- What did you notice in your map?
  - Where do you go to defecate?
  - What does it say about your sanitation practices, especially about open defecation?
  - How is the health of people in your neighbourhood?
  - In which area in the map is there more frequent illness?
- What do you notice about the map in these areas?



8. Some insights that may be generated in this discussion may include:

- The amount of sawdust (or ipa) indicates that there is a lot of tae scattered in the area. This reflects the unhygienic sanitation practices among the members of the community.
- Where there are more tae (sawdust or ipa), there is higher incidence of illness. OD practices lead to contamination and consequently illness among members of the community.
- People in the community defecate in each other's areas. Even those who have toilets may be find tae scattered in their area.

9. Close the discussion by informing the participants that they have just completed an illustration of the profile of the community.

### Session 3: Estimating Tae and Calculating Medical Expenses



<b>TIME</b> 30 minutes	<b>MATERIALS AND EQUIPMENT</b> Flipchart paper Marking pens Scissors Masking tape
<b>OBJECTIVE</b> <ul style="list-style-type: none"><li>To help the members of the community quantify the magnitude of the problem and the cost of open defecation</li></ul>	

1. Taking off from the previous session, tell the participants that this time, they will attempt to calculate the amount of tae that is being produced in the community.

2. Ask the group to agree on a measure that they will use in the estimate. Encourage the community to suggest their own methods and local measures for calculating their contribution to the problem.

3. Using the agreed measure, households then compute for the volume of tae that they produce on the average, on a daily, monthly, and yearly basis. Have them write the amount in their house card.

4. Ask the representatives of the household to form a line according to the figure that they generated in the exercise. Have the line formed starting from the highest to the lowest.

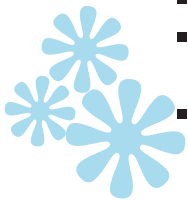
5. Declare the top three “producers” from the first three people in the line. Have them recognized as the biggest contributors in the community with applause.

6. Identify the family that produces the least. Jokingly ask them why they produce so little tae. Tell them to eat more so that they can defecate more.

7. After this, ask them how much they spend for health treatment. Once again, ask them to write the amount in their house card.

8. As in the first part of the activity, have the participants line up from highest to lowest in terms of average spending for medical expenses.

9. Announce the top three “spenders.” Ask them the following questions:



- Can you afford the health treatment that you need?
- How do you raise money for these expenses? Was it easy to source it?
- If you have to, how much money do you borrow and where do you get it?

10. Go back to the map and check with the group what they observe about the location of the houses of the “spenders.” Most likely, the group will note that they live close to the defecation area.

11. To close this activity, ask the group what they discovered from the activity. This question will hopefully be answered with an acknowledgement that they have to stop OD because soon the area will be dirtied with tae.



**At this point, the process recorders should already be taking note of the numbers that have been written in the house cards. When the group leaves for the transect walk, the process recorders stay behind to complete the calculation and write the results on a flipchart paper.**

## Session 4: Defecation Area Transect

<b>TIME</b> 30 - 45 minutes	<b>MATERIALS AND EQUIPMENT</b> Flashlight Stick
<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>▪ To locate the areas of defecation and visit the different types of latrines being used in the community</li> <li>▪ To guide the community in analysing their sanitation problem</li> </ul>	

1. Invite the community members to have a walk with you around the area. Ask them to show you the locations in the open where they and other people in the community defecate. Before leaving for the walk, find a stick or branch that you can use to get samples of tae. This will later be used in the food and water demonstration.



2. As the walk is being taken, ask the following questions:

- Which families use these areas of defecation?
- Where do the women go to relieve themselves? Is it easy to find a private and secure place?
- In emergency situations, which is the most accessible area that is used for defecation? How close is it to home? Which part of the house is nearest the defecation area?
- Do people living close to these areas get sick? How often? What kinds of illness infect them?

**Before leaving for the walk, find a stick or branch that you can use to get samples of tae. This will later be used in the food and water demonstration.**



3. Where there are tae found in the areas visited, linger and discuss with the participants so that they are able to smell the stench and feel the discomfort of having an outsider witness their unhygienic practice. Rub the stick on the tae and ask whose tae they think it is. By doing this, you have already acquired the sample you need for the demonstration.

