Rethinking approaches to sanitation in Nigeria: Learnings from the Sustainable Total Sanitation (STS) Nigeria Project

Introduction

In Nigeria, over 120 million people do not have access to clean and decent toilets and about 47 million people practice open defecation. The sixth Sustainable Development Goal (SDG 6) recognizes the importance of sanitation in human development and lays emphasis on ensuring the availability and sustainable management of clean water and sanitation for all\(^1\); it also lists ending open defecation as one of its 2030 targets. To achieve sustainable Water, Sanitation and Hygiene (WASH), ending open defecation, amongst other solutions, is necessary.

As part of approaches to make Nigeria open defecation free, WaterAid, under its Sustainable Total Sanitation (STS Nigeria) project, conducted research on two potential solutions: Community-Led Total Sanitation (CLTS) which aimed at improving sanitation and hygiene practices, and Sanitation Marketing (SanMark) which was designed to increase private investments in toilets. The research which was carried out to determine the effectiveness of these two approaches in Nigeria found that while SanMark is still in its early development, testing and learning phase, CLTS works (minimally) and uncovers new ways to approach the open defecation challenge in Nigeria.

Background

WaterAid collaborated with the Institute for Fiscal Studies (IFS) for the impact evaluation of its STS Nigeria project, funded by the Bill & Melinda Gates Foundation. The main objective of the project was to figure out ways to increase and sustain toilet ownership and usage in order to eliminate open defecation in communities, in the long run. Specifically, the research activities undertaken focused on examining the effectiveness of two tools for reducing open defecation and increasing good toilet sanitation practices in Nigeria.

The research aimed at investigating the efficiency of Community-Led Total Sanitation (CLTS) - which was officially adopted by the Nigerian government in 2008 as a national strategy for scaling

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up sanitation and hygiene in the nation. It also sought to investigate the effectiveness of Sanitation Marketing (SanMark), a relatively new development in its testing and learning phase, which similar to CLTS aims to increase private investments in toilets but does so by working with and through supply agents.

The combination of CLTS and SanMark was chosen because combined they intervene on both the demand and the supply side of WASH markets and products. What CLTS simply does is to provide graphic information about the dangers of bad toilet practices to communities. The broad idea is to trigger a desire for collective behaviour change in communities (demand), stir people into action-constructing and using toilets - and encourage innovation and mutual support. On the other hand, SanMark seeks to increase the supply of affordable toilets, especially Water Easy Toilets (WET) so that when community members are triggered and are considering their toilet options, they end up constructing safe, functional and hygienic toilets. According to WaterAid, “WET is a branded line of high-quality household sanitation products, including hygienic, low-water-use toilets suitable for a wide range of on-site sanitation environments”.

The interventions were implemented in close collaboration between WaterAid and Local Governments Areas (LGAs) in three states in Nigeria, namely Ekiti, Enugu, and Jigawa. The research took place in Ekiti and Enugu. In these areas, WaterAid and the LGAs selected twice as many communities for implementation than had been budgeted for. Researchers from IFS, in close collaboration with InDepth Precision Consulting (IPC) then picked half of these randomly for actual intervention implementation. The remaining communities were, for the time of the research, not approached with WASH activities under this project. The idea of this experimental design was to determine the difference CLTS and SanMark made in communities that were exposed to them, in comparison to those which were not. The research was conducted over a period of three years.

Why do the findings from the research matter now?

Nigeria first adopted the CLTS approach to deliver sanitation programs in 2008 but the quality of sanitation has continued to fall in Nigeria. In 2018, Nigeria was listed as the country with the second highest open defecation rates worldwide and in response, the Nigerian government recently declared a state of emergency on open defecation. The government aims to achieve an open
defecation free Nigeria by 2025 and as part of its deliberate efforts, has launched a National Action Plan to revitalize the WASH sector in the country.

The commencement of the research was triggered because approaches that were being used were not necessarily leading to the intended results, did not work in all contexts and results were not commensurate with action and movement in terms of numbers of communities being triggered versus conversion to ODF and therefore increase coverage. WaterAid was also looking for what would work at scale. These issues raised are still true today hence the value of the research in informing the redesign of sanitation interventions in the country especially given the current trend of the declaration of the state of emergency on sanitation, Nigeria’s national action plan, and the ODF campaign.

Gaining an understanding of what works and what does not in the context of WASH in Nigeria is critical now as the government continues to strategize and implement WASH policies and activities to reach its 2025 goal. This research is timely and can be very instrumental in providing insights, thereby, shaping approaches to improving progress towards universal access to sanitation in Nigeria.

**Key findings from the research**

a. CLTS is not enough. Although CLTS worked in poor communities by increasing the ownership of functional toilets and improved toilets, the impact was not substantial. Based on the research findings, open defecation reduced by just under 10% over the three-year period in poor communities.

