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Engaging with government to scale-up community-based total sanitation in Indonesia

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In 2007 Plan International Indonesia (Plan Indonesia) adopted Community-Led Total Sanitation (CLTS) as its only approach for implementing sanitation projects in its 9 Program Unit sites. The adoption of CLTS represented a new paradigm: sanitation was to be approached through a behaviour-change lens, focussed upon generating bottom-up demand for toilets, as opposed to a top-down, service-provision, subsidy model. In 2009 Plan Indonesia was the first international NGO in the country to embark upon a massive scale-up of its CLTS program in partnership with national, district and sub-district government.

The aim of this scale-up is to achieve open-defecation free (ODF) status across 66 of the poorest sub-districts in Indonesia by 2014, and also to develop a replicable model for further government-led CLTS projects in neighbouring priority districts. This paper outlines the process being undertaken to achieve this scale-up, the key factors that have enabled it and the lessons learned so far.

Sanitation in Indonesia

The need to invest in improved sanitation and support the achievement of universal toilet coverage in Indonesia is compelling. More than 94 million people, or 43% of the population do not have access to a toilet (World Bank, 2008). The consequent health impact of poor sanitation is evidenced by World Health Organisation (WHO) data recording 35,000 deaths each year due to diarrhoea, representing 18% of deaths in children under five years of age (World Health Organisation, 2006). The financial burden associated with poor basic sanitation has also been revealed by a World Bank study, concluding that the annual economic impact for Indonesia is approximately US$6.3 billion, representing 2.3% of Indonesia’s GDP (World Bank, 2008).

With a growing population, and an increasingly short timeframe to achieve Millennium Development Goal 7C which seeks to halve the number of those without basic sanitation by 2015, there has been a national government acknowledgment that financial subsidies for sanitation both fail to achieve the necessary scale of toilet coverage, or sustained toilet use and behaviour change. In 2008 the Ministry of Health therefore formulated a new national sanitation policy, entitled ‘Community-Based Total Sanitation’ (known in Indonesia as ‘STBM’ - Sanitasi Total Berbasis Masyarakat). The strategy consists of five key pillars:

1. Stop open defecation using the CLTS approach
2. Hand-washing with soap
3. Safe Water Treatment and Safe Storage
4. Household waste water treatment
5. Household garbage treatment

In addition, the Government of Indonesia declared its commitment to improved sanitation in rural and urban areas in its Mid-term National Planning (RPJMN) 2010-2014, highlighting the following targets:

1. 100% ODF status in rural and urban areas using CLTS by 2014
2. 38% households have access to improved solid waste treatment (sanitary landfill) by 2014
3. A decrease in stagnant water to 22.5 Ha in 100 urban strategic areas
4. Increase in percentage of households using ‘healthy latrines’ from 64% in 2010 to 75% by 2014

The National Water Supply and Environmental Sanitation Working Group (known in Indonesia as the ‘Pokja AMPL’) has the task of leading the roll-out and achievement of these sanitation targets across Indonesia. The working group is headed by the national government planning agency, BAPENNAS, with membership from other national ministries, multilateral agencies (World Bank WSP, UNICEF) and international NGOs, including Plan Indonesia. Since 2003 the Pokja AMPL has been working to mainstream water and sanitation programmes in district government planning. Of note, since 2005, 150 districts of the 398 districts across Indonesia have established active District Water Supply, Environmental Sanitation and Hygiene (WASH) Working Groups.

Research purpose, methodology and limitations

The purpose of this research is two-fold; to take stock and reflect upon the process of scaling up CLTS in partnership with government, and also to draw out some of the key lessons learned and enabling factors that have made the scale-up of CLTS possible. This research paper seeks to provide readers with practical information and learnings that can add to the growing knowledge bank of information on the topic of CLTS.

The research has adopted a strengths-based approach, whereby research analysis and reflections have focused upon the strengths and enabling factors which have facilitated the implementation of CLTS at scale. This research has been compiled using multiple methods, including internal and external document reviews, staff discussions and quantitative analysis of project results to date.

This research paper has been compiled by Plan International staff and does not represent the views and opinions of all project stakeholders. The research has offered an opportunity for Plan Indonesia staff to reflect upon the project process and outcomes to date, it does not therefore represent a comprehensive, independent and thorough analysis of CLTS scale-up in Indonesia.

