

## CASE 10

# STRENGTH, SANITATION, AND SCALE

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**Sector: Water, Sanitation, and Hygiene (WASH)**

### CHALLENGE

#### The sanitation and hygiene deficit

Increasing sanitation coverage is challenging, it's often a story of deficits. Despite progress and national commitments, Vietnam is unlikely to achieve its MDG and national targets for rural sanitation and is already "losing" an estimated US\$ 287 million per year in mitigating the negative impact of pollution as a result of poor sanitation practices<sup>3</sup>. Poor sanitation outcomes primarily result from a failure to prioritise sanitation, cultural barriers, low awareness, lack of design options and are closely linked to poverty. The people who lack a voice in household or community decisions - often women and children - are those most affected. An estimated 50% of rural households do not have toilets, and of the other 50%, only 20% are considered to be hygienic. Diarrhoea and acute respiratory infections are the two leading causes of death and illness of children under the age of five in Vietnam<sup>4</sup>.

SNV has been supporting the government to pilot Community-led Total Sanitation (CLTS) since 2008 as a proven behavioural change tool for creating demand for sanitation and ending open defecation. The CLTS technique, widespread and successful in other parts of Asia and Africa, is new to Vietnam. The SNV pilot has been facilitated with 43 villages in three North West provinces of Lao Cai, Lai Chau and Dien Bien with support from IPADE. These provinces have a high diversity of ethnicity with approximately 80% being from the ethnic minority groups and an estimated 50% are households reported as living in poverty. The pilot is proving successful as an approach. However, increasing sanitation coverage requires building momentum with multiple stakeholders and mobilising resources to bring successes at scale.

### CLIENTS

SNV's programme supports the National Targeted Programme on RWSS 2006-2010 (RWSS NTP II) to meet the current target of 70% of people having sanitation services by 2010. SNV's clients are the Department of Health's Centre for Preventative Medicine (CPM) and IEC units of the three North West Provinces. At the provincial level, the CPM is the lead government agency for rural sanitation and environmental health issues. Key areas for strategic interventions are sector and policy coordination to advance sanitation; strengthening provincial capacities and participatory processes; scaling up innovations; and promoting private sector development. SNV adds value to the sector by developing the capacities at the commune, district and provincial levels to improve and manage local sanitation initiatives at scale. We work with local partners, such as the North of Vietnam College Agriculture and Rural Development (NVCARD) to introduce proven strategies such as community led total sanitation (CLTS).

### METHOD / SNV INTERVENTION

This case study focuses on the process of building momentum for a scaling up of sanitation to reach an additional 149 villages in 2010/11 as part of SNV Asia's Sustainable Sanitation and Hygiene for All programme. A key part of the process was a participatory review<sup>5</sup> of the pilot activities which aimed to facilitate learning amongst clients, partners, local capacity builders, communities and SNV about the sanitation demand creation process to date. Specifically the review tried to understand factors that generated success within the pilot, so that these could be replicated in an expanded programme. It sought to build shared understanding and enthusiasm with clients to work at scale on sanitation and adopted a Strengths-Based Approach (SBA) which explicitly focused on positive successes as an affirmative process, not deficits.

<sup>3</sup> WSP (2008): Economic Impacts of Sanitation in South East Asia

<sup>4</sup> MOH & UNICEF (2008), Poor sanitation putting children at risk in rural Viet Nam

<sup>5</sup> This case study is based on the review report, Bond, M (2009) SNV Vietnam Sanitation demand creation: a strength based review, SNV.

## OUTCOME

Strengths-based approaches concentrate on the inherent strengths of individuals, organisations, communities, groups, sectors or networks as the basis for identifying, connecting and mobilising them, for planning to achieve development or change and for working in partnerships.<sup>6</sup> Strengths-based thinking is based on the belief that there is always something that has worked or is working well in every context and that people move in the direction in which they focus, e.g. “focus on the positive and you will move in a positive direction”.

The review was undertaken by two provincial multi-stakeholder teams who took a strengths-based approach in their assessment, engaging with implementers, partners and beneficiaries in four communes to build an understanding of key successes, positive change and critical success factors that could underpin a scaling-up phase and create a supportive environment for positive change. In keeping with the approach, highly successful villages and communes were purposefully selected for the consultations. Participants were invited to describe their success with CLTS and then asked two questions: **what were the factors that led to this success** and **which of these factors were most important?** Discussions were supplemented with observation in the community of newly constructed or upgraded toilets arising from CLTS activities. These questions were presented at each level in the review — province, commune and village — and were answered and analysed in participatory forums by the many stakeholders involved. In a final consolidated sharing and analysis workshop participants were asked to review both the factors of success reported during consultations and also identify strengths and assets of their institutions that would contribute to scaling up sanitation.

