



In this edition

- From the sector ministry: welcome to the first edition of the Sentinel
- Government makes significant SWA commitments
- Ministry to launch a National Campaign against open defecation soon
- GES launches national minimum standards and implementation models for WASH in Schools

From the sector ministry: welcome to the first Edition of the Sentinel



Demedeme Naa Lenason - Ag. Director-EHSD

The Sanitation Sentinel thus provides partners and all stakeholders including the general public with authentic stories and progress from the field with just a few stories on national issues that are also related to the Community-led Total Sanitation (CLTS) approach to solving our basic sanitation problems.

Ghana has come a long way in adopting the CLTS approach as a Rural Sanitation Model after series of stakeholder consultations and consensus building. The CLTS approach had been piloted in various parts of the country by a number of local and international partners and it had shown some positive results. It became evident that it needed a national level adaptation and scale up when an

assessment report by an independent consultant was shared.

The Ministry of Local Government and Rural Development (MLGRD) responded positively to this and a number of study tours to Asia and other parts of Africa were organized with support from some of our development partners. No less a personality than the originator of the concept himself, Dr. Kamal Kar, was subsequently invited into the country.

[Continue on page 7](#)

EDITORIAL COMMITTEE

Demedeme Naa Lenason	-	Editor-In-Chief (EHSD)
Emmanuel Addai	-	Editor (Consultant)
Pauline Tambro	-	Member (CWSA)
Evelyn Baddoo	-	Member (UNICEF)
Tony Tsekpetse	-	Member (EHSD)
Abubakari Wumbei	-	Member (IRC)
Ellen Gyekye	-	Member (GES/SHEP)
Ben Arthur	-	Member (CONIWAS)

Government makes significant SWA commitments

“ Chairman, Distinguished Participants, Ladies and Gentlemen, I wish to conclude that Government of Ghana is committed to universal equitable access to sustainable water and sanitation for everyone, everywhere by 2025. We will continue to deploy the needed financial, human and material resources to implement national policies and programmes to realize our national sanitation, water and hygiene goals.”



Hon. Seth Terkper - Minister of Finance & Economic Planning

This concluding statement by the Minister of Finance, Hon. Seth Terkpe, summed up Government's commitment read at this year's Sanitation and Water for All High Level Meeting in far away Washington DC.

The major twist this time is the more specific and time-bound commitments associated with this long term ambition. Government commits to reducing open defecation rate to 8% from the current 18% and increase improved sanitation coverage to 54% from the current 14% within the next two years.

To achieve this target the government hopes to get parliament to ratify the Sector Environmental Sanitation Investment Plan (SESIP), while the Ministry of Local Government and Rural Development in collaboration with the Ministry of Finance commit GH¢50 million, (US\$20 million) seed money to partner with the private sector and with sanitation entrepreneurs and the youth to support the acceleration of household sanitation delivery in the next two years.

With an estimated cost of US\$402 million per annum of capital expenditure on sanitation, Government will through the Ministry of Finance commit US\$50 million per annum leaving the deficit of US\$352 million for key stakeholders and partners including private sector and households to fill. This is in view of the fact that the CLTS approach places more responsibility of household latrine construction on individual households.

To achieve the target of everyone everywhere having access to reliable safe water and basic sanitation by 2025, a national study on equity and inclusion will be conducted by the Ministries of Water Resources, Works and Housing and Local Government and Rural Development and their Departments and Agencies by the end of 2015 to further improve the assessment of the marginalized and pro-poor groups. This will facilitate effective targeting of resources for the poor, marginalized and vulnerable groups.

The Ministry of Finance is also committed to developing systems and procedures to track financial resources into the WASH sector, while the various Ministries and their Departments and Agencies will continue to be open, frank, transparent, and work closely with civil society to promote knowledge management initiatives and support actions that will sustain community initiatives.

The statement also indicates that the Ministries of Water Resources, Works and Housing and Local Government and Rural Development and their Departments and Agencies will also commit to improving coordination of delivery approaches in the WASH sector. In this direction, copies of approved sector operational documents will be made available to all key sector interlocutors, district assemblies, NGOs and development partners. A major drive towards providing orientation and training on the national norms, standards and guidelines will be undertaken in the next two years to improve on adherence to the legislative requirement for delivering WASH services in Ghana.

EHSD kicks off sanitation knowledge management programme



The Environmental Health and Sanitation Directorate, with support from the Dutch government and UNICEF, is currently implementing a Sector Sanitation Knowledge Management Initiative (SKMI). The overall aim of the initiative is to facilitate systematic learning, reflection, sharing, documentation and production and dissemination of training and learning materials so that lessons emerging from monitoring and specific research are fed into continuous improvements in approaches and methods adopted by the sector.

The SKMI aims to institutionalize information flow to all sector actors to strengthen knowledge management capacity through systematic training, and to ensure that learning is fed into improved policy and practice. The SKMI is also expected to result in the implementation of a consultative process leading to the development and publication of an annual Sanitation Status Report with regional and district level information.

The initiative is being implemented by an IRC-led consortium involving, TREND, the Resource

Centre Network (RCN), and the Kwame Nkrumah University of Science and Technology (KNUST). Each of these members has already contributed tremendously to knowledge development and sharing in various forms to Ghana's Water and Sanitation sector.

