



Reaching the last mile and sustaining ODF: Insights from Asia

INTRODUCTION

The Swachh Bharat Mission (SBM) has made significant progress in its countrywide drive for making India open defecation free (ODF) over the last four years. Simultaneously, it aims towards reaching the last mile so that its ODF status, when achieved, remains sustainable. This paper is a review of the rural sanitation experiences of select Asian countries* that ran a scaled-up (country-wide) rural sanitation drive, focussing on the challenges faced and measures initiated for reaching the last mile. It also includes key elements for sustaining ODF including critical behaviour changes, planning for the post-ODF phase and consistent political will. The review suggests that the last mile journey was long and arduous for all countries, despite their early successes especially when it meant paying special attention to the needs and specifications of the poorest especially in the most vulnerable situations.

REACHING THE LAST MILE

The journey to becoming open defecation free (ODF) for several Asian countries suggests that reaching the last mile takes time and needs concerted efforts. The graph traces the journey of four Asian countries - Bangladesh, Thailand, Vietnam and Philippines - that had achieved 80% sanitation coverage by 2000 (Figure 1). Covering the last 20% of the population with sanitation services has taken more than fifteen years in each of these countries. By 1999, Thailand, under its public health program, covered 98.9% of its population for basic sanitation. Of the 1% without sanitary latrines in 2000, a vast majority lived in the remote highlands and a minority were poor people using unhygienic pit latrines¹. It took Thailand another fifteen years to reach this remaining 1%².

Nepal intensified ODF efforts from 2010 (Figure 2), reaching 45% of the unserved population with improved sanitation in just five years (2010-2015). The pace of coverage reduced slightly from 2015, with 8% covered in two years (2015-2017), and almost 5% reached over the last year (2017-2018). An ODF sustainability study from

* The briefing note is based on the literature review done for Nepal, Bangladesh from South Asia and Cambodia, Thailand, Indonesia, Philippines and Vietnam from East Asia.



Figure 1: Proportion of population practising open defecation

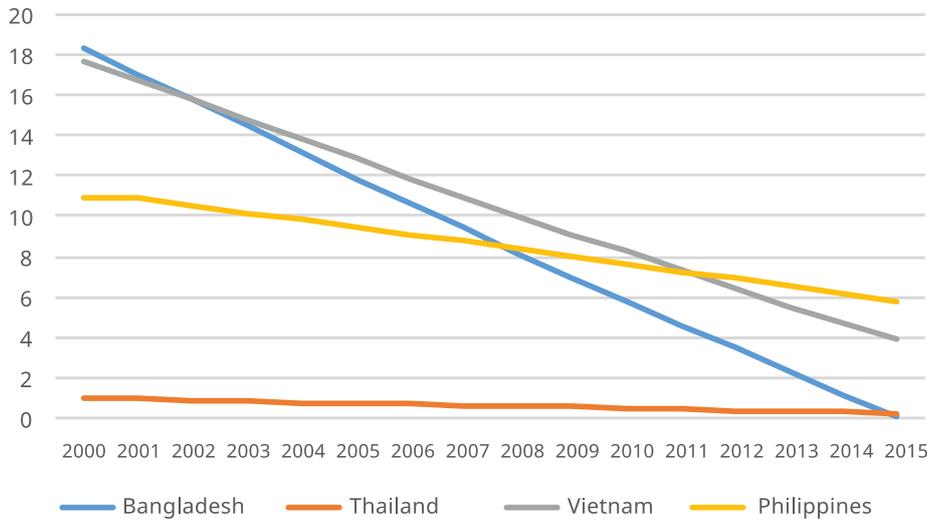
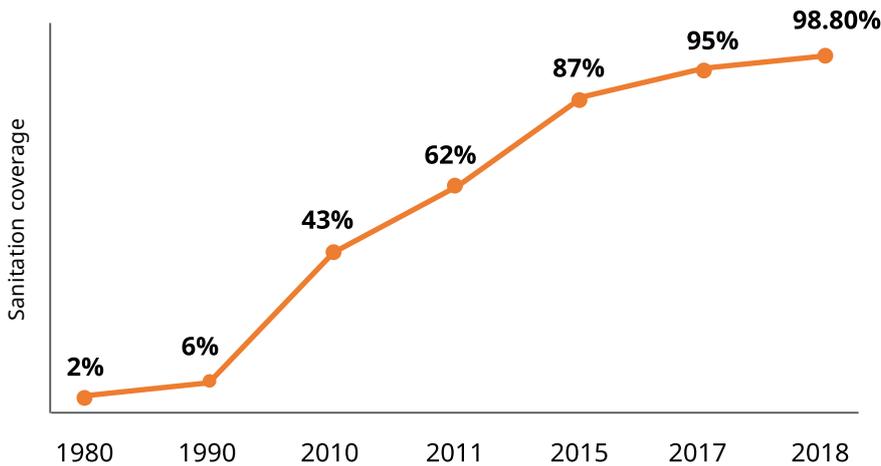


Figure 2: Nepal's ODF Journey



Nepal showed that the Terai region required more focus and strategic follow up compared to the hilly and mountainous areas³. The last mile journey of these countries implies that reaching unserved populations is time intensive, requires consistent efforts, and robust and sustainable strategies for inclusion.

