

# COMMUNITY LED TOTAL SANITATION AND EMPOWERMENT: THE CASE OF DORZE HYZO COMMUNITY, SNNP REGION OF ETHIOPIA (A PHENOMENOLOGICAL STUDY)

Yenenesh Gebresilase <sup>a</sup>

<sup>a</sup>VITA, Addis Ababa, Ethiopia,

<sup>a</sup> Corresponding author: yanitad2005@gmail.com

© Ontario International Development Agency. ISSN 1923-6654 (print)  
ISSN 1923-6662 (online). Available at <http://www.ssm.com/link/OIDA-Intl-Journal-Sustainable-Dev.html>

**Abstract:** This paper explores phenomena of Community Led Total Sanitation (CLTS) with the aim of understanding the CLTS movement and the contribution it has had on empowering the Dorze Hyzo community. This paper contributes by arguing that community empowerment takes place when the community challenges the social norms and culture, to effectively improve their well being. Using phenomenological approach eight participants were purposely selected and interviewed. The finding revealed that the participants have common understanding about CLTS in that they mentioned it is community-led initiative in which the community undertake its own appraisal and analysis of open defecation situation and resolve to stop it. It also targets the whole community and spreads naturally. Participants also witnessed CLTS is an approach that facilitates a process of community empowerment. It is the strategy for triggering their desire for change, and an opportunity for leadership position, transparent decision making and lesson learning. They also demonstrated feelings of joy, ownership and dignity following celebration of open defecation free with no external support. The aforementioned findings indicate careful selection of CLTS sites and trained external facilitator who guides the process using the full set of CLTS tools are favorable factors behind these achievements. To improve the effectiveness of CLTS, the findings also suggest the need for integrating CLTS into political agendas and national policies, designing comprehensive advocacy session to ensure the support from local political leaders and nongovernmental organization, improving water access, as well as promoting regular monitoring

of progresses, which will pave the way to scale up, greater ownership and sustainability.

**Keywords:** Community Led Total Sanitation, Community Participation, Development, and Empowerment.

## I. INTRODUCTION

Sanitation is essential for life, health and human dignity. When human beings do not have access to sanitation facilities, they suffer a lot in the overall socio-economic and environmental existence. The main health problems, especially in developing countries like Ethiopia, are results of poor access of potable water, poor hygiene and sanitation practices. In these cases, sanitation is a basic necessity that affects everyone's life. Proper disposal of household waste is of critical important to prevent feco-oral and vector borne diseases [1] [2].

Realizing the critical importance of sanitation facilities many countries have taken different measures to increase sanitation facilities to people. As per UNDP 2007, however, it is estimated that 2.6 billion people (more than 40% of the world population) defecate in the open or in unsanitary places [3]. The Joint Monitoring Report (JMP) also indicated that between 1990 and 2006, the proportion of people, globally, without improved sanitation decreased by only 8 percentage points. The lowest coverage is in sub-Saharan Africa, where only one-third (31% of the total population) of the population uses improved sanitation. The report further indicated at that rate, the world will not achieve even half of the MDG sanitation target by 2015, and miss the target by over 700 million people [4].

Sanitation in Sub-Saharan Africa essentially consists of on-site sanitation. It is the region of the world where two third of the population lack access to improved sanitation and 30 percent of the population continues to practice open defecation. Because of this it remains the area of greatest concern [5] [6].

Open defecation is a common practice in South and South-East Asia, Africa and Latin America [7]. The condition of Ethiopia in this regard is not different from the general situation of these countries. Access to safe sanitation is one of the key development challenges in Ethiopia which countries face in their effort to development. According to UNICEF, only 21.34 per cent of the households have access to sanitation facilities [8]. Sanitation and hygiene related diseases are among the most common deadly diseases in Ethiopia. In urban slums and rural areas alike, the majority of the population does not have access to sufficient and safe sanitation. In the Southern parts of Ethiopia, it is estimated only 49 % of the population has access to latrines, and lack of proper sanitation is manifested in public places such as schools, markets places, and health centers [11].

The Health Bureau of the Southern Nations Nationalities and Peoples Region (SNNPR), one of the regional states of Ethiopia, launched a major health and sanitation campaign that was implemented in 2005. This is so as to alleviate the sanitation problem. It is compulsory for each household to build a latrine without subsidy. This was in order to achieve 100 percent latrine ownership and utilization in all villages of the region [9].