The main operational activities of the SKMI Consortium include "Conversation and Activities" through which research, monitoring and evaluation (M&E), reflection, knowledge sharing and learning take place; "Documentation" of processes used (minutes, plans, etc.) and lessons learned (briefing notes, videos, stories) to create tangible source of information on what happened and how. The activities also include "Management of Information" to keep all knowledge management information organized and accessible in the longer term. Other activities include "Communication and Dissemination" to target audiences in the right format at the right time.

Ministry to launch a national campaign against open defecation soon

The Ministry of Local Government and Rural Development will soon launch a national advocacy campaign to end open defecation in the country and establish a social norm of always using a toilet or latrine to defecate.

The open defecation rate in Ghana is one of the highest in Africa and stands at 18% as at 2014, while only 14% of the population uses improved household latrines in the country. Accordingly, the top ten OPD cases, according to health authorities in Ghana, are caused by sanitation and hygiene-related illnesses.

Speaking at a stakeholders meeting in Accra in March, a Programme Officer at the Environmental Health and Sanitation Directorate, Kwaku Quansah, said 'sanitation is such that no single agency can solve all the problem so every institution must come on board.'

The meeting was jointly organized by the Environmental Health and Sanitation Directorate and the Department for Community Development in March to introduce the campaign plan to regional representatives.

The Campaign has been designed as a booster to programmatic efforts currently on-going with sanitation delivery. The campaign has been especially designed to help accelerate the rate of implementation of the Community-led Total Sanitation (CLTS) approach, which has been adopted as Ghana's Rural Sanitation Model. It involves advocacy from local to national level and intensive communication for behavior change from open defecation to the use of toilets or latrines.

A number of influential people in the Ghanaian society have been identified as major targets to help promote the social norm of using a toilet or

a latrine facility. These include key government officials from national, regional and Metropolitan, Municipal and District Assembly levels, Parliamentarians, Chiefs and Traditional Authorities, leaders of Faith-based Organisations, and partners and other institutional stakeholders in the sanitation sector of Ghana. Famous Ghanaian celebrities will also be invited to support the campaign as sanitation ambassadors.

The campaign, supported technically and financially mainly by UNICEF, the Department of Foreign Affairs, Trade and Development (DFATD), Canada and the Directorate-General for International Cooperation (DGIS), Netherlands, will be implemented more intensively in the five most off-track regions towards meeting the MDG targets and at the same time with the highest open defecation rates in the country, namely: the Upper East Region, the Upper West Region, the northern Region, the Volta Region and the Central Region.

Various components of the campaign include establishment of strong partnerships with all necessary institutions and stakeholders, strong branded mass media campaigns and massive communication for development at all levels, target setting from national to district level and monitoring of its implementation using the media and other means, and intensive community-level campaigns in the five selected regions.

It is expected that by the end of the campaign period, less than five percent of people living in the five most affected regions of Ghana will be practising open defecation and at least 54% of them will be using improved toilet or latrine facilities.

GES launches national minimum standards and implementation models for water, sanitation and hygiene in schools



The Ghana Education Service (GES) has developed national minimum standards and implementation models for water supply, sanitation and hygiene (WASH) infrastructure and services in all schools in the country. The minimum standards and models were disseminated at a National Level Learning Alliance forum organized by the Resource Centre Network (RCN) and held in Accra on 27th March, 2014.

As a minimum standard, every school must have a reliable water supply system, facilities for handwashing with soap, separate toilet and urinal facilities for teachers, boys and girls, a programme for menstrual hygiene management and facilities for solid waste management and drainage.

The implementation models comprise guidelines for sanitation, water and hygiene interventions. More specifically, separate and detailed guidelines that have been developed include: a technical guide for siting and construction of toilet facilities, facilities management plan, school WASH facility checklists, education guide on WASH in schools, children in CLTS implementation, guidelines for establishment of school health clubs, identification and development of youth and children ambassadors for WASH, and a manual for menstrual hygiene management.

The model also suggests ideas for programming to create a positive policy and program implementation environment, programming to promote facilities and for hygiene behaviour change among pupils, within schools, and programming to ensure community/parent participation and ownership of issues with WASH in schools.

It will serve as a guide for the construction of all new school blocks and for all WASH interventions in schools by government or any development organisation.

Speaking on the usefulness of the model, the Chief of WASH at UNICEF Ghana, David Duncan, said it was critical to have a national strategy and plan for WASH in schools. He said it was necessary especially for fundraising, whereby government will always be aware of how much resources are needed at every given moment. He also said a national strategy on WASH in Schools was critical for eliminating duplication in programme implementation by various development agencies.

In her closing remarks at the forum, the Director of the Curriculum and Research Development Division of the GES, Mrs Cynthia Bosumtwi-Sam, who chaired the workshop on behalf of the Acting Director General, called for effective collaboration among the Ministries of Water Resources, Works and Housing, Local Government and Rural Development and Education to ensure that water was available in all schools since water was critical in ensuring adequate sanitation and in maintaining proper hygiene in schools.

