Introduction
The sustainability of open defecation free (ODF) status in rural areas where toilets frequently collapse is a global concern.

In Tanzania, SNV has developed an innovative approach called Jirani sanitation groups (JSGs). 'Jirani' means neighbour and the approach is based on community support; if a toilet collapses another can be built with the help of neighbours.

Jirani leaders monitor the progress of the 10 households closest to their homes and sensitise their neighbours on the importance of building, taking care of, and improving sanitation and handwashing facilities. The leaders form committees that monitor sanitation and hygiene progress on the ground and report monthly to the village government.

The JSGs intervention was designed by SNV Tanzania under the Sustainable Sanitation and Hygiene For All (SSH4A) programme. It offers a new and innovative approach for sustaining ODF status in rural areas by making people agents of change in their communities. It strengthens the link between the community and the different levels of government.

This case study presents the JSGs intervention, providing practical information for its implementation and a brief discussion on the challenges and lessons learned by the SNV Tanzania team and their partners on the ground.

About SNV Tanzania and the SSH4A programme
SNV has been present in Tanzania for over 40 years, aiming to achieve inclusive growth and development through effective solutions with local impact.

The Sustainable Sanitation and Hygiene For All (SSH4A) programme is SNV’s approach to ensure equitable and sustainable access to improved sanitation and hygiene. It supports district-wide rural sanitation and hygiene services. Developed in 2008, the SSH4A approach is
currently being implemented and scaled-up across 15 countries in Asia and Africa.

In Tanzania, the SSH4A programme has been implemented since 2014 in Arusha Rural, Babati, Chato, Geita, Hanang, Itilima, Karatu, Kwimba, Maswa, Misungwi, Monduli, Msalala/Kahama and Shinyanga districts. The programme integrates best practices in sanitation demand creation and supply chain strengthening, hygiene behaviour change communication, governance, gender and social inclusion. SNV focuses on strengthening the capacity of local stakeholders to plan, implement, monitor and sustain sanitation and hygiene interventions.\(^1\)

**About the intervention**

**Objective:** Improve the sanitation status of the community by empowering neighbours to: i) make regular household visits to monitor the availability and condition of sanitation and handwashing facilities, and hygiene behaviours; ii) encourage the improvement of toilets; and iii) create a reporting channel to share sanitation and hygiene issues from the village to the district.

![Materials needed: government registers, notebooks, pens and pencils, t-shirts for Jirani leaders and sub-village heads (if budget allows)](image1.png)

**Practical information:** The people involved are the **Jirani leaders** (volunteers chosen by neighbours from the sub-village\(^2\)) who raise awareness and monitor 10 households from their sub-village and fill in a form each month with specific sanitation and hygiene information about the households. A **sub-village head** (a volunteer chosen by the sub-village, who is often the chairperson) monitors the data collected by the Jirani leaders and fills in a government sanitation register, which must be sent to the **Village Executive Officer (VEO)** each quarter. The VEO collects the registers from all the sub-villages and consolidates the data into a form (Form A2) and sends it to the **Ward Executive Officer (WEO)** who consolidates the data in a form (Form 3A) and submits it to the **District Health Officer (DHO)** who collects the 3A forms, makes a quarterly district report and uploads the information in the National Sanitation Management Information System (NS-MIS) of the Ministry of Health, Community Development, Gender, Elderly and Children which can be accessed by the national and regional government.

The Jirani leader should make household visits at least once in a month; however, it is expected that as leaders are neighbours living near the houses they monitor, they will visit them more frequently. The Jirani leaders have monthly meetings with the Jirani sub-village head to review progress and share the monitoring information they have collected.

\(^1\) SNV 2017.

\(^2\) The sub-village is understood as a group of houses that form part of the village.
Implementation highlights: The JSGs are introduced in community meetings, where the advantage of having Jirani leaders at the sub-village level is explained. The leaders are chosen by the community to make the intervention acceptable and sustainable.

Jirani leaders should: i) reinforce hygiene behaviours by raising awareness about the importance of having and improving household toilets and handwashing facilities; ii) collect sanitation and hygiene information about their 10 assigned households each month; and iii) input this information in their notebooks and share it with the sub-village head.