In October 2006, community led total sanitation (CLTS) was introduced in Ethiopia through the effort of the Irish NGO Vita. This was done through inviting Kamal Kar, pioneer of the idea, to facilitate a six day training workshop on community led-livelihood improvement in Arba Minch [9, 11].

Since then CLTS has attracted significant interest of different governmental and non-governmental organizations in Ethiopia. Review of literature revealed that the critical difference between conventional approaches and CLTS to sanitation was that the conventional one was state-led rather than community driven, it targets individual households than total community and it focuses on hardware than community action and behavior [11] [12]. Reliable understanding of people's experience of CLTS is important. To the best of my knowledge, however, the contention on the existing limited literatures mostly rests on the history and achievements of CLTS. There is lack of studies describing in-depth understanding on CLTS movement and the contribution it has had towards community empowerment from community member's pers-

pective, including 'how' they feel, understand and provide meaning for the phenomena they have experienced. Thus, the aim of this study was to reveal the understanding and meaning of people's experience of CLTS.

It is important to note that, so far, CLTS largely deals with the disposal of human waste and it does not necessarily deal with the whole range of solid waste management. However, CLTS is now increasingly accompanied by hygiene programmes and in some cases it deals with the whole solid waste management [12]. Having that spectrum in mind, the scope of this study is limited to the application of CLTS to the disposal of human waste.

## II. METHOD

Qualitative research method is employed to study the social phenomenon within its natural context. The method enables to have in-depth understanding of a few numbers of cases rather than a general understanding of many cases or people [13]. It also helps to understand the meaning of situations, events, experiences, and actions of participants [14].

### A. Research Design

Phenomenology (from the Greek *phenomenon*, which means to show itself) was the methodological basis for this qualitative study. This research design enables to describe the meaning and understanding for several individuals of their lived experiences of a phenomenon and the context in which it happen. It also focuses on what all participants have in common as they experience a phenomenon [15] [16]. Using this method, this study tries to explain and understand 'what participants experienced' and 'how they experienced it in terms of the conditions, situations, or context'. Consequently, the research questions, data gathering tools, and analysis and reporting styles have been shaped by guiding assumptions of phenomenology.

### B. Study site and Participants

The study site, Dorze Hyzo Kebele, is located in Chencha Woreda, Southern Nations Nationalities and Peoples Regional state of Ethiopia. A purposive sample of 8 people who reside in Dorze Hyzo Kebele on permanent basis and willing to participate in the study, their voice to be recorded and able to give consent by themselves participated in this study. The participants were three women and five men all between the ages of 18-45 years.

### C. Ethical Permission

Permission was obtained from the Vita Ethiopia and Dorze Hyzo Kebele Administration in order to have access to the research participants through the facili-

tation of the organization and Administration. Written and verbal consent was obtained from participants to let them know that they will be researched and also protect them from participating involuntarily. The consent also guaranteed the confidentiality, anonymity and the right to withdraw from the interview at any time without any consequence.

#### D. Data Collection

Participants were interviewed in a place they preferred; mostly in their homes using in-depth interviews, to create a condition for understanding the meanings that emerge from the dialogue. Data collection in the interview was interactive, whereby the researcher describe as accurately as possible ones' understanding and interpretation [16]. Forwarding open ended questions such as "Please, tell me about your experience of CLTS" and asking for clarification like "Can you give me an example?" were the techniques used for probing. This is in order to get the core of the reality about the phenomenon under study.

#### E. Data Analysis Process

The audiotapes were transcribed using rules of transcription [15]. Before coding, the transcripts were read repeatedly with open mindedness to grasp the main issues. Code identification was followed by categorization of similar codes and thematic issues. This involved organizing the data into major themes or pattern that can describe and explain the phenomena being studied [14]. The significant statements and themes, and composite descriptions which focus on the common experiences among the participants experiences and/or something new emerged were written [15, 16]. The interrelated points are conceptualized and discussed with reference to literatures and objectives of the study in order to show how the findings are consistent or inconsistent with those literatures. Lessons learned during data analysis are also presented.

### III. FINDINGS AND INTERPRETATION

The study finding and discussion are organized into three main themes: (A) participants' understanding of CLTS (B) the contribution of CLTS (C) the meaning of participants experience with CLTS.