The project is being funded by UNICEF, the Directorate-General for International cooperation (DGIS) of the Netherlands and the Department of Foreign Affairs, Trade and Development (DFATD) of Canada, with UNICEF also providing technical support.

From the sector ministry: welcome to the first Edition of the Sentinel

Continued from page 2

While in Ghana, Dr. Kamal Kar met with stakeholders at all levels from community, through regional to national levels and provided a lot of guidance and inspiration. He triggered a number of communities into stopping open defecation and achieved some immediate and impressive outcomes.

The scale up of the approach across the country has since been progressive. With active technical and financial support from a number of partners notably UNICEF, the governments of Canada through the Department of Foreign Affairs, Trade and Development (DFATD) and Netherlands, through the Directorate-General for International Cooperation (DGIS), the World Bank, and UNILEVER, as well as commitment from local government offices, the Community Water and Sanitation Agency, and a number of local and international NGOs including World Vision, SNV, Plan and WaterAid, CLTS is now being implemented almost in every region in Ghana.

However, there are still a number of challenges on the ground. The rate of progress has been slow so far, as several thousands of communities are yet to be entered. There are also reports on a few communities reverting to the old practice due to irregular follow-ups. Furthermore, several influential authorities and personalities are yet to be brought into the picture, while a viable urban version to the CLTS approach is still being explored. The more communities are triggered, the higher the demand for latrines. And this presents yet another challenge to the sector as to how to respond to the increasing demand for latrines.

Nonetheless, the results so far achieved within just two years of implementing the programme are quite impressive. There are reports of massive community interest in some of the regions, where the number of households now having latrines in those

areas have virtually doubled within this short period.

The Ministry of Local Government and Rural Development is considering number of strategies in this direction. A national campaign against open defecation will be launched within a couple of weeks; training on sanitation marketing and communication for development was recently organized for the Department for Community Development, the Environmental Health and Sanitation Directorate, the Ghana Education Service and a couple of other stakeholders with support from UNICEF, the DGIS of the Netherlands and the DFATD of Canada. A mass media concept is being developed to tackle open defecation in larger cities. Some of the regions have even already been running mass media programmes to support the visibility and scale-up process. Various social media channels including Facebook, Twitter, Flickr and YouTube have been created, while a sector sanitation portal and newsletter are almost ready to be launched. In addition, the EHSD has recently introduced a Sanitation Knowledge Management Initiative being implemented by a consortium to manage sanitation sector information and knowledge to feed into effective policy-making and learning in the sector.

The Ministry acknowledges the relentless efforts of partners, and regional and district level staff for their interest and passion for the success of CLTS in Ghana. The Ministry also encourages all stakeholders to support the programme, especially by coming up with ideas on how to respond to the increasing demand for latrines to maximize and sustain the gains made in ending open defecation in communities. Private entrepreneurs are also encouraged to develop viable business models for latrine promotion.

A Moment with Martha Tia Adjei - Northern Regional CLTS Coordinator



Martha Tia Adjei is the Northern Regional Community-led Total Sanitation (CLTS) Coordinator. Professionally she has been an Environmental Health Officer since 2001. She has been associated with CLTS since 2008 as a member of the facilitation team until she was appointed as a Regional Coordinator.

Making a comparison between the origins of CLTS in Ghana and the current policy of CLTS as a Rural Sanitation Model, Martha recounts a number of initial challenges that have already been considerably surmounted. She says since the subsidy-led approach was still operational during the time, it was very difficult to even talk about an intervention without subsidy in communities, especially where nearby communities had already enjoyed it.

“Their attitudes and the kind of questions they asked you sometimes simply implied that they thought you had collected money from government or donors and you did not want to release it.” Martha says.

She says even among some institutions and professionals in the sanitation sector that was sometimes the mentality.

She recounts again incidences where within one community where CLTS programme had begun only to be abandoned because another partner came in to introduce subsidies so the communities had to snub the CLTS team and go for the cash.

Another major initial challenge with piloting CLTS in parts of Ghana, according to Martha, was the fact that logistical support was very limited even though the approach requires regular monitoring visits to communities. This usually culminated in failures as triggered communities relapsed and restarted open defecation.

“But with the full implementation of the Rural Sanitation Model and the abolishing of latrine subsidies, the story is changing.” Martha says.

Martha says as at June 2014, out of the 26 Metropolitan, Municipal and District Assemblies (MMDAs) in the Northern Region, 14 were already implementing CLTS. She says a number of districts are already on the path of achieving district-wide open defecation-free (ODF) status as majority of their communities have already been triggered into stopping

the practice and they have plans of working towards completely achieving 100% latrine coverage.

She says implementing the concept is easier now as no one is bringing subsidies and all major sanitation partners are now working together to promote it.

Since 2012 that the full implementation of the Rural Sanitation Model started, 550 communities in the region had been entered out of which 448 had completely stopped open defecation in addition to other hygiene and general environmental sanitation practices.

“The difference is very clear and visible when you move from non-CLTS communities to CLTS communities.” She says.