The process of scaling-up CLTS

Between 2003 and 2007 Plan Indonesia had spent US$1.5 million on household toilet construction, yet only 15,000 toilets had been constructed (US$100 / toilet) benefitting a relatively small 45,000 people. On top of this, Plan staff observed many community members slipping back into the practice of open defecation, preferring this to toilet use. The sanitation approach had to change. The creation of a formal partnership with the National Water and Sanitation Working Group and the adoption of CLTS in 2007 represented the change that was required for Plan Indonesia to achieve large-scale and sustained impact in its sanitation program.

Following a CLTS pilot period from 2007 – 2009, in which Plan Indonesia developed its own capacity and knowledge in the area of CLTS alongside other members of the National Working Group, Plan Indonesia embarked on a massive scale-up of its CLTS program with two equally important aims established:

- **Aim 1:** To build the knowledge and commitment of district and sub-district government partners in the CLTS approach in order to facilitate government leadership and on-going replication of the model.
- **Aim 2:** To achieve open-defecation free status across 66 of the poorest sub-districts in Indonesia by 2014, representing over 1.2 million people.

The model that Plan Indonesia is using to scale-up its sanitation program draws upon the approach developed by the World Bank Water and Sanitation Program (WSP) in Indonesia, Total Sanitation and Sanitation Marketing (TSSM), focusing specifically on the experience of WSP in Trenggalek district (East Java), where almost 30% of communities were declared ODF by early 2009. Building upon an existing approach that has been well-tested and resourced by WSP and taking this to scale, clearly represents a logical route for any NGO to take, particularly given the government aim of having a standard model for CLTS programming nation-wide. During the CLTS pilot period, Plan Indonesia staff visited Trenggalek district and met with WSP staff in order to learn more about the success factors and lessons learned, so that the model could be refined and replicated.

To date, Plan Indonesia has invested considerable time and funding into the process of district and sub-district government capacity-building in the STBM policy and CLTS more specifically (aim 1). While at the national level there is a high degree of skill and understanding about what this policy actually means...
(including a pool of CLTS Master Trainers), at the district level there is a great need to invest in intensive awareness-raising in order to change government attitudes and approaches in sanitation, from a standard subsidy approach, to the CLTS approach. To date, Plan Indonesia has decided to work in partnership with district governments where there is already a district WASH working group, and also some existing knowledge and support for the STBM policy i.e. start where the working environment is a little easier and get some rungs on the ladder, before expanding to the more challenging districts. In each of the districts where Plan now works it has signed a Memorandum of Understanding with the government to formalize the commitment to work together on STBM.

The flow diagram below (Figure 1) details the main steps that Plan Indonesia has undertaken so far in order to raise district and sub-district government capacity and commitment towards the STBM policy, this is followed by some pictures which illustrate some of the key events in this process. To measure the success of this capacity-building over the short-term, Plan Indonesia monitors the work of each sub-district sanitation task force and the use of their district budget funds.

![Flow Diagram](image)

**Figure 1. The Steps for raising the knowledge and commitment of district and sub-district government staff in the CLTS approach.**
Once sub-district roadshows have been conducted, Plan Indonesia staff and sub-district sanitation task forces turn their attention to the implementation of CLTS at the village level (aim 2). CLTS triggering does not commence in a village until the sub-district sanitation task-forces have received a village acceptance letter from the village head, which formally commits the village to working towards ODF status. This level of formality helps to ensure that commitments from the village are taken seriously by villagers themselves and by sub-district sanitation task forces. It also enables sub-district government staff to identify those communities that are particularly enthusiastic about CLTS, which again helps the project to work in the ‘easier’ communities first, as well as then promote these ODF villages to other village heads in the sub-district who may be less convinced about the CLTS approach.