#### A. Understanding of Community Led Total Sanitation

When participants were asked to highlight their understanding of CLTS, they noted that a change in their perception occurred after internalizing the harmful impact of Open Defecation (OD) on public health and on the entire neighborhood environment. Before reaching to the current understanding CLTS was mentioned by all participants as something disgusting.

Participants described how the time they spent standing in the OD area, inhaling the unpleasant smell and observing the unpleasant sight of shit lying all over the place became long and full of embarrassment. They described their feeling:

*Initially, I was laughing. After a while, however, it was hard for me to stay any longer, because I couldn't tolerate the bad smell and shame; particularly when we walked around disgusting places along with outsiders who came to visit the community and start mapping and calculating amount of feces.*

*When people came to our village to introduce CLTS, they really disgusted me especially when they asked people to drink water after they put something unclean in it. They looked like mad for me. But now I know that they truly cared about our health.*

Even if they were embarrassed, the participants also described experiencing the disgusting sight and smell because of mass open defecation and the magnitude of sanitation problem it has, ignited on them different feelings; we can do our best to challenge this problem.

As time passed, change was evident in participants' understanding of CLTS. They now understand CLTS as "fully involving people," "a behavioral focus," "promotes self reliance and transparent decision making," "promoting local innovation," and "an opportunity to lobby for further infrastructure improvement." Participants' expressed their current understanding:

*CLTS facilitates the local community members see for themselves their sanitation conditions and let people analyze the adverse consequences of open defecation.*

*CLTS ignites a sense of disgust, un-cleanliness, and shame through walking with community members through areas where OD is commonly practiced, mapping of defecation areas and resources, extent of contamination and initiating discussion on 'who shits where?.'*

Participants stressed that CLTS involved all community members in a simple and clear analysis of sanitation situation; locating on the map their dwellings, defecation areas, and households who own and don't own latrines. By doing so, it promotes understanding the sanitation situation, behavioral change in relation to sanitation, and transparent decision making on what to do, when, and by whom, so as to be free from open defecation. An informant explained these factors by stating her own experience:

*When CLTS triggered in our village all of the community members were part of the process and output. Once the community members realize the importance*

*of cleaning up their own villages, they construct their own toilets using locally available materials such as bamboo, wood, and grass. It does not also require material support from any external bodies, and it has rooms for local innovation in terms of the material and toilet design used.*

One of the participants also described CLTS as an opportunity to lobby for further collective action such as infrastructure improvement. Once, the Dorze Hyzo community declared and celebrates Open Defecation Free (ODF) status the community shared their concerns related to poor access of potable water to concerned Local Administration and Vita.

### *B. Contribution of CLTS*

Participants were asked the contribution of CLTS. There are three sub-themes. In the first theme, participants experienced empowerment. Second, they experienced CLTS as a strategy for facilitating a change through stimulating their desire for change and collective action which ultimately challenged the practice of open defecation. These two sub-themes also indicate the context in which CLTS was practiced. Third, participants experienced CLTS as an opportunity for exercising leadership. It paved the way for natural leaders to pop-up, motivated them to take collective action through constructing latrines for passengers and elderly people, and for setting criteria of ODF and consequent celebration.

#### *Empowerment*

The findings under this theme indicate the empowerment participants experienced during the process of CLTS. As CLTS is community driven it involves the whole community. It served as a bridge between government and community.

Participants described depressing CLTS memories mixed with pleasant ones. Most of them seemed to have predominately disgusting memories of CLTS when they talked about their initial experiences; as a strategy for triggering their desire for change in sanitation behavior. They related that mostly to “the bad smell and shame they experienced when they visit areas with mass open defecation,” “local and crude words used for shit,” “discussion and calculation of shits produced by the community,” “from open shit to open mouth.” One of the participants described her memories of initial experience of CLTS:

*I joined the CLTS discussion group since the health extension agent informed me to attend the community discussion. When we walked through different parts of our village it was common to pass by the shits. I never forget the shame I experienced when they start to use the local term for shit and calculate shits produced in the village. The discussion also enabled us*

*to know how everybody is eating each other's shit because of flies. During the discussion children were laughing. This all is done while we are inhaling the bad smell. It was disgusting but real. However, as time went by the discussion turned from violent arguments to 'how to stop this practice?' Finally, we developed the action plan and set date for next meeting.*