Martha says these successes within just two years have not come on a silver platter. According to Martha, in addition to the traditional community triggering approach, the region has embarked on a vigorous advocacy campaign working with local celebrities and politicians and musicians. Local musicians have supported a radio advocacy programme with anti open defecation compositions in local languages. The radio programmes involve public education against open defecation through testimonies from triggered communities and natural leaders. Recorded jingles and messages of encouragement from key regional leaders including religious leaders, Chiefs, Regional Minister, and some District Chief Executives are played back on radio regularly to tell residents in the region to stop open defecation and use a toilet.

As a result, according to her, though there have not yet been any assessment, there are feedbacks that several people have constructed their own latrines at home. One radio station, Zaar FM, for instance has decided to continue producing a 30 minute anti open defecation programme per week after their three-month contract with the Environmental Health and Sanitation Directorate (EHSD) ended. Again, during the programme, several people phone in to announce their support for the initiative.

A number of challenges still exist, according to the Regional Coordinator. The fact that nearly 50% of MMDAs are not yet implementing CLTS is the most prominent challenge. Though the EHSD has been advocating for all MMDAs to start the programme, many of them are yet to come on board because of lack of funding.

“As I talk, only UNICEF is mobilizing resources from various partners to fund the programme in 13 out of the 14 MMDAs implementing the programme.”

According to Martha, there are still incidences of communities relapsing due to lack of frequent monitoring because of limited logistical support. She also says there is limited staffing for CLTS in almost all the MMDAs in the programme.

In spite of these and other challenges, Martha says she is convinced that with more funding support and commitment, CLTS has the key to stopping open defecation in the Northern Region, which had up to 72% of its residents practising open defecation, the third highest regional open defecation rate in Ghana behind Upper East and Upper West Regions.

Kpando Municipality: Determined to be ODF by end of 2014

The Kpando Municipal Environmental Health Officer, Yaw Adams, has said his outfit is determined to move every rural community in the municipality to an open defecation-free status. His determination, according to him, is derived from about 18 months of sustained success in implementing Ghana's Rural Sanitation Model, which is an adaptation from the Community-led Total Sanitation (CLTS) approach.



Mr. Yaw Adams

Demographics

The Municipality has a population of about 93,000 inhabitants, mostly engaging in peasant farming, fishing and a few others in trading. The Municipality shares boundaries with Biakoye District in the North, Afadzato District in the East, and North Dayi District in the South. The Volta Lake, which stretches over 80km off the Atlantic Ocean, constitutes the western boundary.

Municipal CLTS statistics

After decades of latrine promotion through other approaches by the government and other partners before the CLTS programme began in September 2012, the then Kpando District could boast of only 217 household latrines. There was no record on any community that was free from open defecation in the municipality. But after just 18 months of implementing the new model, available statistics as at March 2014 indicates that 280 improved household latrines had been constructed and in use with locally innovated handwashing facilities, while 207 more were under construction. Out of 190 communities triggered into accepting the CLTS concept, 137 had already attained basic Open Defecation-Free (ODF) status, meaning they had

stopped open defecation and in a process of constructing various types of latrines using any locally available technology to contain their faeces. In terms of attainment of full ODF status, where at least 80% of households have latrines and everybody in the community is using an improved latrine, six communities had so far reached that level. And this is where the entire municipality wants to reach come December 2014.

The origin

The Kpando Municipal Assembly took part in a regional start up workshop in Ho earlier in 2012 and subsequently formed a Municipal Inter-Agency Coordinating Committee on Sanitation (MICCS). Later on Kpando hosted an implementation workshop for the five implementing MMDAs in the Region. This is where various teams and committees were formed. The then district also organized a study tour to Tamale, where the approach had been implemented for some time. Full implementation of the Rural Sanitation Model commenced in August 2012.

With sponsorship of the programme mainly from UNICEF and the Canadian government through the Department of Foreign Affairs, Trade and Development (DFATD) and the Government of Ghana, Kpando was given only 65 communities for the implementation phase. But by dint of hard work and dedication, the Assembly was later granted more funding from the partners to cover 70 more communities, while an additional funding for 50 more communities was provided to an NGO.

Major success factors

The most significant contributing factor to the success of the programme in the municipality is the dedication of field staff to the extent that most of them even go to the extent of sometimes sacrificing their personal financial resources to sponsor community visits. They are hardly discouraged by the mostly unfriendly terrains and the sometimes hostile community reactions, coupled with scepticisms from some stakeholders within the sanitation sector about the effectiveness of the approach.

Another major contributing factor is the formation of the Municipal Inter-agency Coordinating Committee on Sanitation (MICCS). This committee comprises several departments mostly with high stakes in



sanitation affairs. They include the Ghana Education Service, Ghana Health Service, Department for Community Development, Traditional Authorities among others. They meet regularly to deliberate on effective collaboration to ensure the success of the programme, as well as conduct joint monitoring activities.

Partners

UNICEF and the DFATD have remained the main funding and technical support partners so far, while the government has also contributed mainly in the provision of staffing and motor bikes to facilitate community visits and monitoring. In the field, however, main partners for implementing the programme have been the traditional authorities, opinion leaders (usually referred to as Natural Leaders in CLTS lexicon), and Assembly Members. The municipality has also liaised with church leaders for access to their congregation to trigger more communities.

