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Kamal Kar, Pioneer of the Sanitation Movement: Collaborative Experiences

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Abstract

In Nepal, sanitation initiatives have evolved since the International Drinking Water and Sanitation Decade, with the National Sanitation Policy 1994 broadening its scope. The country achieved Open Defecation Free (ODF) status in 2019, but subsequent evaluations revealed regression. The study emphasizes the need for sustained behavior change among communities and shifts the role of Water, Sanitation, and Hygiene Coordination Committees from implementers to facilitators. Collaboration between researchers like Dr. Kamal Kar and Ashok Pandey led to comprehensive evaluations, uncovering challenges in sustaining ODF status. The study underscores the importance of community empowerment and strategic planning for long-term sanitation outcomes in Nepal.

Keywords: ODF, Pioneer, Sanitation.

Background

Innovative ideas emerge from the minds of researchers who are dedicated to exploring new frontiers, challenging conventional wisdom, and seeking novel solutions to complex problems (Pandey & Gautam, 2020). Through their relentless pursuit of inquiry and experimentation, researchers contribute to the development of cutting-edge technologies, breakthrough therapies, sustainable practices, and insightful theories (Khadka et al., 2017; Ong et al., 2023).

In Nepal, sanitation promotion formally started after the commencement of the International Drinking Water and Sanitation Decade (1981-1990) (GoN, 2020). Later, the National Sanitation Policy 1994 expanded the scope of sanitation, not only for the construction of toilets but also for the promotion of sanitation and hygiene and the improvement of public health. The school Sanitation and Hygiene Education Program and National Sanitation Awareness Campaign have been promoted in Nepal since 2000. Since 1997 with the support of UNICEF, Nepal has implemented the School Sanitation and Hygiene Education (SSHE) programme. The SSHE programme was designed to promote water supply and sanitation facilities in schools, transform students' behavior through awareness creation and promote community sanitation through child club mobilization.



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From 2003 through 2004 Nepal applied the Community Led Total Sanitation (CLTS) approach (Kar & Chambers, 2008). However, before the systematization and scaling up of the CLTS approach beginning in 2005, Nepal conceptualized and started to apply School Led Total Sanitation (SLTS).

Open Defecation Free Status of Nepal

Prime Minister Oli acknowledges the achievement of declaring 753 Palikas (local government units) and 77 Districts in Nepal as Open Defecation Free (ODF). This declaration reflects Nepal's commitment to improving sanitation standards and ensuring access to proper sanitation facilities for all its citizens. It underscores the importance of sustained efforts to achieve comprehensive sanitation goals, not only in terms of eliminating open defecation but also in promoting overall sanitation and hygiene practices to enhance public health and well-being. Key milestones such as the formal declaration of ODF status for school catchments and clusters, as well as the first Village Development Committee being declared ODF in 2005, underscore the incremental progress made in sanitation efforts. The recognition of sanitation as a social campaign after the International Year of Sanitation in 2008, along with the formulation of the Sanitation and Hygiene Master Plan (SHMP) in 2011, provided a strategic framework and targets for achieving ODF status nationwide. The United Nations General Assembly indeed recognized the right to water and sanitation as a human right on July 28, 2010. The resolution, passed by the UN General Assembly, explicitly acknowledged that clean drinking water and sanitation are essential to the realization of all human rights. Despite challenges such as the 2015 earthquake, which impacted progress in some districts, Nepal's commitment to sanitation and hygiene remained steadfast. The decision by the National Sanitation and Hygiene Steering Committee to declare Nepal as an ODF country by September 30, 2019, reflects the culmination of years of concerted efforts and collaboration among various stakeholders (Adhikari & Adhikari, 2021).

Introduction of Community-Led Total Sanitation (CLTS) Approach

The introduction of the CLTS approach in 2003 and other initiatives like School Led Total Sanitation (SLTS) in 2005 have been instrumental in driving progress in sanitation and hygiene practices across the country. The introduction of the CLTS approach in Nepal played a pivotal role in mobilizing communities to take collective action towards ending open defecation. Pioneers Dr. Kamal Kar, who developed the CLTS approach, and organizations like Plan International and UNICEF were instrumental in promoting CLTS and building capacity among local stakeholders to implement it effectively (Kar & Chambers, 2008). Professor Robert Chambers is renowned for his pioneering work in participatory development methodologies. He is credited with developing the concepts of Participatory Learning and Action (PLA) and Participatory Rural Appraisal (PRA).