Training is a critical and large component of the CLTS implementation process. CLTS Master Trainers from the National Water Supply and Environmental Sanitation Working Group deliver CLTS training to community-facilitators. These facilitators often come from the ‘village health forum’ (the posyandu), which
has the advantage of being an existing, permanent body, and therefore the role of facilitator fits naturally into their pre-existing job function. Achieving a near equal gender balance is considered a very important factor in the selection of community facilitators, given the need for these facilitators to appeal to the entire community as they seek to pressure and convince all segments of society about the need to build their own toilet, from mothers, fathers, teenagers, children, widows and the elderly. Since this project represents a scale-up, in any one particular district, Plan Indonesia may be funding multiple five day CLTS training sessions for 300 – 400 community facilitators, from multiple sub-districts, involving up to 10 CLTS National Master Trainers and 10 local co-training teams. These figures shed light on the implications of scale-up; the need for detailed planning, organized logistics and a well-resourced team of individuals to make sure the training proceeds as planned.

Once community facilitators have been thoroughly trained in the CLTS approach (workshop and field-based training), they return to their community and identify natural leaders who can assist in triggering the village to become ODF. Triggering households to build their own toilets is the lynchpin of the CLTS process, it is where the zeal, drive and commitment to become ODF is realized in a community. Post triggering phase, sub-district sanitation task forces are tasked with maintaining the momentum for latrine construction. It is the sub-district governments that organize for these task forces to regularly visit the villages in order to monitor progress and provide occasional pressure on those households who are failing to fulfill their commitments. Throughout this process of achieving ODF status, Plan Indonesia staff fulfill a supportive backseat role, with government staff, facilitators and community members being the key drivers of change, thereby ensuring that activities are locally led and owned.

A great deal of importance is placed upon ‘ODF Celebrations’, in part to provide status to those communities that have become ODF, and also to provide further incentive for non-ODF communities. Funded by Plan Indonesia, but organized by sub-district sanitation task forces, these ODF celebrations may include a speech from the sub-district and or district head, the uncovering of a village sign declaring that ODF status has been achieve, the exchange of a certificate or award from the district head to the village head, various media activities (local radio and newspaper) and community-wide celebrations. Such events require considerable planning and organization, a step which should not be under-estimated in terms of the time and resources required, yet the investment is particularly worthwhile if it serves to convince yet to be declared ODF communities of the need to push ahead. The photos below provide insight into the process of a community becoming ODF.

Photograph 4. CLTS training with village facilitators, a 5 days event to learn the techniques of triggering and CLTS monitoring  
Source: Plan International Indonesia

Photograph 5. Community starts building non-subsidized toilets, after successful triggering  
Source: Plan International Indonesia
Key factors enabling CLTS scale-up
While Plan Indonesia is still in the early stages of its CLTS scale-up, there are multiple factors that have enabled this scale-up to occur, without which it wouldn’t have been possible. These factors are detailed below:

- A clear, realistic and up-to-date government water and sanitation policy (STBM)
- The existence of an active, skilled and government-led National Water and Sanitation working group (Pokja AMPL): This group does much more beyond your standard networking meetings. The group pro-actively shares materials, co-funds national learning events, and shares the pool of Master CLTS Trainers. Government members of the Pokja AMPL have also participated in district CLTS Roadshows, thereby adding weight and importance to these events. The existence of this group facilitates and encourages nation-wide adherence to the national STBM policy.
- The existence of CLTS ‘champions’ within government from the national level down has enabled Plan Indonesia to galvanize their support in order to influence other government staff who may be wary of supporting CLTS.
- A well funded and resourced program within Plan Indonesia: On the surface CLTS has cost savings, since there is no direct subsidy for the cost of household toilets, yet in reality, for CLTS to work well there needs to be significant funding to support the staffing, training and awareness raising costs that are necessary to make CLTS work, particularly in the early stages of scale-up. For example, just in Grobogan district alone where Plan Indonesia is funding CLTS in 10 sub-districts, there is a 2 year budget of US$858,570 targeting a population of 500,000, while in Soe and Kefa districts (East Nusa Tenggara) there is a 4 year budget of US$2.5 million targeting 56 sub-districts and a population of 600,000. Achieving the aims of this scale-up over a relatively short period of time clearly therefore requires a realistic and well-designed budget.

Lessons learned
While the scale-up of CLTS is still very much a work-in-progress for Plan Indonesia, there have already been some important lessons learned. These lessons learned have been broken down into the categories of working with duty bearers, and techniques and approaches.