While describing their experience of CLTS, all of the participants expressed disappointment at the initial stage of triggering. That same moment, five of them demonstrated feelings of joy, ownership and dignity following celebration of ODF with no support by external bodies. When outsiders are taken around the village for any purpose the clean environment gives them a sense of pride. Participants also described feelings of accomplishment and relief at having done a marvelous job on their own. They found themselves in mixed feelings:

*At the beginning it was really offending; nobody would like to be mentioned in that way no matter how much it is true. After a while when we start to grasp the reality and get the commitment for change the issue is left for the community; visitors said, “It is up to the community members to decide how to deal with the problem.” ...at this time the whole community became not only the owner of the problems but also of the solutions. Now, I am proud of the achievements so far.*

#### *Facilitating a change*

Participants expressed that CLTS facilitates a change in community's perception of poor sanitation and its consequences through using different participatory tools that enable them to understand not only the problems associated with open defecation but also the reasons for the problem. In doing so, it fuels the desire to actively do something and bring improvement in sanitation of the village. Participants stated that:

*The initial embarrassment they experienced during visit of open defecation areas gave a way to strong desire for change in order to get rid of these nasty things. This is mainly due to self awareness of the situation which in turn serves to initiate some practical action.*

Prior to this the existing sanitary situation was often seen by the community as something that has nothing to do with their dignity and health situation, something that did not concern them and didn't relate to their practice. However, when participants perceive poor sanitation as a threat to their livelihood, they are more willing to engage in protection activities; this is when there is a sense of permanence and ownership of the activities.

### *Opportunity for Leadership and Collective Action*

Participants indicated that CLTS is an opportunity for exercising leadership and interacting with local leaders. It is also an opportunity for women and children to open up, talk freely, change and be actively involved in their village development endeavors:

*I never took leadership position before CLTS. However, through CLTS I am one of the speakers during the community CLTS meeting. I also facilitate some of the session and serve as a local consultant to assist in the follow-up of team members for the neighborhood villages. I can say that the initiative is like a bridge between the government and the community.*

Almost all of the participants also stated that they were free to construct any type of latrine. This is based on the skill, knowledge and local resources available to them. A participant stated:

*If you visit the latrines in our village they are not the same type. Every household builds according to its interest and resource. You find latrines of different size, construction materials and design.*

Participants were further probed how CLTS contributed for collective action. All of the participants indicated that CLTS contributes meaningfully to instill common action such as construction of public latrines for passengers and individual household latrines for the poor, female headed households and elderly people. This is attributed mainly to the fact that it is truly participatory and targets the total community. Some of them further expressed that they build the latrines through community contribution; labor, bamboo, wood and grass.

The contribution of CLTS is also reflected in the ability of the community to be active in their village development and challenge the practice of open defecation. It is also reflected in the pride that shines in their eyes and vibrate in their voice when they describe how they achieved their current status, and their confidence in sharing the whole process they took part to reach the current status. CLTS has also inculcated competitive spirit when they are informed that many people from outside and neighboring villages will come and visit their village following the achievement of the first open defecation free village in the district.

Some of the significant factors that have sustained community collective action and their empowerment are the opportunities given to understand their sanitation situation and find local solutions by their own. They also indicated that they were active participants in setting criteria for ODF, verifying and certifying ODF status.

### *C. Struggling for change*

Participants were probed about its impact on their lifestyle. Their responses indicated that they were struggling to bring change, which comprises three sub themes: trying to understand, feeling the joy in working together, and the motivation to change their life perspective.

#### *Trying to understand:*

Participants described how they had learned about the CLTS as time went by. They also appreciated the discussion and different views they came up during triggering and follow-up meetings; they shared information that gave them more knowledge and understanding about CLTS, the progress it has in their village and the gaps to be addressed:

*She said many times that she was involved in CLTS activities held in the village, and that was really good. Because there you find out people's understanding, initiation and action, you also come to realize that in whatever you think, behave or act you are not alone. In the mean time you learn a lot through the process.*

Participants described how important it was to talk to each other about the progress happening in the village. It gave good understanding and strength to address the existing problem. It also creates sense of ownership in those who are involved actively, but a neutral and inactive person could end up with feelings of guilt:

*Community's common understanding of the issue is very important. The moment we have this understanding through discussion we came to understand the current status and developed the desire to address the existing challenges that hinder the achievement of ODF; non-existence of latrines for passengers and poor capacity of elderly people to build their own latrines.*

*... I am glad that the community understood the reality and went so far to achieve the targets it set for itself. So, it is quite a good thing, I think.*

#### *Feeling the joy in being together:*

Participants felt joy in deciding to act together, develop common action plan, good communication and latrine. This was true, even if their day to day lives had some socio-economical challenges and involved great responsibilities.