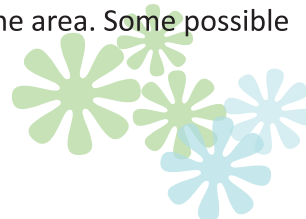
4. Draw attention to the tae and the animals (chicken, flies, dogs, pigs, etc.) feeding or stepping on the tae. Ask them:

- How often do you see flies on your food or that of your family?
- Do you like eating this kind of chicken?
- When was the last time you had pork for a meal?
- When your pet dog comes home, do your children play with the dog? Do you see the dog licking your child?

5. If there are any available, visit latrines that are uncovered and where faeces are draining out in the open. Beam a flashlight through the holes of open pit latrines and ask them what they see. Chances are there are flies breeding inside the pit and flying out in the open. Ask the community if it is safe to leave the latrines open.

6. If no tae is visible in the identified areas, ask the participants why they think the excrement has disappeared in the area. Some possible answers are:

- The rain has washed it away.
- It has soaked down to the ground.
- It was dried up by the sun.

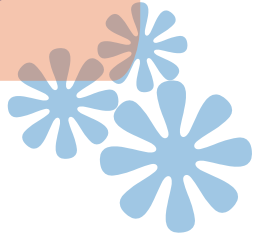


After they have answered, emphasize the point that, in many cases, they drain out in the open and contaminate the surroundings.

**Take advantage of any indications that the community is experiencing discomfort or embarrassment during this “walk of disgust.” Insist on staying in the OD area, inhaling the stench and taking in the unpleasant sight of tae scattered all over the place. This experience may well be the trigger for a community decision to stop OD.**



7. Head back to the meeting area to continue the discussion.



## Session 5: Fecal-Oral Transmission Mapping

<b>TIME</b> 15 minutes	<b>MATERIALS AND EQUIPMENT</b> Colored cards Marking pen
<b>OBJECTIVE</b> <ul style="list-style-type: none"> <li>To establish the different ways by which fecal matter is brought into the homes of the members of the community</li> </ul>	

1. Discuss the transect walk where the group found areas where the tae are no longer present. Ask them to recall where all these tae go.

2. Draw a picture of a lump of tae on a card and put it on the ground. Ask the people to pick up cards and draw or write their answer to the following questions:

- How does tae get transferred from the OD areas to your homes?
- How does tae get into your mouth?

3. After all have written their answers, have people put down their cards on the ground. Instruct them to cluster together cards with the same answers. Discuss the responses as they are given, if needed.

4. This time, ask them how the tae gets into their mouth. Let the community members discuss the pathways of contamination. Do not make any suggestions.

5. Ask the group for realizations from the exercise.



## Session 6: Glass of Water Demonstration

<b>TIME</b> 15 minutes	<b>MATERIALS AND EQUIPMENT</b> Glass of water Sample of <i>tae</i>
<b>OBJECTIVE</b> <ul style="list-style-type: none"> <li>To elicit disgust over contamination of water with <i>tae</i></li> </ul>	

1. Bring out the glass and pour water into it. Offer it to the participants, asking them if they could drink it. Ask a number of the people to establish that they are willing to drink the water.

2. Pull a hair from your head and ask the participants what you have in your hand. Make sure that they can see it.

3. Touch the *tae* with the hair strand and dip it into the glass of water. Ask the participants if they see anything in the water.

4. Offer the glass of water to anyone in the group. When they refuse as expected, pass the glass on to others and ask them to drink.

5. Ask the participants why they are not willing to drink the water. They will surely say that it is contaminated with *tae*.

6. Ask them how many legs a fly has. If they fail to give the answer, inform them that it has six legs and all are serrated (meaning, notched like the edge of a saw). Now, check with them if flies can pick up more *tae* than your strand of hair – to which they would most likely answer “More.” To drive home your point, ask them:

- What happens when flies sit on your family’s food?
- What are they bringing with them from places where OD is practiced?
- If this is the case, what are you eating with your food?