At the end of each month, there should be one report per sub-village submitted to the VEOs, and once every three months, a village report submitted to the WEO and DHO.

The Jirani leaders’ notebooks follow the same format as the government registers, where the sub-village heads later fill in the data submitted by the Jirani leaders and send it up to the VEO. Both the Jirani leaders’ notebooks and the sub-village heads’ registers are mainly based on observations and include the same monitoring indicators tracked by the government, together with the names of the head of each monitored household. Information is recorded in the same way: writing a (√) if the facility/condition monitored is present in the household or an (X) if it is missing. The only difference between these two documents is that the registers are already printed and the notebooks must be prepared by each Jirani leader.

Besides the monitoring indicators (presented below), Jirani leaders also observe and ask questions about hygiene behaviour. This information is not added to the form they submit to the sub-village head.

The village health workers facilitate a day of training to explain to the Jirani leaders how to collect the data and make the reports. Depending on the budget, at least one refresher training session is held each year.

Meetings with the sub-village heads and refresher training improve the accuracy of data collection and filing. Photo: SNV Tanzania

Tip: It is necessary to motivate Jirani leaders to have their own toilets and handwashing facilities first, for them to lead by example. This also incentivises communities to build their own facilities and sustain their behaviours over time.
Monitoring indicators

* Number of household members

* Water safety:
  Is there a special container for storing safe drinking water?
  Is the drinking water safely managed? (boiling water, using chlorine or a filter)

* Toilet:
  Type of toilet:
  - Traditional pit latrine
  - Traditional improved pit latrine
  - Ventilated improved pit (VIP) latrine
  - Flush/pour flush latrine
  - Ecological latrine
  - No toilet
  Floor:
  - Washable floor (cement, hard plastic, wood or metal floor)
  Faeces prevention:
  - The pit/toilet does not leak
  Privacy:
  - Does the toilet have walls?
  - Does the toilet have a fixed door?
  - Does the toilet have a roof?

* Is the toilet used by more than five households?

* Handwashing facility:
  Is there a handwashing facility outside the toilet?
  Is running water available?
  Is there soap?

* Defecating outside of the toilet:
  Are faeces visible on the floor, wall or around the drop hole?
  Are faeces visible around the house/compound?

Outcomes

The JSGs have raised awareness of sanitation and hygiene in their communities. Visits to their sub-villages reveal whether people are sustaining their hygiene behaviours or if there are slippages and toilets are collapsing. Jirani leaders receive support from Jirani sub-village heads and local government officers, and they inform them about the community sanitation status.

Data collection has been simplified, and the sanitation and hygiene data collected by the Jirani leaders is disaggregated which provides evidence for the design of new policies and programmes.
"The number of constructed toilets and installed tippy taps is higher, because the community is following us. 'Jirani' means neighbour. The people who inspect you are near to you, so you have to improve."

Marcus Calistus Myinga, Environmental Health Officer, Misungwi district.

**Sustainability of the intervention**

There are several lines of monitoring and reporting.

First, the sub-village head monitors the Jirani leaders. The sub-village head visits the households together with the leaders, collects the data from their notebooks, and makes follow ups to ensure the information is accurate. Jirani leaders sometimes swap their household data to cross-check that the information submitted by their peers is correct.

Second, the VEO supervises the sub-village heads. The VEO cross-checks the information from the notebooks and registers, and visits the households to double-check that the information from the register is correct.

Third, WEOs and DHOs monitor the impact of the intervention by visiting the households. The local capacity builders and SNV advisors also visit households to check progress, carry out spot checks and observe how the JSGs are working; later, they write an independent report with an assessment of the intervention.

Fourth, a household survey reports on the progress (as part of the reporting in DFID’s SSH4A funding programme), and the sustainability indicators from SSH4A are applied to report on the extent to which vulnerable groups are being supported and included in the intervention.

Sustainability is promoted by cross-district learning events, in which Jirani leaders go to other villages to motivate peers. Jirani sub-village heads also invite influential visitors to their communities. This helps to encourage communities to maintain ODF status and fosters confidence in Jirani leaders.