Challenges

The biggest challenge to the programme is inadequate funding impeding regular monitoring and incentives to get Natural Leaders to work harder. "It is quite painful when, after triggering a community, we are unable to conduct regular follow-up visits to encourage them to sustain their new conviction to stop open defecation basically due to lack of funds," says Mr. Adams. The Municipality also lacks enough staff to undertake the job and one main remedy would be the availability of Natural Leaders to perform the extension work. Yet the authorities are unable to provide any minimum travel incentives and enough

training to support these Natural Leaders.

Ways forward

Determined to move the whole Kpando Rural to an ODF status by end of 2014, the Municipal Environmental Health Officer and his team have lined up various strategies aimed at getting every community on board.

"All stakeholders will be involved; we will intensify the education in households, churches and through local public address systems and FM stations to sustain the behaviour, while we explore more innovative ways to promote improved latrine intake," Says Mr. Adams. ODF communities will also be celebrated publicly in order to encourage others to emulate their good examples, while recalcitrant communities will be named and shamed in the process for them to sit up.

A humble appeal

The MEHO did not mince words in extending a strong appeal to all potential sponsors to support the programme. This is not limited to only traditional external support agencies but also to local corporate institutions to see it as a social responsibility or even a business opportunity. According to the MEHO, the approach has proven to be effective in the Municipality and for Ghana and all that is required is massive belief in it and financial support. He also said Natural Leaders from rural communities have been able to trigger even other communities in addition to their own so it should be possible for every Ghanaian to also personally get involved in the fight against open defecation wherever they may be.

Time with Natural Leaders

We had to wake up at 4am daily to patrol the community

Says Edinam Bluwey



Edinam Bluwey

Determined to rid her community of unprotected faeces Edinam Bluwey, a natural leader at Gadza, a rural community in the Kpando Municipality in the Volta Region of Ghana had to wake up at 4am daily. The reason was simple; join the Chief and other community leaders to patrol the community to enforce the community legislation against open defecation.

“Some District Environmental Health Officers visited our community in September 2012 and started asking us a number of questions while they took us through an exercise. By the end of the exercise, we all realized we were eating back our own faeces and those of others.

As soon as we admitted this they sought permission to leave but we said no. Please tell us what we can do to stop this. They then said, well, the best way to end open defecation and stop eating our own faeces is to construct and use latrines at home.

They helped us to draw our action plans, which we (two natural leaders) later presented at a workshop in Kpando a couple of weeks later on behalf of the community.

We returned from the workshop with more energy and determination to work with our community to eliminate this shameful practice.

We were lucky to have a number of latrine artisans trained through a DANIDA funded

project earlier so we got a lot of technical support from them to construct our latrines.

The Chief and his elders and other community leaders were all determined to support the implementation of the plan, which also included the imposition of a spot fine of a bag of cement for offenders.

Together with the chief and other leaders, we woke up at 4am each day to patrol the community and ward off any attempt at open defecation and I think the penalty and the enforcement was heavy enough to help stop the practice.

Because this is a large community of more than 1,800 residents, we have not yet achieved 100% latrine coverage. We are close to achieving 80%. But all latrine owners have agreed to leave their latrines unlocked and allow those who do not yet have, as well as passers-by and other visitors to use their facilities rather than the bush.

The two main natural leaders supporting the CLTS programme have also teamed up with other natural leaders in five nearby communities to form a Natural Leaders Union to extend the message to all surrounding communities so that the whole district can be open defecation-free (ODF). With the level of understanding and compliance in Gadza, we hope to achieve 100% ODF very soon.

We are happier now as we feel respected in this area. Everybody is talking about us and others are even learning from our shining example,” says Edinam.

How do you feel when you receive visitors and you have no toilet? Asks a Natural Leader

“My name is Lawrence Osae, a Natural Leader from Gadza in the Kpando Municipality in the Volta Region. I have been promoting the construction and use of household latrines since 2002. But my work became even easier when the Environmental Health Officers introduced the Community Led Total Sanitation (CLTS) approach in September 2012.

Time with Natural Leaders



Lawrence Osae

Unlike the former approach whereby people were expected to construct only approved standard latrines, CLTS rather focuses first on stopping open defecation. It therefore allows people to start with any type of latrine they can afford.

One simple question has helped me to trigger many people from this community and even from other communities to realize the need for a household latrine and the dangers associated with open defecation.

I simply ask them; how do you feel when you receive visitors and they want to go to toilet? It turns into a long story and experience sharing and that's it! It sets them realizing that they lack a great deal of dignity in front of cherished and respectable visitors.

If everybody would be honest he would tell you how difficult it is to tell a visitor to just enter the bush to defecate. So when I engage people in such conversations and they start remembering how they have had such shameful experiences, they usually take a decision and there we go! This strategy has helped me a lot in getting my peers to construct their own latrines.

If I get the opportunity to address a large crowd, my number one message will be that open defecation kills and that it is even the biggest shame to surround oneself and one's community with faeces."

I was the first person they contacted and I also inspired others

Mahama Kofi is a citizen of Kugrago in the Garu Tempene district in the Upper East Region. In a chat with Emmanuel Addai, the 57 year-old food crop and vegetable farmer, with two wives and 16 children, narrates how he was involved in raising his community to an open defecation-free status and maintaining it for two years.



