

Nepal

School-led total sanitation seems unstoppable

*By Shova Adhikari, Namaste Lal Shrestha,
Madan Malla and Guna Raj Shrestha*

Chitwan, Nepal: Shanti lives with her young son in Birendra Nagar VDC (Village Development Committee, or area covered by a VDC), in the Chitwan district of Nepal. Chitwan is in the Terai, or lower-lying plains area of

Rastriya Primary School, always fearful that if she upsets the local community they will send her packing.

This school, where her boy attends Grade 11, occupies an important place in Shanti's life. Firstly, it represents the family's future hopes: both Shanti and her husband are illiterate, and she is determined that her son – her one and only child – will succeed in building a different kind of life via education. And secondly, the school's outreach programme for healthy living has impinged on Shanti's own lifestyle and that of other women in the neighbourhood. All the houses in the designated 'school catchment' – a total of 244 – are targeted for full sanitation by 2009, meaning that they will all have abandoned the practice of 'open defecation' and built their own toilet.



The Shri Rastriya Primary School Child Club

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this mountainous country, where animal and plant-life abound and the landscape is verdant. But Shanti's situation is hard. She is a dalit from the poorest stratum of society, and a migrant with no right to permanent membership in the community. Her husband has gone to India to work in whatever casual labouring job he can find. She occupies a flimsy house on public land behind the Shri

The Shri Rastriya Primary School was originally targeted by the UNICEF-supported School Sanitation and Hygiene Education (SSHE) programme. This imparted a sense of responsibility among students for their own hygiene and sanitary behaviour. They took on duties cleaning the school, sweeping the compound, maintaining the toilet blocks, and other actions to improve the school and feel pride in it. Child Clubs were formed – Nepal has been a pioneer in child participation – and became a positive force for development, drawing upon their teachers' and parents' advice, and running campaigns and awareness creation activities to promote public health. Schools also involved Parent-Teacher Associations: Shanti is a member of the PTA at Shri Rastriya Primary School.





Children and women participating in a sanitation promotion rally

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Building on strengths

Until the mid-1990s, little effort was made by the Nepali government to tackle the question of basic sanitation. A 1994 survey reported latrine coverage of only 12 per cent. In 1998, a national sanitation steering committee was set up involving many governmental and non-governmental partners, and the following year, a Basic Sanitation Package (BSP) was developed and carried out in most districts where water supply programmes were underway. The BSP addressed the problems facing poorer citizens in managing to afford the cost of a toilet – 38 per cent of Nepalis live on less than US\$1 a day – by including provisions for revolving loan funds and financial incentives.

In 2000, yearly celebration of National Sanitation Action Week (NSAW) and the School Sanitation and Hygiene Education (SSHE) programme was launched to promote school and community sanitation and hygiene. Within the next few years, 1,000 schools took up SSHE and began focusing on child- and woman-friendly facilities. In particular, they looked at problems facing girls. Lack of separate toilets where they could deal in privacy with menstruation kept many girls away from school after puberty. They felt too exposed to boys' taunts and feared sexual harassment.

Following the international articulation of the Millennium Development Goal for sanitation in

2002, Nepal expressed determination to achieve universal toilet coverage by 2017. Recognizing the success of SSHE and the way in which children in Nepal were proving themselves as agents of change, UNICEF proposed a new model to speed up the pace of coverage. This was School Led Total Sanitation (SLTS), and it was designed to build on the existing strengths of local and internationally-reputed programmes. The approach incorporated basic elements of the School Sanitation and Hygiene Education (SSHE) programme, the reward and revolving fund aspects of the Basic Sanitation Package (BSP), and the participatory tools and techniques of Community-Led Total Sanitation (CLTS) adapted from elsewhere.

Since 2005, the SLTS programme has been set in motion in 15 districts of Nepal where UNICEF is active. Altogether, SLTS is reaching out to 60,000 households with 300,000 people, with leadership coming from 200 schools – of which Shri Rastriya Primary School is one. There are tiers of sanitation steering committees at regional and district levels, performing supervisory and mobilizing roles. But the key work on the ground is done by school-based Child Clubs and sanitation sub-committees at the community level. They are the bodies that take the lead in most activities, with support from teachers, Parent Teacher Associations (PTAs), school management committees, local women's groups and other community-based organizations.

The implementation of SLTS

In the preparatory phase, the district school sanitation committee selects the schools for SLTS – they have to have been active in school sanitation for at least a year – and deploys staff to brief the school and community. The Child Clubs are geared up and sanitation sub-committees formed. These have between seven and 11 members, and include a head teacher, a Child Club chairperson, a representative of the PTA and of the school management committee. They map the households in the 'school catchment area' and find out whether they have toilets. Then they develop a SLTS action plan. Training is given to all those taking an implementing role, and publicity materials developed for use during the campaign.

In the implementation or 'ignition' phase, the facilitators hold meetings in the communities, just as in CLTS, and talk openly about defecation. But instead of 'walks of shame' around open defecation



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sites, they conduct ‘walks of praise’ intended to build on people’s strengths and self-respect. They seek a positive response to encouragement and motivation, rather than using words associated with shame and humiliation. Flags are erected to mark open defecation sites. Flow diagrams are used to estimate the volume of dangerous material lying about and chart the paths of disease. The outcome is a commitment to abandon ‘open defecation’ and construct household toilets.