7. When someone says that they are eating one another’s *tae*, bring this person to the front to tell everyone.



**Do not make any conclusions or statements about eating each other’s *tae* and the need to have ZOD. This decision must come from the participants as a result of their analysis, not because of a suggestion by the facilitators. Reserve all conclusions for the summary at the end of the analysis or triggering exercise.**





## Session 7: Food and *Tae* Demonstration

<b>TIME</b> 15 minutes	<b>MATERIALS AND EQUIPMENT</b> Plate of food Sample of <i>tae</i>
<b>OBJECTIVE</b> <ul style="list-style-type: none"> <li>To elicit disgust over contamination of food with <i>tae</i></li> </ul>	

1. Bring out the plate of food prepared for this demonstration. Put it down on the table near a lump of *tae*. In no time, flies will swarm the *tae* and move from this to the food on the plate.

2. Ask the group to share what they observe.

3. This activity is designed to reaffirm the conclusions that were drawn by the members of the community in the previous sessions – that is, that they are eating each other's *tae*. This situation is being promoted by the continued practice of open defecation.

4. Close the meeting with a summary of the activities and the relevant discussions and insights from the participants from the community.

5. If anybody has expressed a desire to immediately dig a pit or build a latrine, take this as an opportunity to ask the others who else are willing to do the same. List down the names of interested households. Applaud people as they raise their hand and ask to be included in the list. Praise them for their decision and ask them to come up front.

6. Do the same for those who come forward as donors or funders for latrine projects. Inform the community that these are the people who will transform the community's environment. Take a photograph of the group.



## Session 8: Community ZOD Action Planning

<b>TIME</b> 15 minutes	<b>MATERIALS AND EQUIPMENT</b> Flipchart paper Marking pens Scissors Masking tape
<b>OBJECTIVE</b> <ul style="list-style-type: none"> <li>To guide the community through the formulation of their action plan for achieving ZOD status</li> </ul>	

1. When the community has been ignited and decide to completely stop OD, encourage them to prepare a plan for achieving ZOD status. Explain the form and the information that they need to include.

Mga Plano na Pang Sanitasyon Para sa Komunidad	Petsa na Isasagawa	Tao o Organisasyon na Magpapatupad ng Plano	Mga Kailangan Para Mapatupad ang mga Plano
1.			
2.			
3.			
4.			
5.			
6.			

2. Guide the community in developing the plan. Do not suggest activities and allow the community to complete the document on their own. If requested, write for them but be sure that the ideas come from the community.



It is suggested the team come prepared with a ZOD Plan template written on the flipchart paper. The other option is to let the community do this during planning.

3. Invite them to a gathering of representatives of visited communities at the training venue. Inform them that this will be an opportunity for them to present their plans. Agree on arrangements for transportation. Find out how many members will be joining the presentation.

4. Thank the community for their participation and cooperation. Congratulate them for having made a very important decision to improve the sanitation and health conditions in their community.



Upon returning to the training venue, inform the training team about the arrangements for the presentation of the action plans (transportation and food).

## 5. Distribute the snacks to the participants.



### Activities for action planning

- Formation of a Sanitation Action group
- Listing of all households identifying their present sanitation status (having or not having a toilet)
- Digging pits and using them as makeshift latrines until they construct a permanent (sanitary) one
- Developing individual family plans to stop open defecation
- Commitments by better-off and middle income households to start constructing latrines immediately
- Looking for external agencies to supply latrine construction materials
- Imposition of community penalty on those that continue to practice open defecation
- Discussing the subject in religious gatherings and community meetings
- Arranging self-organized processions in the neighborhoods for awareness-raising
- Involving mothers to educate their children to stop defecating in open areas

## Triggering with Children

Where there are many children who join the triggering meeting, they may be grouped together for a triggering exercise. They can be expected to actively participate in a defecation area mapping and transect walk. What is critical is for children to experience shock, disgust, and shame and realize the ill effects of OD.

Upon becoming aware of the need to stop open defecation, the facilitator should guide them in coming up with a slogan, poem, or rhyme containing this message. They then join the adult group and make their presentation.

### Ignition Moment

Ignition moment is the time of collective realization that due to OD, all are ingesting each other's faeces, and that this will continue unless OD is stopped. Be alert for this moment – as this would signal that there is no need to further conduct triggering activities. Encourage the community to prepare their ZOD action plan.