Mahama Kofi

"The Environmental Health Officers came here in 2012 and I was the first person they contacted. I supported them to mobilize the community, where they led us into long discussions on how we managed our faeces and also managed our general environment.

The whole community was excited with the discussions as we had been made to our past mistake of accepting open defecation as a norm and seeing nothing wrong with it.

I was particularly ashamed of myself as being part of such a mess over so many years in my life. I embraced the idea and went ahead straight away to construct my own latrine. And I was the first in this community to construct and own a latrine.

Indeed I started enjoying my new latrine such that I was even prepared to show it every visitor to my house. I was eager to help my whole community so I voluntarily offered it for use free of charge for anyone who wanted to try it.

Time with Natural Leaders

This simple strategy really helped me to achieve my aim; most of the people I offered my latrine for use ended up constructing their own latrines and eventually every household constructed and started using a latrine.

Now I am glad to acknowledge my own contribution to making Kugrago an open defecation-free community. I am so scared to see faeces in the open so I have even gone beyond Kugrago to three other nearby communities where most of them have already constructed their latrines.

The problem with diarrhoeal diseases and the dangers of entering the bush just to defecate is no longer a headache, and I am so glad that nobody at Kugrago defecates in the open. We feel more secure in terms of spread of diseases, snake and scorpion bites and other dangers. I have more time and energy to concentrate on my farming activities."

UNICEF and DFATD (Canada) are the main financiers of the Community-led Total Sanitation (CLTS) programme in the Garu Tempane District. CLTS is the rural sanitation model being implemented by the Government of Ghana. Out of 212 communities in the district, 64 have definitively stopped open defecation and vowed never to revert to the 'out-of-fashion' practice in less than two years of implementing the programme. Overwhelming evidence from the field indicates that with more and sustained support, the CLTS approach will help the country reduce open defecation drastically and within a very short time, and help the country to improve on its comparatively poor sanitation status.

Even my little baby refuses to defecate on the ground

Mohammed Sanatu, a Natural Leader from Kpamang in the Yendi Municipality, says even her two-year old daughter refuses to defecate on the ground after the household got its first ever latrine one year ago.

"My baby even refuses to use a chamber pot; she simply prefers using the latrine." She said with a broad smile and a clear sense of pride.



Mohammed Sanatu

Kpamang, 15 minutes drive from the Municipal Capital, Yendi is an open defecation-free community with 13 households. The community was triggered in 2013 and within a few weeks, every household had constructed a latrine.

Sanatu says she is happier with the way the Environmental Health Officers work with her community now. "Previously they used to summon us for prosecution anytime they visited here. Now they rather dialogue with us and we now understand them better." She says.

Sanatu says if she travels to a community where there are no latrines she would not defecate if possible. But in case she has to do it, she would pick a hoe, dig and bury the stuff and show the people that she is from a community where open defecation is outdated and outlawed.

Sanatu appealed to every Ghanaian to stop open defecation and help to stop others who are still practicing it. This, according to her, is because the country needs to spend money on better things and not on medical bills.

Model communities

How Avegah community stopped open defecation:

Cephas Afelete and Akpe Samuel, Natural Leaders, tell the full story



Akpe Samuel

// This village used to be very filthy. By filthy I mean full of faeces in every corner at the fringes of the village and at the corners of the road. Even right inside the community and behind various households, children defecated and their faeces hardly cleared in time. Hardly did we know the kind of dangers we had exposed ourselves to. It looked so normal for us. All we cared for was our daily economic and other social activities.

In September 2012, this behaviour began to change thanks to the visit of the Municipal Environmental Health Officers one day. They convened a community meeting involving the Chief and almost everybody in the community.

They asked us a series of questions including where we defecated, how we felt when we received visitors, how we preserved our cooked food and drinking water, how often and when we washed our hands before eating, whether we washed our hands with soap, what kinds of diseases were most rampant in the village among hundreds of other questions. The more they asked the more difficult it was for most of us to tell them the exact answers.

In the end we simply realized that we had been eating our own faeces and even those of our neighbours be they our friends or our foes! We learnt that flies, fowls and even the wind had been carrying back our faeces from the bush into our food. Our stream must also have been

contaminated with our faeces and we had definitely been drinking the stuff. Hmmm...

We realized we needed to construct latrines immediately since that was the only way we could stop defecating in the bush. We then decided right there in the presence of the visiting officers. To start with, they told us we could build any type of latrine within our means. That would be the first most important step to stopping the shameful behaviour.



Cephas Afelete

When we had constructed a number of latrines within a few months after the visit, the Chief imposed a spot fine of fifty Ghana cedis on anybody caught in the act. This was a definitive end to open defecation." This narration was by Cephas Afelete.

"At first we thought it was a bad idea," said Samuel Akpe as he joined the conversation, "but now we are proud to receive visitors almost every week to chat with us how we got there." He continues; we agreed to allow multiple households to jointly construct and use a latrine, while others also freely share their latrines with those who cannot construct their own latrines. Look at the fowls (as he points to some chicken that were feeding around us); you will notice that their feet are clean and you don't see any faeces on them. This is a proof that our efforts are yielding results.