*After we decided to act together, we went ahead and developed common action plan with target dates. Then the natural leaders were encouraged to take charge of ensuring that the action plan was properly*

*followed through, and to report action on the triggering process in the community meeting.*

Participants described their trust in being together. Change arose at the slightest improvement in attitudes towards communal action. This, however, needs to be transformed to action:

*It is because we planned and implemented together that the area used before for mass open defecation became clean and was converted to a place on which we built community information center .*

#### *Motivation to Change Life Perspective*

Participants also described CLTS as a motivation to change their perspective on their lives. Some indicated that they became a person “who understands and care about people’s sanitation,” and “strong and independent.” In relation to this an informant stated that her CLTS experience changed her perspective in that she never practice open defecation and guides her child to do the same. If she doesn’t do that she feels as though she treated the community cruelly. She continued by saying:

*If I didn’t get this opportunity of learning I would probably still be a person living with the same practice. It turned around my life and I became a person with better understanding about community sanitation and the way to keep environment clean.*

Another participant expressed that the experience associated with CLTS made her change “from individualistic, silent and dependent woman to sociable, free to talk, independent woman.” Similarly, a participant explained that his experience with CLTS made him a strong person who believes in working hard to improve the sanitation status of the community and change people’s attitudes about sanitation.

*I never thought about the community before I became the natural leader of this village. My circle was limited only to my family and some of my friends. Now the process in CLTS gave me big lesson. Through cooperative action of people it is possible to bring change. Now I no more want to think only about myself and my family . I feel that I have become community-centered.*

#### **IV. DISCUSSION**

In an attempt to vividly present the feeling and understanding of participants in relation to CLTS, communalities were found in different individuals experiences. Although every situation and every experience is unique, an analysis of thematic categories is examined along with the literature. This enabled the identification of participants’ understanding of CLTS movement, as well as CLTS contribution towards empowerment. To maintain consistency and preci-

sion, this discussion is organized based on the findings presented in the previous sections.

In examining participants understanding of CLTS, participants expressed their initial and current conceptions. At the initial phase of their experience with CLTS, participants considered it disgusting. This might be due to the nature of the strategy used; walking through mass open defecation area, using the local term for shit, asking who defecate openly where, and calculating the shit produced by each household in the village and ranking it. At the same time, participants described that this strategy fueled them with a different feeling; “we have to change this.”

Regarding participant’s current comprehension of CLTS, similar to the findings of other studies [9, 11, 17] most of them mentioned that it fully involved the whole community and promotes self understanding, local innovation, and decision making.

Change in participants understanding, as the hypothesis of ecological model revealed, indicated that various factors like culture, socioeconomic setting, and development, as well as having the opportunity for lessons from their own and other’s experiences, might have influenced their understanding. This further implies that changes in one ecological system influence changes in other systems, in that the understanding of participants varies with time as the result of the changes within the ecology [18].

A participant understands CLTS as a means to stimulate the community for further livelihood development. This finding confirm the view point that the CLTS process can also lead to a development entry point to communities by identifying natural leaders who have the potential to take more active role in planning, monitoring and implementation of sustainable community livelihood projects [19, 20].

In exploring the contribution of CLTS, similar to other findings, [11, 19], the findings in this study indicated that CLTS starts by empowering the community through the process particularly related to letting the community understand the sanitary situation and find a way to deal with it. In addition, it recognizes communities’ right and responsibility of living in a totally sanitized environment, which facilitates decisive role of communities in the process. This further implies the focus is on process, on empowering the community to take action themselves. On the other side, studies indicate that lack of involvement of people to be benefited from the intervention creates the expectation that the government will provide the necessary services and funding [21].

Participants demonstrated feelings of joy, ownership and dignity because of clean environment they have

as the result of working together. This also made them feel accomplished and relieved. In this regard, like other studies the approach has its own contribution in building sense of ownership for what has been achieved and subsequently enjoying the result [9, 19]. The main advantage here is that the benefits are more likely to extend over the long term. This further highlights through CLTS how community members are capable of analyzing the sanitation problem, and of finding ways to deal with. Moreover some indicate that CLTS offers hope of achieving the Millennium Development goals [20].