Support for implementation

Supportive activities continue over the implementation phase. Rules on sanitation and hygiene practices are formulated in the school and community, with fixed rewards. Varied advocacy and awareness generation activities are carried out in schools and communities using different means and media. Information boards are set up and brochures distributed. Fund-raising generates resources for helping truly indigent families. Special campaigns are held during National Sanitation Action Week, with demonstrations, videos and creative programmes such as street dramas and song competitions. Child Clubs organize exchange visits.

Most importantly, the revolving loan fund is established, with support from UNICEF, government and the Village Development Committee (VDC). In Birendra Nagar VDC where Shanti lives, the revolving fund was supplied with Rs. 200,000 (US\$2,900), and each family could be given a loan of about Rs. 4,000 (US\$58.00) for a period of six months to one year without any interest charge. The cost of a moderately priced toilet is around Rs. 5,000 (US\$72). So far, there is a 100 per cent record of loan repayment. ‘People who are poor are very careful with loan repayment because they fear losing their house and their land if they fail,’ Shanti explains.

In Shanti’s case however, obtaining a loan is difficult. ‘The users’ committee is reluctant to disburse the loan to a squatter family. Once the loan is given, the implication is that we have been granted legal recognition to settle in the area for ever.’ Here is

an indication that the poorest, the dalit and landless people may be excluded from support – even though they are the ones who need it most. Shanti is hoping that her husband will send her enough money to build her own toilet to get around this problem.

In the meantime, she is sharing the toilet of one of her neighbours, Asha Ram Chaudhary. Asha was able to take a loan, and Shanti reached an understanding with him that if she provided building materials and gave her labour, she could use the toilet until such time as she could build her own. ‘I would definitely feel proud to have my own toilet,’ she says. But for the time being, she is one of only three households sharing their toilets, while another 56 still have temporary or rudimentary facilities. The rest – 185 families – have all built permanent facilities.

When there is no further ‘open defecation’ in a school catchment, the flags can be taken down and the community declared ODF: open defecation free. So far, this has happened in 75 school

Within 40 days, 71 toilets had miraculously been built. The Headmaster, together with some of his staff, then went about digging pits to bury the dried and scattered faeces still lying around in the fields.

‘We have done it, Sir!’

The community of Dakshin Ayodhyapuri lies in a remote part of Chitwan. The Chepang and Praja people who live in these forests are tribals without landholding status, and are among the country’s most underprivileged. Despite the difficulties of introducing sanitation in such an area, the primary school Headmaster determined in 2007 to make the school catchment area of 126 households ‘open defecation free’. The Headmaster, teachers and students visited every single home to discuss construction and use of toilets.

Within 40 days, 71 toilets had miraculously been built. The Headmaster, together with some of his staff, then went about digging pits to bury the dried and scattered faeces still lying around in the fields. So impressed, and so ashamed, were the inhabitants to see the Headmaster cleaning up their shit that they insisted in taking over the job from him. The Headmaster then offered a prize to any student who found faeces lying around and reported the culprit’s name.

The long vacation then intervened. After weeks away from school, the students rushed to greet the headmaster, clinging to his arms to be the first to report that they had rigorously used the new toilets and washed their hands with soap after defecation. Now, they said, they would be the ones to give a prize to their Headmaster if he could spot any visible trace of a public nuisance. ‘Open defecation free’ status has been gained, largely thanks to the leadership role the Headmaster in Dakshin Ayodhyapuri personally assumed.





An Open Defecation Free celebration in Chitwan District

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catchments, 25 settlements and four VDCs. Another 125 school catchments are close. Each school responsible for a catchment receives an award of Rs. 10,000-20,000 from the district committee. Reports are given to the authorities and the media, and then regular monitoring begins. Suggestions will be made for upgrading where a toilet is very basic and liable to collapse, fill up, or become unpleasant. Emphasis is also given to hygiene behaviour and washing hands with soap.

SLTS outcomes

Apart from the progressive construction of toilets, there are many positive outcomes from SLTS areas. The programme has built new bonds within communities, mobilizing students, teachers and households for joint action. The materials needed for construction – pans, pipes, fittings and cement – are available in local shops, enabling them to expand their business.

A new pride is visible in ODF communities. People have started sweeping their yards more frequently, organizing waste water disposal systems, digging pits to bury their garbage, and setting up tables

with basins of water and soap for hand-washing. Among children in school, attention to hygiene has markedly improved. Where there are difficulties in overcoming barriers to full sanitation, the schools and communities have come up with their own solutions. Their joint ownership of SLTS has generated resources, capacity, and management experience to meet the ODF goal. This characteristic of SLTS means that there is a good chance that progress and behavioural change will be sustained.

A vitally important question concerns the impact on health. In the end, the adoption of toilets is supposed not only to enhance self-respect, but to bring about a reduction in disease. The results in this context appear encouraging. The number of cases of illness in ODF communities is definitely perceived to be lower, as is the number of children failing to come to school because of diarrhoea or worms. Girls not attending school because they are poorly – meaning that they are menstruating, and dare not attend in case of being seen to bleed – are also fewer. The health post records and those of community health volunteers show reduced frequency of diarrhoea in the ODF-declared communities. In one VDC sub-health post, reported cases of diarrhoea in the under-fives went down from 7% to 5% between 2005 and 2007.

There is still a long way to go to reach universal sanitation in Nepal and many barriers to overcome. These include the long political resistance to seeing sanitation – as opposed to water – as any kind of national priority. But for those who are skeptical, there is now evidence that placing the problem in the hands of schools and communities and enabling them to take the lead, can have a transformative effect on the health and morale of hundreds of thousands of people.

Contact: UNICEF
3 United Nations Plaza
New York, NY 10017 USA
www.unicef.org/wes



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