



Evaluation of Community-led Total Sanitation Implementation in Burkina Faso

SUMMARY

At the current rate, Burkina Faso is unlikely to meet their national Open Defecation Free (ODF) objective by 2030. To accelerate progress, the Ministry of Water and Sanitation conducted a national evaluation of the implementation of the Community-led Total Sanitation (CLTS) approach from 2019 to 2021. This document provides a summary of the evaluation, including the results, discussion and recommendations on the enabling environment and implementation. The key recommendations to accelerate progress are:

- Establish a consultation framework for all actors at the regional and national level.
- Inform actors on their roles and responsibilities in implementing the CLTS approach.
- Mobilize financial, material and human resources to ensure the sustainability of CLTS achievements.
- Strengthen capacity of actors on the implementation process of CLTS.
- Review the CLTS strategy and manual at national level and adapt the documents to the realities in the field.

The document concludes with an overview of the progress made to achieve the national ODF objective since the evaluation was completed in January 2021.

Introduction

The sanitation sector in Burkina Faso is guided by the National Sanitation Program for Wastewater and Excreta (PN-AEUE 2016-2030). The program outlines the interventions required to achieve the Sustainable Development Goal 6 and the Environment, Water, and Sanitation Policy (PS-EEA).

A specific objective of the national sanitation program is to end open defecation by 2030. To meet this objective, one of the approaches adopted in 2014 was Community-led Total Sanitation (CLTS).

After 5 years, the government evaluated the CLTS approach in 2019. Out of the 2301 triggered villages, 546 were declared open defecation free (ODF) and only 327 were certified ODF – a certification rate of 14.2%. The results highlighted the ODF objective would not be achieved at this rate.

To address this challenge, the Ministry of Water and Sanitation, through the Sanitation Department (DGAEUE) and UNICEF's financial support, organized a national evaluation of the implementation of the CLTS approach. This document is a summary of the evaluation.

Methodology

The evaluation methodology consisted of a literature review and interviews with households (840), sanitation community committees (120), community leaders (240), mayors (60), officials from the regional directorate of water and sanitation, education, health and the environment (13), national and international NGOs (5) and technical and financial partners (5). The 840 households were located in 120 villages in all 13 regions of the country. There was a mix of villages with and without subsidies, and villages were at different stages of the CLTS process (see Table 1 and 2).

The data was cleaned and analyzed using SPSS. The final report was validated by the technical committee on January 22, 2021.

The limitations of the evaluation were:

- Delays in financial transfers.
- Delays in data collection due to harvest season and elections
- The security issues in certain parts of the country impacting the sample of villages.

Table 1: Villages with and without subsidies

Subsidies	Number of villages
No subsidies	32 (Center-West and East)
Received subsidies	88 (all other regions)

Table 2: Sample size of villages at different stages of the CLTS process

CLTS process	Number of villages
Triggered	19
Declared ODF	12
Certified ODF	89

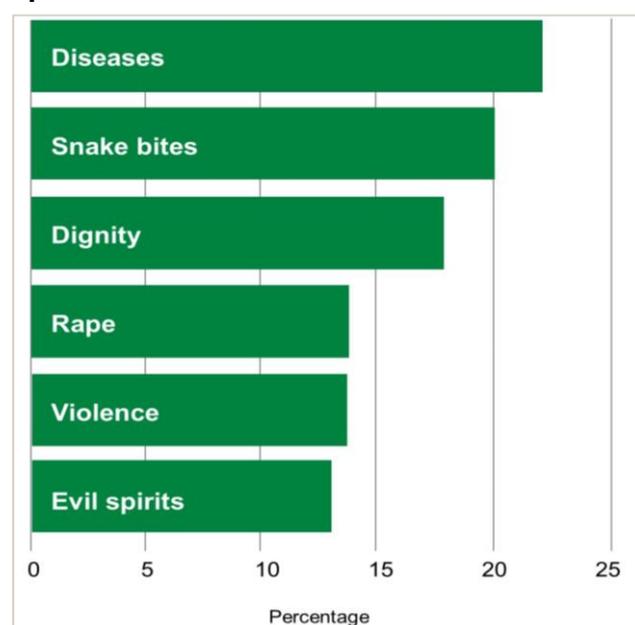
Results

Households

Motivators and Barriers

In terms of motivators, although nearly all the households surveyed understood the link between sanitation and hygiene, and disease, only 22% of households stated diseases when asked about the risks of open defecation. Households identified other risks including snake bites (20%), dignity (18%), rape (14%), violence (14%), and evil spirits (13%) (See Figure 1).