The initial embarrassment encountered by the participants, as some studies reveal, is because of a profound shame and disgust generated by participatory analytical tools further fuel a desire to actively improve the sanitation situation. In addition to this, a process is ignited where residents draw on local resources and knowledge to construct sanitary facilities that fit their particular needs and desires [21].

Similar to other findings, the findings in this study indicated that CLTS leads to identification of natural leaders who then support the design and construction of latrines from locally available materials [21]. In addition, the key to success in Dorze Hyzo village is facilitated by the collective sense of disgust and shame which led to collective and household action and implementation. The findings also indicate that participatory analytical tools are instrumental in deepening knowledge and changing hygiene and sanitation habits [22].

Participants struggled for better understanding of CLTS. The discussion and diverse views have their own contribution. In this way, participants developed good understanding and sense of ownership. Participants also developed feelings of joy and trust when they were given the opportunities to decide to act together and develop common action plan, and managed to take responsibility by themselves. For the participants, a key source of satisfaction was getting things done on their own

Struggling for change is also related to integrating the changes caused by CLTS by developing participant's perspectives on life. In this way, participants developed sympathetic feelings towards others in terms of health care. They also became hard worker, less dependent and more community centered.

## V. IMPLICATION OF THE STUDY

The findings of the study indicates careful selection of CLTS sites and trained external facilitator who guides the process using the full set of CLTS tools are factors behind these achievements. To improve the effectiveness of CLTS, the findings also suggest the

need for integrating CLTS into national policies, designing comprehensive advocacy session to ensure the collaboration among different sector offices and support from local political leaders and nongovernmental organizations, improving water access, as well as promoting regular monitoring of progresses, thus leading to scale up, greater ownership and sustainability. Hence, the following implication of the study on practice, research and policy are proposed.

The research conducted herein has revealed the influence of changes in every system within the ecology of participants' understanding, social relationship and life perspective; participants' feelings, understanding and opportunities changed over time. This implies in order to understand the socio-cultural context of participants' lives and sustain behavioral change on sanitation there is a need to utilize a person-in-environment framework. This further enables to have good understanding of social custom and engagement with local cultural assumption in that facilitators take care not to offend the community members during CLTS process.

The research noted that the community members are the ones who decide important sanitation matters in the village including what to do, when to do it and by whom in order to improve the sanitation of their village. This implies that community's autonomy is an important determinant factor behind these achievements. Therefore, there is a need for trained facilitator who guides the process using full sets of CLTS tools that will enable the community to be empowered in decision and actions related to their sanitation.

It does not matter whether CLTS triggering is successful and the area become free from open defecation unless action is taken to sustain change. Therefore, the triggering of CLTS should be followed with consistent follow-up that enable to take timely corrective actions, record the progresses and encourage the implementers. During follow-up the achievements have to be measured on the basis of elimination of open defecation i.e. final impact instead of counting the toilets constructed.

The research also showed that CLTS needs to be seen in conjunction with improving access to water. This will create enabling environment to improve personal hygiene by internalizing the culture of hand washing, bathing and laundry; which will further improve the effectiveness and acceptance of CLTS. Hence, there is a need for clear operational strategy to achieve paradigm shift from open defecation to total sanitation.

This study shows the necessity of strength based approaches to interventions dealing with total sanitation.

This helps to explore and develop the strengths of the community members for better life in general and for better sanitation in particular.

Sanitation involves many sectors, such as health, education, and public health. Therefore, collaboration among relevant sector offices is a key to improve the effectiveness of CLTS. One of the lessons learned during the study, however, one of the challenges the CLTS approach is how to bring different actors and work together. This implies the need for designing comprehensive advocacy session to ensure the support from local political leaders, local institutions, sector offices and non-governmental organizations.

CLTS as a new approach to sanitation promotion to eliminate the practice of open defecation practice should not be limited to village levels. It should be expanded thorough out the country. To get statewide commitment, one of the issues that have to be considered is limited awareness on CLTS amongst national governments as a result of which sanitation policies don't recognize it as a successful model. To scale up this approach at the national level there is a need of placing CLTS high on sanitation policy and the political agenda. This enables CLTS to be explicitly endorsed and advocated in national-level strategies. It also enables CLTS to be aligned with already existing programmes.