At this point, there may be a lot of discussion about building any form of sanitary facility. If asked for a simple latrine design, draw a simple direct pit latrine (Annex E). Let them know that this is not your design but one developed by poor people from one of the poorest countries in the world. Do not prescribe any other latrine model.



## Dealing with Responses to Triggering

TYPE OF RESPONSE	INDICATORS	IMMEDIATE ACTION AFTER TRIGGERING
<b>Matchbox in a Gas Station</b>	The community is fully ignited and are prepared to start local action immediately to stop OD	<ul style="list-style-type: none"> <li>▪ Discuss low and moderate scale toilet options and how these can be accessed.</li> <li>▪ Facilitate the development of an action plan to complete latrine projects and create organizing and implementing committees.</li> <li>▪ Generate a list of households interested in building toilets (with specific dates of completion).</li> <li>▪ Agree on dates for a follow up visit. Inform them that there will be a sharing session and invite the community members to participate. Discuss preparations for this activity.</li> <li>▪ Discuss how progress will be monitored against the social map drawn by the community (to be redrawn and posted in a prominent place in the community).</li> <li>▪ Identify a person who will coordinate with suppliers of sanitary hardware needed for the construction.</li> <li>▪ Identify and recognize 2 – 4 Natural Leaders (NLs). Allow them to take over the facilitation of the planning. However, remain in the area to observe the discussion.</li> <li>▪ Encourage the NLs come up with a slogan against OD that can be recited by the children. Rehearse the slogan.</li> <li>▪ Tell them about initiatives being taken by other nearby communities to stop OD. If the community is the first in the area, emphasize the recognition that they can receive upon attaining zero open defecation (ZOD) status.</li> <li>▪ Congratulate the group for the positive action that they have decided on and wish them the best in the implementation of their plan.</li> </ul>
<b>Promising Flames</b>	Where a majority of the community members have agreed but a good number is still undecided	<ul style="list-style-type: none"> <li>▪ If someone from the community agrees to initiate local action, ask him/her to address the group and share his/her thoughts about why he/she is willing to construct a latrine in his/her house.</li> <li>▪ Ask if anyone is interested to know how other communities have built low-cost latrines. If all agree, draw and explain a simple direct pit latrine using locally-available materials (see Annex E).</li> <li>▪ Facilitate action planning, including a weekly list of commitments to toilet construction and dates of completion.</li> <li>▪ Agree on dates for a follow up visit.</li> <li>▪ Discuss how progress will be monitored against the social map drawn by the community (to be redrawn and posted in a prominent place in the community).</li> </ul>

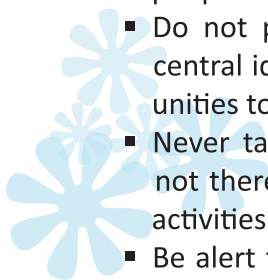
## Dealing with Responses to Triggering

TYPE OF RESPONSE	INDICATORS	IMMEDIATE ACTION AFTER TRIGGERING
<b>Promising Flames</b>		<ul style="list-style-type: none"> <li>Identify a person who will coordinate with suppliers of sanitary hardware needed for the construction.</li> <li>Identify and recognize Natural Leaders (NLs). Allow them to take over the facilitation of the planning. However, remain in the area to observe the discussion.</li> <li>Thank the group for their support of the profiling conducted and seek their permission to leave.</li> </ul>
<b>Scattered Sparks</b>	Where the majority of people are not decided on collective action, and only a few have started thinking about pursuing local action	<ul style="list-style-type: none"> <li>Thank them for the detailed analysis. Remind them that you are not a promoter or salesperson of latrines or toilets.</li> <li>Tell them that you are aware that they choose to continue their practice of OD. Ask those who would defecate in the open after this session to raise their hands.</li> <li>Inform them that you will be leaving the community knowing that the people decisively want to continue to eat each other's feces.</li> <li>Seek permission to take a photograph of those who are going to continue OD. This normally results in a vehement objection. Allow for discussion among them.</li> <li>Ask those who are willing to stop OD to raise their hands. Chances are other people will be influenced to do the same. Take the photograph with their permission.</li> <li>At this point, ask the people who decided to initiate local action and stop open defecation to come up front. Ask all to applaud them.</li> <li>Set a date for another triggering activity for the benefit of those who were not able to attend this meeting.</li> </ul>
<b>Damp Matchbox</b>	Where the entire community is not interested to do anything to stop OD	<ul style="list-style-type: none"> <li>Tell them that you are surprised to know that they are willing to ingest each other's feces despite this being brought to their attention.</li> <li>Exercise your better judgment in deciding to ask whether you can take a photograph of the community as one who is not willing to take local action on OD.</li> <li>Ask them if they are interested to visit a nearby community where OD has been made history by the community members themselves.</li> <li>With apologies, relate a story of a funny but culturally appropriate story to close the meeting.</li> <li>Thank them all and leave.</li> </ul>