Figure 1: Perceived household risks of open defecation



In terms of barriers, subsidies seemed to negatively influence the construction of latrines through the creation of a dependency culture. In villages that received subsidies, there was a low contribution from households towards construction and subsidized materials were used for other purposes. These villages faced additional barriers, such as the high cost of latrines and delays in procurement which slowed down the rate of latrine construction. In non-subsidized villages, however, the study observed

strengthened communal solidarity and increased local skills to construct latrines.

Latrine Construction and Use

Households built different types of latrines: without concrete slab (29%), with a concrete slab (27%), sanplat (26%), VIP (16%), and very few built pour-flush (1%) and Ecosan (1%).

Households who received a subsidy built more sustainable latrines. The latrines respected design standards and were well-maintained. Households that did not receive a subsidy, however, built latrines that did not respect the national standards and used low-quality materials.

Most households in triggered villages used their latrine (85%) or a neighbor's (2%), while 13% defecated in the open. Only 16% of triggered villages were declared ODF and 22% were abandoned, suggesting difficulties in mobilizing all the households in a village to construct and use a latrine.

Impact

Almost half of the households observed a positive change in hygiene and sanitation in their life and in their community (47%) and were able to see financial and social improvements (45%). While 89% of households were overall satisfied with the changes in their village, 10% were dissatisfied.

Children Feces management

Households used three different ways to manage children feces: disposed of in the latrine (77%), in nature (14%), and in a hole then covered (9%).

Fecal Sludge Management

Emptying latrines is not a common practice with only 8% of the households with latrines stating they had emptied their latrine. 5% of the sludge is then used, while 86% is emptied in the field and 9% in the street.

Handwashing

Most households stated always washing their hands (65%) or often (7%), however, only 15% stated washing their hands after defecation.

Households that wash their hands use soap or

ashes, with the north, plateau central, and cascade regions predominantly using soap. Children were less likely to wash their hands than adults, while women and men washed their hands at a similar rate.

Enabling Environment

Policy

Burkina Faso has three key national strategic documents for sanitation: National WASH Policy 2018-2030 (PS-EEA), National Sanitation Program for Wastewater and Excreta 2018-2030 (PN-AEUE) and the National Community-led Total Sanitation Strategy (2014). The national CLTS strategy was developed in consultation with sanitation sector stakeholders in 2014 and approves subsidies for toilet construction. The urban and peri-urban Community-Led Total Sanitation strategy is in development.

Policy Strengths:

- A common vision to improve access to sanitation facilities.
- A contextualized national CLTS strategy and implementation manual that provides sufficient guidance, particularly on subsidies, to support implementing partners.
- Strong political commitment at all levels.

Policy Weaknesses:

- Lack of alignment between the national strategy and the no-subsidy CLTS approach implemented by certain partners.
- Insufficient dissemination of the CLTS strategy and implementation manual leading to poor implementation of approaches and a misunderstanding of the subsidy approach.
- The CLTS strategy does not include post-ODF certification to prevent slippage.
- No strategies address fecal sludge management.

Recommendations to improve policy:

- MEA and the Sanitation Department inform stakeholders of their roles and responsibilities in implementing the CLTS strategy.
- MEA and Sanitation Department review the CLTS strategy and implementation manual to

adapt the CLTS implementation process to current realities in the field.

- Local governments develop and implement regulatory texts on hygiene and sanitation and enforce their application.
- Technical services improve the availability and dissemination of the CLTS strategy and implementation manual, as well as legislative and regulatory texts on sanitation and hygiene.
- Technical services ensure the adoption and dissemination of the decree regulating on-site sanitation.
- Technical services ensure the implementing partners include people with disabilities.
- Technical services develop and implement a plan to sustain ODF status.

Institutional Arrangement

The CLTS strategy is led by the Ministry of Water and Sanitation (MEA) and coordinated by its Sanitation Department. The finances for the strategy are managed by the Economy and Planning Department. Support for implementation, capacity development and monitoring is led by the Regional Directorate of Water and Sanitation (DREA). Other Regional Departments from different ministries, such as health and the environment, provide support for hygiene promotion and environmental protection, respectively.