We have also selected six people from this village who go round nearby communities to support them to construct their latrines free of charge. But we need to support them with some

incentives to motivate them to work harder. We would not mind any form of support.

I wish to advise all Ghanaians that open defecation is behaviour of the past. In a modern world, no visitor would expect to see people squatting in bushes and by the road side and defecating. Since we all try to avoid seeing faeces a second time, we agree it is a bad thing. We should all therefore try to avoid putting them at such wrong places."

ODF Verification Maatse Lowcost misses narrowly!

Maatse Lowcost is located in the Ho Municipality in the Volta region. The community was triggered by the Environmental Health Sanitation Department in October 2013. Much improvement was seen after their triggering. The four selected Natural leaders were very vibrant. There were two females and two males, including an elderly man who is a Pastor and has a church in the community.

Every household had a latrine with a hand washing facility attached. The environment was very clean and open defecation had stopped. An Environmental Health Officer had helped them with their community self-assessment and they passed and attained the ODF Basic status. The leaders in the community were so happy and went further to apply at the regional level for Regional verification to certify them to ODF status.

On that fateful day, the entire community was ready to be part of the National Verification and Certification Process by the Independent Verifier. Community members were happy to see the team and proudly declared their latrines and hand washing facilities. All drop holes were well covered such that there was no evidence of human excreta in contact with flies. The refuse dumps were clean and tidy and there were no "shit bombs" (feces wrapped in polythene).

Just when the process was about to end and the verifier was walking through the alleys to the community gathering, he spotted something very unusual and almost unnoticeable- a child feces! The presence of any form of human feces automatically is a failure to attaining ODF status. Even though the community came out with a score of 96%, the presence of the child feces prevented the community from attaining their

much desired ODF status. It was such a shock and unbelievable news.

Days after, a visit to the community told the story of how important sanitation was to them. A chat with the Natural Leaders and some community members revealed their disappointment. One male natural leader (the Pastor) commented: "I could not eat the whole day; I was so disappointed that I almost fell sick. We have worked so hard, educated the entire community on the importance of confining feces and staying healthy, our leaders have been very helpful in the process and just one recalcitrant person cut our dreams short ,hmmmm!!! Nevertheless, we have not lost hope: we will go back and do our homework well, apply again and this time we know we will pass."

A woman who was very concerned said " We know the women who have children here since it's a small community, we do not know whose child did that, but as mothers of the community we have educated them and know it will never happen again."

When the question on the importance of sanctions on open defecation was thrown to the community members, the response by another Natural Leader was that "Why should we have sanctions on open defecation? It does not happen here, if we make such rules, we are encouraging open defecation. What happened the other day was one out of the extraordinary and it will never happen again".

When asked about what change Community Led Total Sanitation (CLTS) has brought to them they said, among other that anal cleansing material is properly disposed, community refuse dump is always clean and well maintained, other visiting community members take away the hand washing innovation. They also said that visitors are excited about the 'scented water' for handwashing, while latrines are now more spacious and there is no clutter.

Finally it was time to bid farewells and it was much more heartwarming and hopeful than the farewells that were bid on the day of verification. This time, the farewells had a feeling of "Please come back again to certify us, we are not giving up and we will definitely pass."

Children & Youth

Pupil applies School Hygiene Club lessons: constructs latrine for his family



Naphtali Abuge

AJHS one pupil from Kumpergo in the Kassena Nankana East District in the Upper East Region could not bear with the culture of defecating in the bush when he returned home from Kumasi. He therefore constructed a double pit latrine at home and uses it with his grandmother, brothers and two sisters.

The 17 year-old Naphtali Abuge had lived in Kumasi but had to move to his hometown last year to continue his education.

“When I came I noticed that everybody was defecating in the bush and I did not like it. I also joined the Hygiene club in our school, where our teacher also taught us a lot of lessons about cleanliness. I therefore decided to construct this latrine,” says Naphtali.

According to Naphtali, he dug the sub-structure, constructed the super structure and roofed the latrine himself with support from his siblings.

“I would advise any community I visit where there no latrines to at least dig and bury their faeces instead of defecating in the open because I know it is not good for their health.” Naphtali says.

He advised all school children to refrain from open defecation because they all know it is not a good practice. With determinate they can also construct their own latrines and use because it is not difficult to construct.

Kumpergo is one of the shining examples in the CLTS programme in the Kassena Nankana East District. Every household in the community has a latrine. With a population of 293, Kumpergo was introduced to CLTS in 2012.

A major inspiration from Kumpergo is that children, the aged and even the physically challenged have all taken keen interest in sanitation and hygiene and have gone ahead to construct latrines to save their community from the dangers of open defecation. There is even a story of two primary school children a brother and sister who could not wait when they noticed that their parents were delaying a decision to construct a latrine; they went ahead of their parents and constructed a latrine for the family. An 80 year-old leper is said to have been the first person in the community to have constructed a latrine with support from his children and this inspired all others to follow suit.

Hygiene

Health, Hygiene, and Menstrual Education gets boost through WhatsApp



Participant demonstrating with improvised menstrual pad during training on Menstrual Hygiene Management. Photo shared through WhatsAppGroup during training at the North Dayi District, Volta Region, 2014.