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Under Chambers' guidance, PLA and PRA have become widely adopted approaches in the field of international development, influencing policy, research, and practice including CLTS. Community-Led Total Sanitation has been implemented in various countries including Nepal, Bangladesh, India, Pakistan, Indonesia, Cambodia, Ethiopia, Kenya, Zambia, Uganda, and Tanzania. Additionally, initiatives have been undertaken in urban poverty alleviation, slum improvement, and local governance in India, Mongolia, Bangladesh, and Cambodia.

Working together with Pioneer Dr. Kar

The UNICEF headquarters in New York assigned the task titled "Evaluation of Sanitation Programme Outcome in Nepal," which was led by pioneer Dr. Kamal Kar as the team leader, alongside Ashok Pandey, a public health expert who also fulfilled the role of data analyst. The evaluation employed a participatory mixed-method approach, encompassing a desk review of documents, interviews disaggregated by gender and vulnerable groups (including 25 Focus Group Discussions, 29 Key Informant Interviews, and 10 Site-Specific Group Interviews), as well as surveys conducted with 2468 households (comprising 1863 males, 1031 females, 23 LGBTQIAs, 34 boys, and 91 girls). Furthermore, the evaluation involved direct observation of various sanitation facilities, including 2423 household latrines, communal latrines, school sanitation facilities, government office sanitation facilities at provincial, district, and municipal levels, open defecation sites, a community pond used for bathing and anal cleansing, tube wells, a water testing lab, and handwashing facilities within municipalities geared towards addressing the challenges of COVID-19 in recent years. Additionally, two municipal WASH strategic plans were examined.

The evaluation culminated in a provincial-level validation and lessons learned workshop in Madhesh province, a national-level validation session, and a consolidation workshop involving all evaluation team members after the field evaluation. The survey findings highlighted that 54.70% of household latrines lacked handwashing facilities, and 44.2% of households did not have handwashing stations adjacent to toilets. Although 60% of the population used soap for handwashing, 40% relied solely on water. The findings also indicated a regression in the Open Defecation Free (ODF) status, with the prevalence of open defecation ranging from 17.6% (lowest) in Mugu Karnali to 23% (highest) in Kapilavastu.



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Conclusion

Nepal attained Open Defecation Free (ODF) status in 2019. However, during the evaluation conducted two years later, it was observed that all eight districts, where many municipalities had previously achieved ODF status, regressed to open defecation practices. The key insight gleaned from the evaluation is that while an externally driven social movement and facility extension approach may lead to rapid ODF attainment, it does not ensure sustained behavior change among local communities to abstain from open defecation in the long term. Many impoverished families residing in remote areas face challenges in accessing resources to sustain progress and move up the sanitation ladder, necessitating investment from either their resources or support from governmental and external agencies. Achieving and maintaining ODF status requires empowering communities through collective action, reflection, and intervention to enhance their sanitation conditions within their respective locales. This necessitates a transition in the role of Water, Sanitation, and Hygiene Coordination Committees (WASH-CCs) from mere implementers to facilitators, enabling communities to enhance their sanitation practices and uphold their right to live in an ODF environment. Considering Nepal's socio-cultural and institutional context, the evaluation underscores several strategic lessons that, if addressed, could enhance the effectiveness of sanitation programs in achieving sustainable ODF outcomes.

Way forward

The main takeaway from the evaluation is that while an externally driven social movement and facility extension-focused approach may lead to rapid achievement of Open Defecation Free (ODF) status in the short term, it does not result in sustained behavioral change among local communities to permanently refrain from open defecation. Considering Nepal's socio-cultural and institutional context, the evaluation highlights strategic lessons that, if heeded, could enhance the effectiveness of sanitation programs in achieving lasting ODF outcomes.

These strategic lessons include:

Implementing Training and Capacity Building initiatives based on the principles of collective behavior change processes.

Addressing sociocultural diversity by institutionalizing Participatory Assessment, Planning, Implementation, and Review (PAPIR) processes at the village/ward level.

Ensuring dedicated budget allocation and fostering ownership by local governments.



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Engaging local NGOs to fulfill the human resource needs of Municipal Water, Sanitation, and Hygiene Coordination Committees (WASH-CCs). Strengthening interventions for sanitation facility maintenance and utilization. Establishing clear and systematic mechanisms for sustaining the service chain for managing sanitation services safely, utilizing available resources effectively.

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