Strengths of the institutional arrangement:

- The relation between MEA and its technical services at national, regional and provincial level.
- The existence of local associations working on the PN-AEUE.

Weaknesses of the institutional arrangement:

- Absence of water and sanitation technical services in most local governments.
- Weak national leadership by MEA and its sub-national technical services.
- The role and responsibilities of local government is unclear.

Coordination

The Sanitation Department of the MEA leads the coordination of the CLTS strategy in partnership with departments of other Ministries (health, education, environment and agriculture), technical and financial partners and implementing partners. The department was supposed to lead a national coordinating committee including all actors, but it was never operationalized due to a lack of funding.

Coordination strengths:

- The coordination between MEA and its technical services at national, regional and provincial level.
- The involvement of sanitation sector actors in the CLTS strategy.

Coordination weakness

- The non-operationalization of the national coordination committee for CLTS.
- Lack of coordination amongst the implementing partners.

Recommendations to improve coordination:

- MEA establishes a mechanism for coordination at the national, regional and municipal level.
- MEA establish a consultation framework including all the regional and national level actors.
- Technical Services operationalize the coordination mechanism at national and regional level.

Monitoring

Monitoring is led by DGAEUE. Monitoring occurs at four levels: community, local, regional and national. Monitoring forms and reporting templates are used by different actors to collect data at a frequency defined in the strategy.

Monitoring strengths:

- The establishment of provincial evaluation committees with the high commissioner as president.

Monitoring weaknesses:

- Not implementing the CLTS monitoring framework.
- A lack of funding for monitoring.

Recommendations to improve monitoring:

- National government establishes a mechanism for monitoring at the national, regional and local level.
- Local government establishes a system for information sharing.

Finances

The finances for the strategy are managed by the Economy and Planning Department of the MEA which mobilizes funds to implement sanitation projects and programs. Technical and financial partners, as well as the private sector, mobilize funds specifically for the implementation of CLTS (with subsidies). Implementing partners are directly funded by donors such as UNICEF, European Union, World Bank, as well as other international NGOs such as Plan International BF, WaterAid, Eau-Vive Internationale and through government projects.

Strengths:

- Financial support from external partners.

Weaknesses:

- Insufficient budget for implementing partners to implement beyond triggering.
- Insufficient financial resources to implement CLTS strategy.

Recommendations:

- MEA mobilizes financial resources to ensure the sustainability of CLTS achievements.
- Local governments add a budget line in their budget to monitor triggered, declared and certified villages and restart the CLTS process with abandoned villages.
- DREA include CLTS activities in their planning and budget to ensure autonomy for monitoring.

- Technical and financial partners allocate more resources to water and sanitation and prioritize CLTS in financed projects.
- Technical and financial partners ensure their funded CLTS projects include the entire implementation process.
- Technical and financial partners allocate resources to sustain ODF status after certification.

Human Resources and Capacity

Many actors are involved in planning and implementing the CLTS strategy, from the national, regional, local and community level. Capacity development activities were organized, mostly for CLTS trainers and facilitators.

Human resources and capacity strengths:

- The commitment of sanitation sector stakeholders to address sanitation issues.

Human resources and capacity challenges:

- Insufficient human resources and capacity of actors to implement the CLTS strategy.
- Lack of capacity development activities for implementing partners and other actors.
- Lack of emptying service providers in most areas.

Recommendations to improve human resources and capacity:

- National government mobilizes human resources to ensure the sustainability of CLTS achievements.
- National government strengthens the capacity of actors.
- Technical services strengthen the capacity of actors involved in the implementation of CLTS.
- Technical services provide clear guidance to implementing partners on subsidies.
- Technical services improve the motivation of the community monitoring committees to sustain ODF status.

Implementation

The implementation of the CLTS strategy is led by 45 implementing partners, mostly NGOs (See figure 2). The implementing partners triggered 40% of the 8892 villages in Burkina Faso, out of which 16% were declared ODF and 22% were abandoned.

According to implementing partners, villages were abandoned for three main reasons: the end of a project (48%), the absence of latrine subsidies (37%) and the poor involvement of communities in project implementation (7%). The Centre-West, East, and Sahel regions had the most declared and certified villages.