## Tips for Facilitators during Triggering

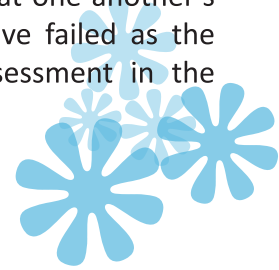


- Clarify roles among the members of the facilitating team.
- If possible, use the local dialect in facilitating the meeting. Ask them the local words for “feces” and “defecation.” Casually use these words throughout the discussions.
- Strive to make the sessions light and interesting. Crack jokes and tell funny stories but be mindful not to be too offensive. Although the objective is to shame the community, they should come out of the session with a resolve to change their ways – not discouraged from participating in these kinds of activities in the future.
- At this stage, do not lecture or try to educate the community about the diseases caused by OD, the agents of contamination, or the need for hygienic practices.
- Pursue opportunities to probe why there is a resistance to constructing latrines. In many cases, the community will cite the cost entailed. Be ready to explain resource requirements for a low-cost latrine. Illustrate (draw on a flipchart paper) the design and emphasize that it has been developed by poor people in the poorest countries of the world.
- Do not prescribe models of latrine. Remain focused on the central idea of CLTS – which is to initiate local action in communities to look for viable alternatives to open defecation.
- Never talk about subsidy. At the onset, clarify that you are not there to provide subsidy or support for their construction activities.
- Be alert for the ignition moment. It may happen at any stage in the triggering process. If there is an indication of a collective realization that people in the community are ingesting each other’s feces and this situation will continue as long as they practice OD, there is no need to continue with other planned activities.
- During the ignition moment, arguments may be observed among the members of the community. Do not interrupt or advise. Quietly listen to the discussion.
- If asked questions, do not provide answers. Tell them that as an outsider, you have little knowledge about their local situation and that they would know best what to do for their community.



## Tips for Facilitators during Triggering

- Constantly remind them that they are free to choose the action to pursue after the triggering activity, including continuation of the practice of OD. Explain that you have understood how the community is practicing OD and ingesting each other's excrement despite being fully aware of the implication of the fecal-oral transmission.
- Do not worry if no one proposes to start any local action to stop the practice of OD. Simply thank them and inform them that their community will be recorded as one where people are willing to continue open defecation and eat one another's feces. Do not take this to mean that you have failed as the activity has initiated the process of self-assessment in the community.



## STAGE 3. POST-TRIGGERING

Triggering without follow-up is bad practice. Whatever decisions and actions are taken upon igniting the community needs to be encouraged and supported. Internal dynamics in communities may prompt them to change course and pursue a different direction. Hence, facilitators have the responsibility of seeing that efforts are sustained by ensuring they follow-up.

The major activity in the post-triggering stage is monitoring and evaluation (M&E). Consistent with the community empowering approach of CLTS, the community plans and executes its own monitoring scheme. Participatory M&E provides no formula, blueprints, or guidelines but establishes a clear set of objectives and indicators for success or failure. Mechanisms for learning, correction, and adjustment are built into the process.



Participatory M&E utilizes the Spot Map as a very important monitoring tool. This encourages the community by providing a visual picture of how they are progressing towards a ZOD status.

M&E focuses on two aspects: process (management and capacity building) and physical progress (implementation of planned activities).