Jirani leaders visit and monitor vulnerable households to become aware of their needs. When a household has a difficulty, the Jirani leader informs the sub-village head and together with family members and neighbours they find a solution. If a vulnerable person does not have any relatives, it is the responsibility of the community to act, for example, fundraising to build their facilities.

**Remaining challenges**

**Lack of income.** Some Jirani leaders want payment for their work. This shows a failure to understand the concept of neighbours supporting each other.

**Partial knowledge and training.** In some cases, low education rates hinder data collection. Some Jirani leaders are unclear on the data they must collect or how to complete their forms. Others are unfamiliar with the different types of latrine options.
Limited communication between JSGs and government officials. In some districts, communication between the Jirani leaders, the sub-village heads and VEOs is difficult as they are away from home most of the time. During the cultivating season it can be hard for Jirani leaders to find time to visit households and attend team meetings as frequently as during the rest of the year.

Unstable community leadership. In communities where there is no organised leadership it is difficult to establish and maintain JSGs. Without sub-village heads and VEOs motivated to support the Jirani leaders, the initiative is unlikely to succeed.

Low acceptance of the intervention. In some of the districts, JSGs have met with political opposition. Jirani leaders have also experienced resistance when visiting households for the first time; some heads of households did not let them enter their houses.

Scarcity of resources. Transportation systems for government officials were missing in some villages. These are necessary to visit households and verify progress daily.

Reflections
Firstly, financial incentives will not be sustainable in this setting. Jirani leaders reportedly volunteer for the benefit of themselves and their communities. One Jirani leader said, "...there is no income but seeing that it is for our own benefit motivates us. We are doing it for our own health." Jirani leaders should have no more than 10 houses to monitor, as the intervention is simpler to follow and has an easier reporting channel that way. Having fewer households to monitor and report on reduces the workload and requests for payment.

Secondly, to address Jirani leaders’ knowledge gaps, refresher training is offered to them during the year by the sub-village heads as well as by VEOs and community health promoters. Having more support from the sub-village head and greater flexibility to do their work during the cultivating period can help Jirani leaders manage their workload.

Thirdly, there is a compelling need to advocate the importance of having JSGs at the beginning of the implementation phase, in both the community and government, to improve success. Sensitising the higher government levels and working closely with other government departments can contribute to having more resources to improve transportation systems. In one of the districts, motorbikes were given to district health officers for monitoring sanitation and hygiene outcomes. This highlights the importance of engaging government officials on this issue.

It is important to highlight that the JSGs intervention is contributing to identifying and supporting the most vulnerable and marginalised community members. Jirani leaders have an accurate list of households and their members and make regular house visits. They raise awareness of vulnerable and marginalised people in the community to generate communal support for those most in need.
Recommendations

- Discuss the JSGs intervention with political leaders. Explain the advantages of sanitation and hygiene. Encourage them to talk with the community.
- Collaborate with DHOs, agricultural officers, education officers and social workers to monitor sanitation and hygiene outcomes. For example, agriculture officers visiting households could check if there are sanitation and handwashing facilities in place.

**Having a contact list of the Jirani leaders’ mobile phone numbers would facilitate coordination with the sub-village heads and VEOs, making it easier for them to stay connected and organise meetings. This would also help with oversight of the Jirani leaders and monitoring by the sub-village heads and VEOs.**
- Jirani leaders should receive refresher training during the year which involves having information on new technologies in order to promote them. Taking Jirani leaders to other villages to train peers is a good opportunity for them to learn from each other.
- In one of the districts, some Jirani leaders designed their own models of toilets, incentivising the community to improve faster by developing new options and innovative designs.
- In some villages, JSGs are involved in other community activities besides supervising sanitation and hygiene outcomes. For example, Jirani leaders are supporting neighbours with farming and harvesting in Misungwi district, broadening the focus of JSGs and encouraging them to stay longer in the community.

Conclusion

The fact that Jirani leaders are chosen by the community helps to motivate people and ensures accurate information can be collected about sanitation and hygiene progress.

The concept of JSGs is spreading fast. To reach scale, it is crucial to sensitise governments and communities so they fully engage in the intervention.
References

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