The CLTS implementation approach is described in the implementation manual. The majority of implementing partners effectively implemented the approach described in the manual, but not all. Most implementing partners were able to follow the guidelines for triggering (93%), but more challenges occurred at the post-trigger phase (87%) and certification (72%) phase. The satisfaction of community leaders followed a similar trend, with 93% of leaders satisfied with the pre-triggering and triggering phase, decreasing to 86% and 78% for the post-trigger and certificate phase, respectively. The satisfaction of community leaders was linked to the strengthened social cohesion and the integration of local values and stakeholders, while the dissatisfaction was linked to the shame and disgust of the triggering tools, time demand, the pressure put on the community and a lack of respect towards certain community leaders.

Implementation strengths:

- Combining subsidies and awareness raising for vulnerable households.
- The involvement and commitment of local authorities, communities and artisans throughout the process.
- The monitoring led by local actors, particularly the village and neighborhood monitoring committees (CAV/Q).

- Capacity development of actors, including qualified CLTS facilitators and trainers.

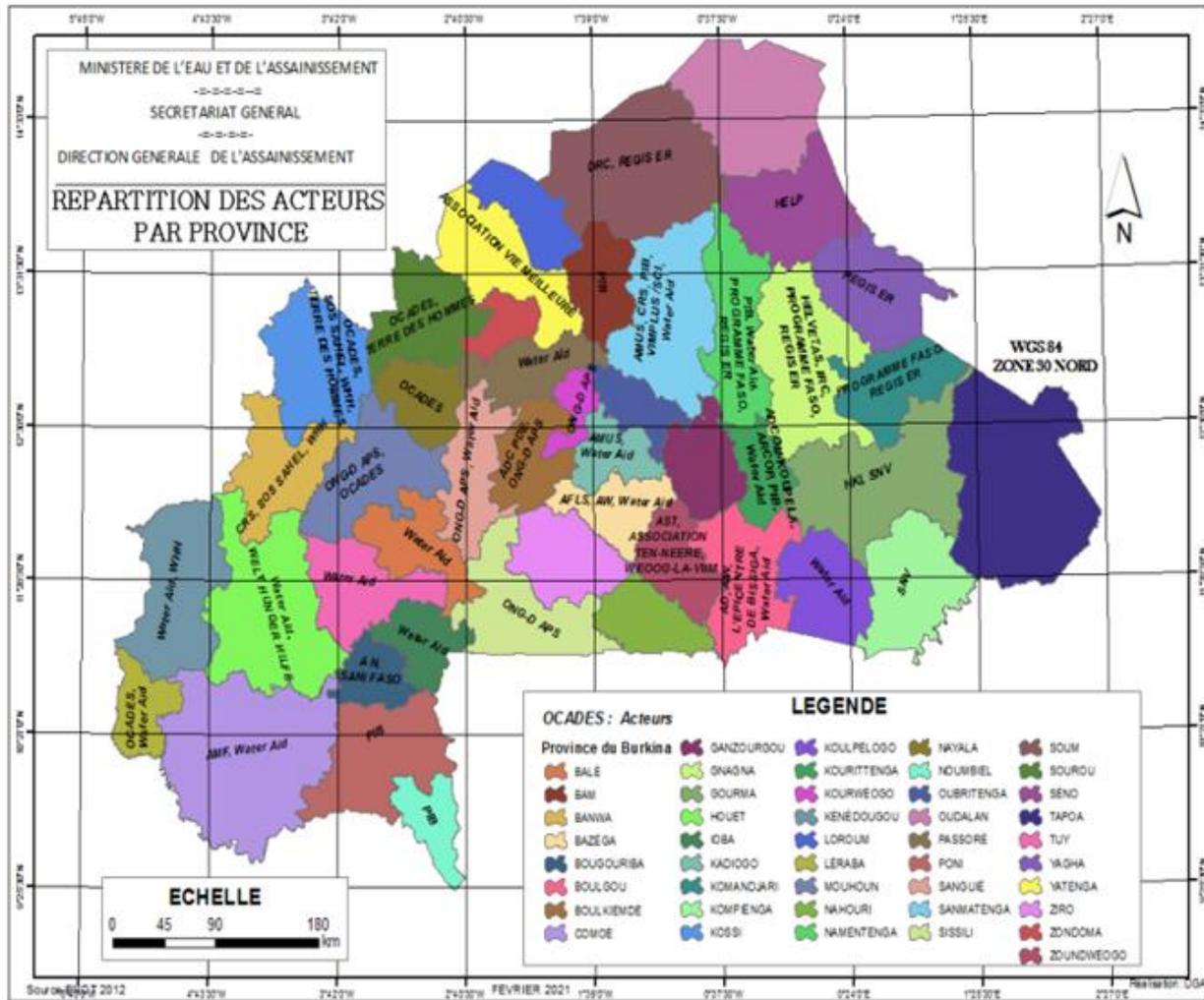
Implementation weaknesses:

- Implementing two types of subsidy approaches (with and without subsidies).
- Insufficient capacity of actors to fully implement their role and CLTS guidance for the different phases (e.g., triggering, certification).
- Unsustainable latrine structures using poor-quality construction materials and lack of Fecal Sludge Treatment Plants.

Recommendations to improve implementation:

- Establish a system for information sharing between implementing partners.
- Revitalize local monitoring actors such as the community monitoring committees.
- Strengthen the monitoring of awareness-raising activities.
- Strengthen the capacity of implementing partners on the CLTS implementation process.
- Strengthen the capacity of implementing actors, in particular the community monitoring committees, community health agents,
- Provide subsidies after the certification of the village to allow households to upgrade their latrines.
- Facilitators, water and sanitation technicians, masons and hygienists.
- Promote sanitation marketing.
- Improve accessibility of latrines for vulnerable people and those living with disabilities.
- Ensure communities develop initiatives to avoid slippage (e.g., sanctions, fines, social standards).
- Strengthen the existing consultation framework.

Figure 2: Implementing partners per region



Source: Ministry of Water and Sanitation

Discussion

Enabling environment

Despite the CLTS strategy and implementation manual, the enabling environment led to challenges in the implementation of the approach. To improve the enabling environment, strategic documents should be revised, leadership strengthened at all levels, roles and responsibilities clearly defined and local government should be more engaged to revitalize implementation.

The evaluation identified risks and opportunities to improve the enabling environment. Risks include changes in institutional arrangements, Technical and financial partner approaches and the disengagement of certain actors. Opportunities include experience in sanitation marketing, the development of the ODF urban strategy, the existence of Local Development Plans for Water and Sanitation in certain areas and the existence of concertation frameworks at the regional, provincial and local level, as well as a concertation framework between NGOs and technical and financial partners.

Implementation

The CLTS strategy was effective at creating awareness of the importance of sanitation and even changed social norms in certain areas. However, implementation was overall fragmented and poorly managed. Key challenges included a lack of coordination between implementing partners, poor understanding of the CLTS approach and rigid donor requirements forcing implementing partners to not apply the guidance from the implementation manual.

The two subsidy approaches had strengths and weaknesses and require more consideration. The evaluation provided data on both approaches, with and without subsidies, concluding that CLTS without subsidies accelerated latrine construction. However, the quality of latrines was higher in villages that received subsidies.

The evaluation identified risks and opportunities to improve implementation. The risks include a lack of security in certain parts of the country, the spread of small-scale gold mining, community-level conflicts and insufficient drinking water resources to implement hygiene and sanitation practices. Opportunities include the engagement of actors in sanitation, a sense of competition at the community level, and the involvement of self-defense groups.

Recommendations

The evaluation of CLTS implementation in Burkina Faso provided an overview of the implementation process, feedback on the CLTS phases and recommendations on how to address the challenges to achieve ODF status by 2030.

KEY RECOMMENDATIONS

- *Establish a consultation framework for all actors at the regional and national level.*
- *Inform actors on their roles and responsibilities in implementing the CLTS approach.*
- *Mobilize financial, material and human resources to ensure the sustainability of CLTS achievements.*
- *Strengthen capacity of actors on the implementation process of CLTS.*
- *Review the CLTS strategy and manual at national level and adapt the documents to realities in the field.*

Next Steps and Progress

Since the evaluation was completed in January 2021, the Ministry of Water and Sanitation has been working on implementing the key recommendations. Two key resources have been developed:

- National Wastewater and Excreta Sanitation Program Action Plan 2021-

2025: the objectives of the action plan are to promote good practices for hygiene and sanitation; ensure universal and continuous access to sanitation services; optimize the management and reuse of wastewater and fecal sludge; improve knowledge on wastewater and excreta management; and strengthen capacity in financing, management and leadership.