Some identified indicators of process and progress in communities are:

- Number and range of natural leaders who emerge women, men, youth, and others
- Volunteers, traditional midwives, and others becoming active
- Better off people coming forward to help those who are weaker and poorer
- Formation of new groups
- Revival of traditional communal cooperation groups
- Households constructing latrines jointly
- Sharing latrines between neighbors or relatives or traditional or other groupings
- New slogans, songs, and poems
- The emergence of community sanctions against OD
- Communities providing collective help to those with difficulties
- Sanitary hardware given as gifts (e.g., to newly married couples)
- Increased sales of sanitary hardware in markets
- The emergence of different models of latrines
- Use of non-conventional materials for latrines
- Reduction in diarrheal diseases and sales of medicines for these
- Decreasing health expenditure and income of village quacks
- Fewer flies



## Conducting Follow-Up Meetings

In conducting follow-up meetings, it is important to bear in mind that CLTS is a community-led and not outside institution-led approach. Therefore, as a general rule, it is recommended that:

- One or two staff should visit earliest where response has been strongest (a few days after triggering) and later in communities where it has been weakest (after 2 weeks).
- Where positive action begins, extend help and facilitate carefully. Encourage!
- Help should not be extended in ways that will induce dependence on external institutions.

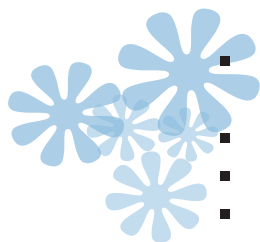
## Monitoring and Sustaining ZOD Status

Verification entails inspection to assess whether a community has achieved ZOD while certification is the confirmation and official recognition of the status. Communities undergo a rigid process of ensuring the ZOD status. Aside from established progress and success indicators, other verification activities have been deemed effective, including, among others, visits to former OD sites, dawn, or after-dark check-ups, latrine inspections, and following animals that eat faeces.

This strict validation is being conducted to guard against cases of deception where communities seek certification although not yet of ZOD status to be able to avail of incentives linked to the status.

Other measures include:

- Revolving membership of the verification and certification team;
- Conducting surprise visits;
- Undertaking more than one check up visit;
- Requiring all members of the committee to sign up for any verification and certification; and
- Not granting official certification unless ZOD status has been sustained for six months.



Mechanisms for rewards and incentives to promote CLTS. Philippine experience has shown the effectiveness of non-monetary rewards in driving communities to achieve ZOD status. Some examples are programs such as:

- Putting up a signage at the entrance of a community declaring it to be a ZOD area
- Becoming a site of Lakbay Aral (model of good practice)
- Recognition of every household constructing toilet facility through the local radio station
- Nomination for the National Search for Barangay with Best Sanitation Practices
- Grant of a token of appreciation from the National Government

Sustainability of ZOD is indicated by a general trend of the community to go up the sanitation ladder.





## STAGE 4. SCALING UP AND GOING BEYOND CLTS

Scaling up is the process of broadening the scope and spread of CLTS implementation through institutionalization, thereby increasing the impact of the intervention. This translates into designing and implementing CLTS that is large-scale (nationwide and time-bound), sustainable, and impactful.

Some scaling-up initiatives have been suggested, including:

- Provision of options for informed choice
- Social marketing to link the community with sources of low-cost toilet materials and services
- Community participation through general assembly in the re-formulation of related local ordinance
- Harmonization of rewards and incentives
- Integration of CLTS to bigger health and sanitation programs
- Development of supportive policies and ordinances at the local level

## DEFINITION OF TERMS



**TAE** – Filipino word for human excreta or solid and liquid waste from humans. Also known as feces or fecal matter.

**OPEN DEFECACTION** – The practice of passing feces outside a latrine or toilet, or in a natural environment (open field, body of water, etc.) and leaving the fecal matter exposed.

**SANITATION FACILITY** – A facility that handles and disposes fecal matter at the point of origin (on-site) or at a remote location (off-site).

**PRE-TRIGGERING** – The conduct of activities to identify and prepare a local community for the CLTS triggering. The process by which a community is identified and prepared for the CLTS triggering activity.

