This Weekly includes 2012 reports, videos, and blog posts on community-led total sanitation (CLTS). Included are a Water and Sanitation Program report on the economic costs and benefits of a total sanitation campaign in Cambodia, lessons learned from Plan Uganda, and a learning note on urban CLTS in India. Also included are recent blog posts about hand washing and CLTS and a debate about using shame to motivate behavior change. Previous weeklies about CLTS were distributed on January 20, 2012 and May 13, 2011.

Please let WASHplus know at any time if you have resources to share for future issues of WASHplus Weekly or if you have suggestions for future topics. An archive of past Weekly issues is available on the WASHplus website.

REPORTS/PRESENTATIONS

- **Community-Led Total Sanitation in Nigeria**, 2012. WaterAid. ([Presentation](#))
  A presentation that discusses the history and lessons learned from WaterAid’s CLTS program in Nigeria.

- **Economic Assessment of Sanitation Interventions in Cambodia**, 2012. Water and Sanitation Program. ([Full-text](#))
  The study aims to generate evidence on the costs and benefits of sanitation improvements in different programmatic and geographical contexts. It found that community-led approaches that lack proper technical support and follow-up have resulted in ineffective and inefficient latrine construction in poor rural areas. The self-made latrines usually collapse within a short period of time, people are reluctant to rebuild new ones, and hence most people return to open defecation.

- **Handbook on Scaling up Solid and Liquid Waste Management in Rural Areas**, 2012. Water and Sanitation Program. ([Full-text](#))
  In India, as sanitation coverage has scaled up and the number of open defecation free villages has increased, the focus of the Total Sanitation Campaign has widened to include issues such as waste management in rural areas. While technology options for
waste management are well known, the programmatic aspects of implementing a waste management program in rural areas are not as well understood. This handbook seeks to address this gap by focusing on the planning, institutional, community mobilization, and financial dimensions of implementing a waste management program in rural areas.

To improve people’s health, Plan Uganda introduced CLTS within its supported communities in the districts of Lira, Kamuli, Tororo, and Luwero in 2007. This publication identifies key CLTS processes, best practices, lessons learned, and challenges. It further suggests relevant recommendations that can inform government and development partners about this feasible approach to enhance rural sanitation.

This report describes how Nanded, an urban community in India, applied CLTS to stop open defecation and littering and became empowered to solve its own sanitation problems. It also describes the accomplishments and challenges Nanded faced in implementing the program, which was originally developed with rural communities in mind.

**BLOG POSTS**

- **Handwashing: Part and Parcel of CLTS?** ([Blog post](http://us2.campaign-archive2.com/?u=ed50820bda89f8241498bf4db&id=08f71e4be1&e=[UNIQID]))
A very lively discussion started around the subject of hand washing after someone raised the concern that hand washing is not a component of CLTS, saying that the CLTS Handbook does not make (sufficient) reference to it.

- **The Shame Question in CLTS.** ([Blog post](http://us2.campaign-archive2.com/?u=ed50820bda89f8241498bf4db&id=08f71e4be1&e=[UNIQID]))
An interesting debate about how the elements of shame, fear, and disgust are used during CLTS triggering sessions.

- **Is Shame a Bad Thing?** ([Blog post](http://us2.campaign-archive2.com/?u=ed50820bda89f8241498bf4db&id=08f71e4be1&e=[UNIQID]))
The question about whether it is ethical or right to use “shame” as a resource for facilitating change has been an emerging critique of CLTS. This question could be misleading, as the blogger points out, that at no point does CLTS require facilitators to say “shame on you” to target audiences for defecating in the open.

**VIDEOS/AUDIO**

- **CLTS in Emergency Response: Room for Inclusion?** 2012, M McLoughlin. ([Video](http://us2.campaign-archive2.com/?u=ed50820bda89f8241498bf4db&id=08f71e4be1&e=[UNIQID]))
A short look at the potential benefits and challenges of using CLTS in emergency response, with a focus on the Kenyan 2008 and 2013 elections.
  A video about CLTS successes in Kenya.

  Mr. Seck, Program Coordinator for the Community-Led Total Sanitation Initiatives in Southern Senegal, highlights the sanitation challenges that exist in Senegal and why CLTS is an important initiative to combat these challenges. He discusses how participation at the community level has helped change behaviors around sanitation and improved current conditions.

  The video discusses lessons learned in implementing a CLTS program in Lackson, which is a small village in Chikhwawa—a district in the southern part of Malawi.

  This video provides an overview of the WSP approach to CLTS training in a workshop setting that is inclusive and hands-on and also describes the steps involved in implementing the approach.

- **Ten Steps to Total Sanitation**, n.d. WaterAid. [Video]
  A video that outlines the problems caused by open defecation and specifies 10 steps that communities can take to achieve open defecation free status, leading to a reduction in disease.

Each WASHplus Weekly highlights topics such as Urban WASH, Indoor Air Pollution, Innovation, Household Water Treatment and Storage, Hand Washing, Integration, and more. If you would like to feature your organization's materials in upcoming issues, please send them to Dan Campbell, WASHplus knowledge resources specialist, at dacampbell@fhi360.org.

**About WASHplus** - WASHplus, a five-year project funded through USAID’s Bureau for Global Health, creates supportive environments for healthy households and communities by delivering high-impact interventions in water, sanitation, hygiene (WASH) and indoor air pollution (IAP). WASHplus uses proven, at-scale interventions to reduce diarrheal diseases and acute respiratory infections, the two top killers of children under five years of age globally. For information, visit [www.washplus.org](http://www.washplus.org)