Leave no one behind

The Sustainable Development Goal 6 on water and sanitation aims to achieve access to adequate and equitable sanitation and hygiene for all by 2030, and calls attention to

the special needs of women and girls and those in vulnerable situations. Universal access to sanitation implicitly demands that the sanitation needs of the most marginalised be met through strategic actions, including the identification of unreached groups, targeted financing mechanisms and monitoring.

Identifying those left out

Countries in the Asia region have used several strategies to identify the people in most vulnerable situations, and to provide support for latrine construction. Bangladesh identified

In Nepal, the 2011 Sanitation Master Plan provides proxy indicators to identify disadvantaged groups and ultra-poor households:

1. Households having food sufficiency (security) for less than six months.
2. Households having daily wages as the main source of income.
3. Female-headed households and/or households without adult members and/or households that have physically disabled persons.
4. Other relevant indicators agreed by the community.

and mapped hard to reach locations (Sunderban islands and wetlands, deeply flooded areas, drought prone areas, hills, among others) based on a mix of indicators for hydro-geographical and socio-economic situations. In Philippines, water, sanitation and hygiene (WASH) plans at the community level were integrated into the Barangay Disaster Risk Reduction and Management Plans and Contingency Plans⁴. In a number of countries in the region, sanitation programmes have collaborated with existing targeting systems such as country poverty alleviation or social safety net programmes in order to increase access to basic sanitation for the poorest. In Cambodia and Vietnam, the existing system of government issued certification of poverty (to households) helped in facilitating focused attention to the economically vulnerable communities.

A nuanced understanding of country contexts is critical for the identification of people and groups who may be overlooked by sanitation programmes, for the formulation of strategies

for inclusion, and indicators for monitoring. For instance, some countries may identify migratory populations or the landless as a priority, whereas in other countries, communities living in forested hinterland or in remote mountainous regions may take precedence. Further, within households and communities, certain people may lack access to sanitation (even when facilities are available) because they are aged, female, disabled, or transgender. Nepal, while providing proxy indicators at the national level to identify vulnerable communities, provides scope within the community to ascertain people, families who are particularly helpless. Behaviour change strategies played an important role to overcome the intra-households and intra-community social disparities in access to sanitation.

Policy frameworks and guidelines for addressing last mile challenges

Reaching the last mile and sustaining ODF requires a national framework, clear-cut strategies and institutional commitment. Bangladesh affirmed its pledge to serve hard to reach areas through the 'National Strategy for Water and Sanitation: Hard to Reach Areas of Bangladesh'. The Ministry of Rural Development of the Government of Cambodia prepared a 'National Guideline on WASH for People with Disabilities and Older People'. In Vietnam and Indonesia, education policies provided a mandate to include provisions for inclusive education, having implications for responsive sanitation and hygiene facilities for differently-abled children.

Financial mechanisms

To reach the last mile, Asian country governments have deployed three types of



financial mechanisms: 1) intra-community support (including micro finance institutions); 2) government subsidies; and 3) conditional grants and loans. Notably, many Asian countries provided financial support to ensure coverage of the people in most marginalised situations, when the country was almost ODF (90-95% ODF).

Intra-community support: In Nepal, wealthier community members supported vulnerable households to construct latrines by donating latrines and materials, providing labour for construction and technical support from skilled workers, mobilising finances from other community members, and provisioning of loans or grants^{5,6}. In Thailand, local sanitation committees managed revolving funds for household investments in sanitation (at the community level), with initial capital investments from the Government of Thailand⁷.

The Vietnam Women's Union set up a Sanitation Revolving Fund for women's savings and loan groups that enabled poor households in Vietnam to access small loans to construct septic tanks, toilets or establish a sewage connection. To access the loan facility, households had to be a part of a Savings and Credit Group⁸. In Cambodia, such group loans enabled more families to purchase latrines than having to bear the entire cost upfront through microfinance institutions.

Collective mobilisation and local leadership for financial support at the local level helped in reaching the last mile faster⁹.

Government subsidies: Some countries provided government subsidies only for the last mile coverage. The Thailand government,

for instance, provided subsidies under the 'Sanitation Activity Package' only when the overall sanitation coverage in the country was 80%¹⁰. In some countries, where largely no subsidy strategy was implemented, subsidised materials or labour support was provided to the poorest households only after ODF declaration (Bangladesh), or after 90-95% of households in the community had sanitation facilities (Nepal)^{11,12}.