The Health, Hygiene Education through Play and Sports (HHETPS) and the Menstrual Hygiene Management (MHM) activities component of the WASH in Schools programme in Ghana has received a boost through the WhatsApp application.

The project coordinators have seized the opportunity offered by the availability of smartphones in Ghana and the popularity of the application to set up a WhatsApp Group that links the teachers of all the

schools in the programme, the Ghana Education Service/SHEP focal persons, UNICEF, Right to Play and DFATD (Canada), which constitute the primary stakeholders of the WASH in Schools Programme in Ghana.

The application is helping a great deal in monitoring and exchange of experiences within the programme. The WhatsApp Group gives all the partners and stakeholders on the platform the opportunity to know what various schools on the project are doing. Schools are also inspired by each other's posts and updates on the platform and these get them motivated to carry out more of their activities and also post them on the platform. Announcements and other important information regarding the project are also shared on the platform.



School Children from Keta AME Zion in group hand washing with Soap after engaging in Health, Hygiene Education Through Play and Sport (HHETPS) activity. Photo posted on the WhatsApp Group from Keta AME Zion Basic School in the Keta Municipal, Volta Region. 2014



Ministry of Water Resources, Works and Housing

WASH Sector Events Calendar

SMARTerWASH District Level Training (Organised by CWSA)	July-August, 2014	Central Region, Brong Ahafo, Northern Region, Upper East Region and Upper West Region - Ghana
WaterLinks Forum 2014	August 11-13, 2014	Ortigas, The Philippines
WASH TrackFin Meeting1 (Organised by MWRWH)	August 12, 2014	Coconut Grove Hotel, Accra
Triple-S EPE Debriefing	August 14	Erata Hotel, Accra
2nd Annual - Africa Food Security Conference & Agri- Exhibition	August 12-13, 2014	Nairobi Kenya
National Stakeholder Workshop - WASH Financial Tracking (WASH TRACKFIN) Initiative	August 15, 2014	Fiesta Royale Hotel, Dzorwulu
Business solutions and micro finance for basic sanitation in Ghana	August 18th, 2014	Crystal Palace Hotel, Tesano, Accra
3rd International Conference on Community and Water Services,	August 22-24, 2014	Kandy, Sri Lanka,
RCN Steering Committee meeting	August 23, 2014	IRC Conference Room, Airport Residential Area, Accra
Base of the Pyramid (BoP) World Convention & Expo,	August 28-30, 2014	Singapore
NLLAP: Sanipath High Level Meeting	August 26, 2014	Accra
2014 World Water Week in Stockholm	August 31- September 5, 2014	Stockholm, Sweden,
5th IASTED African Conference on Environment and Water Resources Management	September 01-03, 2014	Gaborone, Botswana
Technical Training in Water & Sanitation Infrastructure	September 8 -13, 2014	BushProof, Madagascar
37th WEDC International Conference	September 15-19, 2014	Hanoi, Viet Nam
National Learning Alliance Platform (SKMI)	September 25, 2014	Accra
National Learning Alliance Platform (WAG-Sharing)	October 7, 2014	Accra, Ghana
AfricaSan 4: Fourth Africa Conference on Sanitation and Hygiene	October 8-10, 2014	Dakar, Senegal
2014 Water and Health Conference	October 13-17, 2014	Chapel Hill, North Carolina, USA
Global Handwashing Day	October 15, 2014	Accra, Ghana
IWA Specialist Conference on Global Challenges for Sustainable Wastewater Treatment and Resource Recovery	October 26-30, 2014	Kathmadu, Nepal
National Learning Alliance Platform	October 30, 2014	Accra, Ghana
The Mole XXV WASH Conference	November 4-8, 2014	Mole, N/R - Ghana (TBD)

Continue on the next page

West Africa Clean Energy and Environment (WACEE) Exhibition and Conference	November 04- 06, 2014	Accra International Conference Centre
World Toilet Day	November 19, 2014	Accra, Ghana
Annual National CLTS Stocktaking	December 2-5, 2014	Kumasi, Ghana
Faecal Sludge Management Conference 2015	January 19-22, 2015	Hanoi, Viet Nam,
Nexus 2015:Water, Food, Climate and Energy Conference	March 15-17, 2015	Chapel Hill,NC
2015 Sustainable Water Management Conference,	March 15-18, 2015	Portland, Oregon, USA
World Water Day 2015: Water and Sustainable Development	22 March 2015	Ghana (TBD)
7th World Water Forum	April 12-17, 2015	Daegu and Gyeongbuk, Republic of Korea
2015 Water Microbiology Conference	May 18-22, 2015	Chapel Hill,NC, USA

Compiled by Resource Centre Network (RCN) Ghana



Disclaimer

This publication has been funded by UNICEF, DGIS, DFADT, and UNILEVER, Views expressed in this publication do not necessarily reflect the views of the donors.

Contact for further information
The Director, Environmental Health and Sanitation Directorate
Ministry of Local Government and Rural Development
Box MB 50, Ministry, Accra Ghana
Tel: +233 302 682015
Email: mlgrdehsd@gmail.com
www.ehsdghana.com