- Guidelines to accelerate progress to end open defecation in Burkina Faso: the purpose of the guidelines is to improve the implementation of the framework; strengthen the capacity of actors; and improve financial mechanisms.

The Ministry of Water and Sanitation is also working on improving sanitation beyond its ODF objective, aiming to achieve safely managed sanitation by 2030. In 2021, they released the Wastewater and Excreta Management Framework 2021-2025 with three priorities:

1. Consolidation of institutional performance.
2. Development of infrastructure, logistics and professionalisation of service management.
3. Strengthening citizen participation and building partnerships in wastewater and excreta management services.

References

Ministère de l'Eau et de l'Assainissement, 2021. Mise en œuvre de l'assainissement total piloté par la communauté (ATPC) au Burkina Faso : Etat des lieux.

Acknowledgements

This WASH results document is founded on the national CLTS implementation evaluation which included the participation of the 13 Regional Water and Sanitation Departments, representing every region of Burkina Faso. We would like to thank the following individuals for their input or review: Ahmedou Behah, Chief WASH (UNICEF), Halima Laoul Bachir, Monitoring & Reporting WASH Officer (UNICEF); Julienne Tiendrebeogo, Directrice générale (DGAEUE), Rakieta Kompaore, Directrice de la recherche action et de la promotion de l'assainissement (DGAEUE), Michael Emerson Gnilo (UNICEF HQ) and Anu Paudyal Gautam (UNICEF HQ). We would also like to thank UNICEF for financial and technical support, as well as all the stakeholders implementing the sanitation policy for their collaboration and contributions. This work was carried out under the IRC, UNICEF, Water For People Partnership for WASH Systems in Africa, funded by The Netherlands: Directorate General for International Cooperation (DGIS).

About the Authors

This WASH results document was authored by Sterenn Philippe, publications delivery manager, IRC (philippe@ircwash.org) and Karim Savadogo, WASH Specialist, UNICEF (ksavadogo@unicef.org).

About the Series

UNICEF's water, sanitation and hygiene (WASH) country teams work inclusively with governments, civil society partners and donors, to improve WASH services for children and adolescents, and the families and caregivers who support them. UNICEF works in over 100 countries worldwide to improve water and sanitation services, as well as basic hygiene practices. This publication is part of the UNICEF WASH Learning Series, designed to contribute to knowledge of good practice across UNICEF's WASH programming. In this series:

Discussion Papers explore the significance of new and emerging topics with limited evidence or understanding, and the options for action and further exploration.

Fact Sheets summarize the most important knowledge on a topic in few pages in the form of graphics, tables and bullet points, serving as a briefing for staff on a topical issue.

Field Notes share innovations in UNICEF's WASH programming, detailing its experiences implementing these innovations in the field.

Guidelines describe a specific methodology for WASH programming, research or evaluation, drawing on substantive evidence, and based on UNICEF's and partners' experiences in the field.

Reference Guides present systematic reviews on topics with a developed evidence base or they compile different case studies to indicate the range of experience associated with a specific topic.

Technical Papers present the result of more in-depth research and evaluations, advancing WASH knowledge and theory of change on a key topic.

WASH Diaries explore the personal dimensions of users of WASH services, and remind us why a good standard of water, sanitation and hygiene is important for all to enjoy. Through personal reflections, this series also offers an opportunity for tapping into the rich reservoir of tacit knowledge of UNICEF's WASH staff in bringing results for children.

WASH Results show with solid evidence how UNICEF is achieving the goals outlined in Country Programme Documents, Regional Organizational Management Plans, and the Global Strategic Plan or WASH Strategy, and contributes to our understanding of the WASH theory of change or theory of action.

Readers are encouraged to quote from this publication but UNICEF requests due acknowledgement. You can learn more about UNICEF's work on WASH here: <https://www.unicef.org/wash/>

www.unicef.org/wash

© United Nations Children's Fund (UNICEF)

The statements in this publication are the views of the authors and do not necessarily reflect the policies or the views of UNICEF.

United Nations Children's Fund
3 United Nations Plaza, New York, NY 10017, USA

For more information, please contact: WASH@unicef.org