Conditional grants and loans: Some countries provided poor families grants or loans, only if they participated in other important development schemes (education, health) or if they were a part of a Savings and Credit Group. Philippines integrated sanitation into a large-scale conditional cash transfer program (the Pantawid Pamilyang Pilipino Programme or 4Ps), whereby monthly cash grants (of maximum USD40) were given to the 'poorest of the poor' families for toilet construction on the condition that their school-age children remained in school, and mothers went for regular health check-ups.

Bangladesh, Vietnam and Cambodia have implemented output-based aid by encouraging low-income households to build improved household sanitation facilities and connected them with both local construction contractors and consumer lenders. Households received a consumer rebate upon verification of a properly built and used toilet with a handwashing station. The program also offered conditional cash transfers for the achievement of community-wide improved sanitation coverage benchmarks¹³.

Designing sanitation for excluded or floating villages

Technological innovations were developed with the help of communities, including a small women's forum from the floating communities, in Cambodia. New technologies and/practices related to composting toilets, and bio-digesters were then introduced to families through workshops and focus groups, followed by capacity building of community volunteers and demonstration.

Access to the right technology for sustaining the last mile

In the last two decades, there have been considerable innovations in appropriate technological designs to meet the unique needs of the disabled (e.g., accessible toilets), girls and women (e.g., responsive toilet designs for menstrual hygiene and for pregnant women), and children (e.g., child friendly toilets). However, the application of such innovations in remote areas and unserved communities remained an issue because of restricted accessibility to cost effective products and technologies. Experience from Bangladesh shows that the quality of latrines was an issue, mostly faced by the poor. Low-income families starting out with inferior technology have difficulty climbing up the 'sanitation ladder'¹⁴ with many such latrines becoming dysfunctional, and with challenges related to pit emptying. A recent sustainability study of ODF districts in Nepal showed that there is a lack of masons having knowledge, skills, or motivation to construct disaster and earthquake resilient toilets and to renovate non-functional toilet facilities.

Monitoring for last mile inclusion

Many countries have an identification mechanism for social welfare schemes, but in the journey to achieving ODF, these were not often linked to monitoring for sanitation access. Evidence shows that the monitoring systems at the national level for most of the countries in the region are lacking or having limited availability of disaggregated sanitation access data by groups that are socially and economically disadvantaged¹⁵.

SUSTAINING ODF

Reaching ODF is one of the key milestone in the sanitation journey. However, continuity in the use of sanitation facilities and sustained behaviour change by people after reaching ODF status in large sanitation programmes calls for robust strategies for the post-ODF phase.

Phased approach and keeping the momentum

Sustainability of ODF is dependent upon consistent political will, with national policies and frameworks in place. The vision for sanitation in Nepal, Philippines and Thailand transcends achieving ODF status to planning for

Government of Thailand went beyond universal access to safe household sanitation and designed programs on:

- Public toilet promotion
- School toilet improvement
- Waste management and treatment
- Food safety promotion
- Ecological sanitation



Figure 3: Phased Approach to Total Sanitation in Philippines

the post-ODF phase. Both Philippines and Nepal have adopted a phased approach for the ODF and post-ODF phases with clear indicators for each¹⁶. The post-ODF indicators in Nepal include continued use of toilets, personal hygiene and proper solid and liquid waste management in and outside of the home¹⁷.

A designated lead agency from the government with a clear mandate and budget allocation for sanitation is essential for taking the sanitation and hygiene journey ahead. A clear commitment for achieving ODF at the national level spurs a movement and helps in developing long-term institutional capacity. However, sustaining that momentum is critical for the post-ODF journey. Monitoring helps in reinforcing ODF and in

course correction. In Nepal, ODF sustainability is bolstered by three tiers of monitoring led by the multi-stakeholders groups (Water and Sanitation Coordination Committees), and is used for decentralised sanitation planning mechanisms, cross-sector learning and joint monitoring at scale¹⁸.

Moving up the sanitation ladder

Moving up the sanitation ladder requires inclusive and cost effective designs and technologies, engagement of the private sector and financial institutions, existence of options and services for pit emptying mechanisms and safe disposal of excreta. It is also important to have prototypes of designs for difficult areas as drought prone, high water table or the flood



WaterAid/ Rasel Chowdhury

Community toilet and water facilities in Mollah's Slam, Pollobi, Mirpur, Dhaka, Bangladesh. Where space and funding do not permit household toilets, safe, well-managed community latrines can provide a healthier alternative to makeshift, unhygienic toilets.

prone areas, as well as for the inclusive toilets for people with disabilities, women and children.