It was not difficult to gather stories of success from those who involved in SNV’s CLTS pilot. In the two provinces visited it was clear that CLTS had generated strong change, both in reducing or eliminating open defecation and in mobilising households to build toilets. For example, in Quai Cang Commune in Dien Bien prior to the activities, open defecation was widespread and sanitation coverage across the commune averaged approximately 11.1%. Since 2009, the client’s and partners CLTS activities in the nine target villages mean that 607 of the 651 households now have a toilet; either newly constructed or upgraded increasing coverage to 93%. Open defecation has almost entirely ceased in these villages and the demand for improved sanitation was widespread.

The commune leaders were trained for CLTS - at the same time as the village leaders—and played a strong role in the pilot program along with the women and men who participated in the CLTS activities in driving behaviour change within their households. The Commune Chairman noted that before there could be any attempt to change behaviours in the village, the attitude of village leaders needed to change and that the CLTS process had been very successful in doing that. Two additional successes shared in this commune were incorporating a ban on open defecation into the commune regulations and inclusion of CLTS promotion through the Commune Health Station staff. Along with community spirit, the mobilisation of communities by the village leaders was the most commonly cited factor of success for CLTS. ‘Leaders’ in this context extended well beyond the Village Head and included Village Health Workers, officers from the broad range of mass organisations found in villages including the Women’s Union, and, in Quai Cang, members of the WASH Action Groups.

Problem (or deficit) based approaches in development can risk not recognising existing strengths and assets. This process sought to build ownership and a greater sense of engagement through acknowledging and mobilising the existing assets, strengths and resources owned and identified by the stakeholders to contribute to scale-up of CLTS. For example, the provincial governments identified their responsibility and authority for rural sanitation and hygiene along with their well trained and experienced staff and capacity as key assets to be committed. The Women’s Union identified the extensive grass roots reach of their active membership and organisation, their enthusiasm, and that sanitation and hygiene was part of their programs as commitments that would support the scale-up. The commune level nominated their capacity in CLTS, their understanding and relationships with communities.

<sup>6</sup> The review methodology was based on a draft paper by Rhodes, D. (2009), [Discussion Paper for AusAID: Strengths Based Approaches: Advantages and Possible Uses](#).

## IMPACT

Strength based thinking encompasses both a philosophy about how to constructively engage people, as well as a set of tools for practical application<sup>7</sup>. For the review, the methodology enabled the team as key stakeholders to become clearer about the desired future for improving sanitation outcomes, building on the existing success and mobilising what resources are available in the particular context to move forward. The key factors of success from the review are currently being incorporated into the scaling up to 149 villages in the northwest provinces. This process with the key stakeholders will support the sanitation demand creation program as it becomes district-wide and will be strengthened by a focus on behaviour change communication, sanitation planning and supply chain development for small to medium-sized enterprises. The experiences from the process will also be shared with key stakeholders through a national workshop in 2011.

## LESSONS LEARNED

Strength based thinking deliberately focused the attention, conversations and learning towards the successes. The approach proved well-suited to generating learning and mobilising shared commitment and enthusiasm amongst clients, SNV staff and other stakeholders in preparation for scaling up a sanitation programme. Focusing on success and the positive outcomes was designed to enable stakeholders at each level to discuss and deepen an understanding of their current situation in positive terms and draw out both specific information about the existing context and a positive attitude and sense of existing capacity and optimism.

The objective of the process and its limitations needs to be clear and takes time and preparation with the teams. For this purpose it was not intended as a formal evaluation and whilst it clearly provided a basis for comment on factors traditionally associated with evaluation — such as relevance, impact, sustainability and effectiveness — assessing these in a comprehensive, programme-wide manner was beyond the review scope. For the team it was a shift from people's experiences with more traditional deficit-oriented approaches and this was reflected in the considerable debate initially about the limitations of not considering weaknesses. Strength based approaches can provide a structured way of working collaboratively which focused on achieving motivation and commitment based on actual experiences between the stakeholders. In practice, the shared understanding generated by the review provided a platform for SNV to talk about and address any deeper issues.

<sup>7</sup> Rhodes, D. (2009), *Discussion Paper for AusAID: Strengths Based Approaches: Advantages and Possible Uses*.