Working with duty bearers:
- Maximise the value of the partnership with government from the national level down so that government staff, as the ultimate duty bearers, take responsibility for achieving the aims of the program. From the start Plan Indonesia has assumed a ‘support’ role rather than a lead role, while government staff have assumed the more visible, leadership function in the program.
- The commitment and pro-active engagement of staff from BAPENNAS, the head of the national WASH working group has represented a huge asset, since their political influence has served to legitimize the program and added a subtle pressure on district governments to implement CLTS effectively.
- Formalise the commitments of government and communities through the signing of declarations and letters which set out the responsibilities of stakeholders, thereby creating an accountability mechanism.
- Anticipate and expect resistance to the CLTS approach from district officials and community leaders who do not want to change from a subsidy approach to toilet construction. Convincing CLTS sceptics requires more than a single roadshow or workshop, rather an exposure visit to a site of CLTS success, coupled with multiple events involving high-level government officials and government champions which can serve to turn these sceptical views around. Acknowledging that each individual will embrace or resist CLTS to differing levels is a project reality that needs to be factored into project activity schedules and timelines.

Techniques and approaches:
- It is important to take a strengths-based approach to project implementation. Focus at first upon those communities that are eager and keen to achieve ODF status. Later on, draw upon the momentum of success to convince reluctant villages to join others in becoming ODF. Also maximise the value of local champions who can promote CLTS through their peer networks, be they natural leaders in the community or sub-district officials.
Maximise the effect of local cultural values which emphasize community collaboration and volunteerism, so that all households are able to construct a toilet. In the case of Indonesia, the term ‘gotong-rotyong’ or ‘working together’ provides the perfect platform for triggering the CLTS process. ‘Gotong-rotyong’ encapsulates the spirit of volunteerism and is a common feature of community life. Against the backdrop of this important cultural value, communities can self-direct the construction of toilets and provide particular support for households where toilet construction represents a real challenge e.g. the poorest community members, the sick or widowed.

Utilise the skills and experience of well-established CLTS Master trainers who can ensure that proper standards of training are upheld. In Indonesia the pool of CLTS Master trainers endorsed and supported by all members of the National WASH working group, provides an ideal model for rolling-out the adoption of CLTS across the country.

**Moving forward**

The process of scaling-up CLTS has been afforded a high degree of importance both within Plan Indonesia and amongst peers within the National WASH working group (Pokja AMPL), all of whom are interested to learn about the impact of this scale-up. It is for this reason that in 2011 Plan Indonesia will be funding some external research in partnership with the national government planning agency (BAPENNAS), which seeks to answer some critical questions about the impact of CLTS. The research will be undertaken in 3 culturally-diverse regions of Indonesia, and will assess the impact of CLTS programs implemented by Plan Indonesia, the World Bank TSSM program, and the Ministry of Health. The objectives for this research are:

1. To examine community understandings of and the factors contributing to successful sanitation transformation at individual, household and community levels in each programming district
2. To identify factors affecting sustainability of ODF initiatives in order to identify opportunities and ways to strengthen CLTS initiatives at the village, sub-district and district levels based on community and government officials’ perspectives
3. To identify factors affecting the interest of government officials to engage with CLTS programmes

It is hoped that this collaborative research will reveal some useful and practical information on the impact of CLTS, which all members of the working group can use for their own CLTS programs. It is certainly timely that this research be undertaken, given the importance that CLTS has been afforded in achieving Indonesia’s ambitious target of achieving 100% ODF status in rural Indonesia by 2014.

**Conclusion**

This paper has sought to draw attention to the realities and practicalities of achieving a scale-up of CLTS. For Plan Indonesia this CLTS scale-up has been aided by a supportive enabling environment, in which government engagement and partnership has formed the foundation of the program approach. Nevertheless, the start-up investment of time and finances in order to generate momentum and pro-active support amongst district and sub-district government officials cannot be underestimated. While the full impact and success of this CLTS scale-up is yet to be fully realised, there are promising signals that such an approach provides a replicable model for achieving 100% household toilet coverage across an entire district, thereby offering hope that the government of Indonesia and its people can all enjoy the benefits of a healthy and hygienic ODF environment.

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**References**


Note/s
1 CLTS is an approach that supports communities to collectively analyse their sanitation profile, their practices of defecation and their consequences. CLTS aims to ‘trigger’ communities into action so that they can become ‘Open Defecation Free’ through the construction and permanent use of toilets using locally-available materials (no financial subsidy is provided for the toilets).

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