**TRIGGERING** – The process of facilitating a local community's analysis of its own sanitation situation and profile, using participatory exercises and tools, with the objective of eliciting a realization of the adverse effects of open defecation and a decision to take action to stop the practice.

**PARTICIPATORY RURAL APPRAISAL (PRA)** – An approach to assessment and development in a rural setting that involves local community participation. It includes methods, approaches, and behaviors that enable people to express their own ideas and reflect on and share their own needs and priorities. The community is empowered to be involved in actions, monitoring and evaluation of goals, projects, processes, and outcomes.<sup>4</sup>

**DEFECACTION AREA TRANSECT** – A CLTS triggering activity where members of a local community guide the facilitator in the visit of areas where they defecate.

**DEFECACTION AREA MAPPING** – A CLTS triggering activity where members of a local community draw a map of the village/neighborhood and indicate areas of open defecation.

**CALCULATION OF TAE** – A CLTS triggering activity where members of a local community estimate the volume of tae that is produced by its community on a daily, weekly, monthly, and yearly basis.

<sup>4</sup> (GS@RMIT, [http://global.rmit.edu.au/encyclopedia/part\\_rural\\_app.php](http://global.rmit.edu.au/encyclopedia/part_rural_app.php))



**CALCULATION OF HOUSEHOLD MEDICAL EXPENSES** – A CLTS triggering activity where members of a local community discuss and estimate the amount of money spent on treatment of diseases caused by the practice of open defecation.

**DIAGRAMMING FECAL-ORAL CONTAMINATION ROUTE** – A CLTS triggering activity where the facilitator leads an analysis and illustration of how faeces is transferred in the community. The diagramming is normally followed by a demonstration of how food and water are contaminated by faeces from open defecation.

**IGNITION MOMENT** – The point in the triggering process where the community collectively realizes the risk of open defecation and demonstrates disgust over the practice. This is established with a verbalization of one or more members that they are eating each others' faeces and that they want to stop the practice of OD.

**ZOD PLANNING** – The process of facilitating the development of a local community's plan for achieving Zero Open Defecation (ZOD) status.

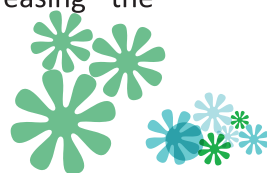
**ZERO OPEN DEFECTION** – The state of having completely eradicated the practice of open defecation in a local community. It means that no faeces are openly exposed to the air.

**POST-TRIGGERING** – The process of ensuring sustained action in a triggered local community through follow up and monitoring of ZOD plan implementation. This stage ends with the certification of the community as having achieved ZOD status.

**VERIFICATION** – The inspection conducted to assess whether a community has reached ZOD.

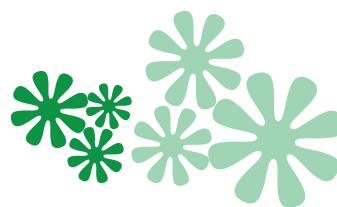
**CERTIFICATION** – The official confirmation and recognition of ZOD status.

**SCALING UP** – The process of broadening the scope and spread of program implementation through institutionalization, thereby increasing the impact of the intervention.





## DEFINITIONS OF TERMS



**TRAINERS OF CLTS FACILITATORS** – Those who provide training to field personnel to equip them with competencies to be able to trigger and facilitate CLTS with local communities.

**CLTS FACILITATORS** – Those who work directly with the communities to trigger CLTS and provide post-triggering follow-up aimed at guiding the community towards its goal of attaining ZOD status.

**CLTS TRIGGER PERSON** – The facilitator who facilitates the triggering process. He/She may not necessarily be responsible for conducting follow-up activities with the local community.

**NATURAL LEADERS** – Individuals who take an active role in the process of implementing CLTS within and outside their community. They emerge and are identified during triggering. Also known as Spontaneous Leaders.

**COMMUNITY CONSULTANTS** – Natural leaders who have successfully led their communities towards ZOD but continue to work with their community in tackling other issues or transforming other neighboring communities.

**CLTS HANDS-ON TRAINING** – The method used in training CLTS facilitators on opportunities for immediate application of knowledge, attitudes, and skills acquired in the classroom setting through actual conduct of triggering sessions.