Building the capacity of rural entrepreneurs in Bangladesh, Nepal, Indonesia and Philippines through sanitation marketing served to enhance demand for improved products¹⁹. In Nepal, national guidelines for constructing improved toilets recommend that household toilets have permanent structures at least up to the plinth level²⁰. Bangladesh has launched an Institutional and Regulatory framework for Faecal Sludge Management (FSM) therefore prioritising safe management of faecal matter beyond pit emptying²¹.

ODF sustainability necessitates financial mechanisms to ensure the continuity and improvement in the delivery of water, sanitation and hygiene products and services. Additionally, funds are needed for regular operations and maintenance, to replace or upgrade basic toilets, or to move out of shared arrangements. Such investments can increase the likelihood of sustained use of toilets²².

In Philippines, the Phased Approach to Total Sanitation (PhATS) programme was designed to help ODF households and communities upgrade their sanitation facilities beyond ODF. Figure 3 shows the framework to support the phased approach²³.



WaterAid/ Abir Abdullah

Abdur Rashid Shaikh, 62, a person with disability who is using a public toilet at the Gabtoli Inter District Bus terminal, Dhaka, Bangladesh.

Adequate toilets in markets, streets and public places is an important condition for ODF sustainability²⁴. Bangladesh after achieving ODF, realised the need to focus public toilets to sustain ODF, and resultantly, Local Government, Rural Development and Cooperative Ministry allocated budget for the public toilets for Dhaka city²⁵.

Sustained behaviour change

In Nepal, maintaining the ODF status has been accompanied by other hygiene and sanitation behaviour related actions such as handwashing with soap at critical times and solid liquid waste management. A 'Total Sanitised Ward/ Municipality' is declared in the journey from ODF to post-ODF based on these behaviour change

indicators²⁶. Evidence from Cambodia, Thailand, Philippines, and Vietnam indicates that sustained behaviour change at scale depends on the engagement of local level actors (government officials, health workers, community health volunteers, local governments) for reinforcing messages and practices^{27,28,29}. Thailand is an example of how government can support sustained behaviours over time, for example by incentivising health professionals to continue to promote hygienic behaviour conditional on sanitation facilities³⁰. WASH in institutions, especially in schools, also plays an important role for sustaining and reinforcing behaviour change and social norms on ODF.

CONCLUSIONS

These insights from the review of the sanitation experiences of Asian countries clearly underline the challenges and hardships in achieving the last mile journey, including the need for time and focussed strategies to sustain those achievements. The underlying drivers of exclusion depend upon many other factors including poverty, social and economic inequality, infrastructure development etc. Hence, achieving this critical milestone and sustaining its outcomes requires multi-stakeholders efforts and competencies from diverse fields to address socio-economic issues (e.g., health, education, livelihoods). Sustaining ODF requires continued momentum, and advanced planning for the post-ODF phase.

Key learnings from this review highlights the need for the following:

- Planning for the last mile inclusion requires identifying and addressing the needs of the most vulnerable people, groups and locations. Two approaches may be used in tandem: 1) Using nationally representative data (e.g., Census) to identify social-economic groups that continue to lack access to basic sanitation; 2) Decentralised approaches and micro planning at the local government and community level to identify individuals within households and households within the communities that are yet to be served.
- Defining the post-ODF phase with clear plan, guidelines and advanced indicators for behaviour change in continuum with ODF.
- Strong government leadership for last mile inclusion and ODF sustainability, decentralisation of power alongside grass-root participation, and context-specific policies and programmes.
- Implementation for the last mile and ODF sustainability to be backed by institutional arrangements including policy frameworks, clear strategies and directives at national and sub-national levels.
- Sanitation behaviour change interventions to formulate strategies and messages relevant for ODF sustainability (e.g., consistent latrine use, handwashing with soap at critical times, appropriate solid, liquid waste management, and social norms related to sanitation), and for the unreached populations to encourage sanitation uptake and usage.
- Implementation of cost-effective, context specific and sustainable technology innovations for unserved people and populations through partnerships with the private sector and research institutions. Facilitating appropriate financing solutions including subsidies, loans and grants, intra-community support mechanisms, incentives. This could also be integrated in other social security schemes such as housing.
- Instituting financial mechanisms for moving up the sanitation ladder through retrofitting and improved products, pit emptying mechanisms and planning for safe and appropriate faecal sludge management solutions. Financing operations and maintenance models to sustain institutional and public toilets.



- Monitoring mechanisms for course-correction with regards to last mile inclusion and sustaining ODF, including collection of data that can be disaggregated by socio-economic and geographic markers, to provide clear insights into who all are yet to be covered. Monitoring of ODF status to be carried out at regular intervals over time, to gauge ODF sustainability. Such monitoring to use indicators not just for ODF verification, but for the post-ODF phase as well.

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