#### REFERENCES

- [1] S. Cairncross Sanitation in the developing world: Current status and future solutions. *Int J Environ Health Res* 2003;13: S123.31.
- [2] V. Curtis Talking dirty: How to save a million lives. *Int J Environ Health Res* 2003; 13: S73.9.
- [3] Global Water Supply and Sanitation Assessment Report-7-2 of the WHO: WHO/UNICEF (2000) Joint Monitoring Programme for Water Supply and Sanitation, unpublished.
- [4] UNDP, Water for Life, 2005-2015, 2007
- [5] P. Newborne and J. Smet (2008). Synthesis of the Ethiopia case study:  
<http://www.rippleethiopia.org/documents/info/20080807-synthesis-sanitation-hygiene>.
- [6] E. Morella, V. Foster, and S. G. Banerjee (2008): Africa infrastructure country diagnostic climbing the ladder: The State of Sanitation in Sub-Saharan Africa This report was produced by the World Bank and the Water and Sanitation Program with Funding
- [7] K. Kar, subsidy or self-respect? Participatory total community sanitation in Bangladesh, Institute of Development Studies, Brighton, Sussex BN19RE, England, 2003, IDS working paper
- [8] WHO and UNICEF meeting the MDG drinking water and sanitation target: the urban and rural challenges of the decades, 2006
- [9] L. Mehta, Community-led total sanitation (CLTS) across the seas: Experiences from Africa with a special emphasis on Ethiopia', 2009, *RiPPLE Working Paper 12*. RiPPLE: Addis Ababa. Pp 14
- [10] First Annual Participatory Review Report of Vita/RTI Ethiopia Intervention in SNNP Region of Ethiopia, 2006, unpublished
- [11] R. Chamber, Going to Scale with Community-Led Total Sanitation: Reflection on Experience, Issues and Ways Forward, 2009, pp 03
- [12] S. Movik, CLTS, Dynamic and Sustainability: Perspectives on challenges and Pathway, paper to be presented at the conference on CLTS, IDS, Brighton, UK, unpublished.
- [13] R.M. Grinnell, *Social Work research and Evaluation: Quantitative and Qualitative approach*, 2001, Thomson Books. USA.
- [14] A.J. Maxwell, *Qualitative research design*, 2005, an interactive approach. 2<sup>nd</sup> ed. SAGE publication.
- [15] K., D. Padgett, *Qualitative methods in social work research*, 2008, Sage publication, Inc. 2<sup>nd</sup> ed.
- [16] W. J. Creswell, *Qualitative inquiry and research design*. Choosing among five approaches, 2007, 2<sup>nd</sup> ed. SAGE Publications
- [17] Plan Ethiopian communities take the lead in ending open defecation, (2007a) available at <http://www.planinternational.org/wherewework/eastafricaeurope/ethiopia/habitat/wash/clts/> (last visited 20.05.10)
- [18] K. Glanz, K.B., Rimer, & F.M., *Lewis Theory, research, and practice in health behavior and health education*, 2000, In K. Glanz, B.K. Rimer & F.M. Lewis (Ed), *Health behavior and health education: Theory, research and practice* (pp.45-66). Jossey-Bass.
- [19] S. Sameer & N. Amsalu, Community led total sanitation (CLTS): Addressing the challenges of scale and sustainability in rural Africa, *Desalination* 248 666–672, 2009, Pp 666
- [20] K. Kar & R. Chamber, Hand book on Community-led Total Sanitation, Institute of Development Studies/PLAN International, 2008.
- [21] R. C., Carter, S. F., Tyrrel, & P. Howsam, Impact and sustainability of community water supply and sanitation programmes in developing countries, *Journal of the Chartered Institution of Water and Environmental Management*, 1999, 13, 292–296.



[22] K. Kar & K. Pasteur, Subsidy or Self-respect? Community led total sanitation, an update on recent developments, including reprint of IDS Working paper 184, Institute of Development Studies, Brighton, Sussex BN19RE, England, November 2005, IDS working paper

**ABOUT THE AUTHOR:**

The author is currently working with Irish NGO Vita, Addis Ababa, Ethiopia, and has BA in Sociology and Social Administration and MA in Social Work (e-mail: yanitad2005@gmail.com).