   On the other hand, CLTS had no impact in the comparably better off, ‘richer’ communities selected for the project. Adding to this finding that CLTS, when implemented in full is not effective in such richer communities, it was found to be much harder to actually implement

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2 For full results, please see the following two publications:
all stages of the intervention. From the initial stages of organising the triggering event, which is a compulsory activity in CLTS, reaching and convening community members in richer communities was much harder. In some cases, the experiment was totally cancelled as people who came to the event were too few.

b. In a context where community and shared toilets are not amongst demanded solutions, for Open Defecation to reduce and be eliminated, the ownership of functional toilets must increase. And indeed, the study discovered that existing toilets, as well as those constructed due to the CLTS intervention, were used by households. In the studies areas, reducing open defecation hence comes with toilet ownership.

c. Poverty is a huge hindrance to eliminating open defecation. Finance matters for toilet investments. Most households that do not own toilets attributed this to constrained financial capabilities quoting that toilets are either too expensive or not affordable for them. This was the case in all project communities, whether classified as poor or slightly better off. When households complained about the cost of toilets, it was not in the context of the cost of absolutely constructing a new toilet or because it totally unaffordable; rather, it was because it ranked lower on the priority index of most households as its expected benefits were judged minimal in comparison to other household needs. Financial constraints were also the main reason for low investments in Water Easy Toilets.

d. SanMark in its current form is still a young intervention with potential. The activities included the development of a low cost, affordable and aspirational toilet, named the Water Easy Toilets (WETs); approaching and training of potential sellers of these toilet models, and identification and training of sales agents, that work with the interested businesses. WaterAid made significant advances in all of these aspects but continues to refine its current model and wider market enabling factors need to be targeted to address the country’s sanitation gap.

e. Although Water Easy Toilets are being sold by more businesses, sales are currently still low. Research findings show that whilst purchase of these toilets trickled in lightly, the overall sales were low, and the profit margin for businesses who sell these products is also
low. Potential users of WETs considered the products to be quite attractive and affordable but financial constraints continued to be listed as a major barrier to investing in the products.

f. Sales agents (going door-to-door) play an important role in facilitating WET products sales: Just as polio door-to-door campaigns have increased the number of children getting immunized against the disease, sales agents who went door to door to market WET products were seen to be influential in increasing the purchase of WETs especially to households that did not own private sanitation facilities previously, and households who wanted to upgrade their toilet facilities. Most of the sales agents took up the role of marketing WETs to supplement income.

**Reflections for policy in Nigeria**

Rethinking the current approaches to eradicating open defecation in Nigeria is paramount if the country is going to achieve its 2025 goal of being open defecation free. Three aspects to reflect on when devising policies, strategies and implementation on the subject matter are highlighted.

a. CLTS targeting matters: A one-size-fits-all approach will not work with CLTS in Nigeria. Targeting CLTS activities based on community characteristics, especially their relative wealth status, can increase policy and practice impacts. Depending on the community, alternative approaches, in addition to CLTS, may prove useful and could improve the potency of CLTS. These could range from activities relevant to how CLTS is administered traditionally (for example, the communications approach in richer communities) to innovative alternatives that might make CLTS more viable when added, such as subsidies in poorer areas.

b. Financing: Finance remains an obvious barrier to the ownership of functional toilet facilities in Nigeria. Policymakers should consider alternative policies that address financial constraints in both poor and richer areas, such as targeted subsidies or credit lines. Such policies could complement the efforts of both CLTS and SanMark by alleviating households' main constraints as seen in the research findings. In poorer areas, a combination of CLTS with targeted subsidies or credit might prove effective.
c. Opportunities with sanitation marketing: SanMark is still an emerging solution and so, it is difficult to assess its effectiveness at addressing the sanitation gap currently. However, it is possible it could play a vital role in improving WASH in the long run. Policymakers should consider carrying out more research in this area and should seek to experiment with it from activities that could incentivise more businesses to sell WET products, to considering ways of making it more affordable (and attractive), and everything in between. It is key to examine the all-round cost-benefit effectiveness of SanMark by exploring its strengths, weaknesses, the opportunities it presents, risks involved and its feasibility before scaling up.

**Major considerations for practice in Nigeria**

The research findings suggest that the conventional CLTS approach is not enough in reducing open defecation in Nigeria. It also poses the following questions as points to consider in practice:

i. How can toilet ownership be increased, particularly in richer communities, but also in poorer ones?

ii. What can be done to eliminate financial barriers to toilet ownership?

iii. What complementary – or alternative - approaches to CLTS could be chosen?

iv. How can SanMark be improved and can it act as a complementary strategy to CLTS?

v. What could motivate ordinary citizens to act? Are these motivations different for people depending on their wealth status?

vi. How can businesses be incentivised to sell WETs, given that the current purchases and profit margins are low?

**Conclusion**

Nigeria’s goal to eliminate open defecation by 2025 is very ambitious but also, achievable. With further research, careful planning, innovative thinking and giving due consideration to the various WASH approaches before scaling up, the country would be on the way to achieving its goal. It also has the potential to be a pacesetter with WASH interventions and a country that others learn from soon.