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Evidence for Policy Design
Community Led Total Sanitation

Nigeria Inclusive Sanitation Webinar Series
Webinar 3: Evidence on how to improve WASH infrastructure in Nigeria
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WaterAid Nigeria implemented CLTS in Enugu, Ekiti and Jigawa and SanMark in Ekiti and Enugu

- 2014-2018 impact evaluation of CLTS, as implemented in 2015 in rural Ekiti and Enugu
- CLTS implemented at scale in close collaboration with local LGAs, NGOs and communities’ leaders

**Background**

- Enugu
  - CLTS targeted to 63 rural communities (randomly chosen among a group of 118)
  - CLTS was implemented in 80% of targeted communities, mostly using Defecation Mapping activities

- Ekiti
  - CLTS targeted to 66 rural communities (randomly chosen among a group of 129)
  - CLTS was implemented in 80% of targeted communities, mostly using Defecation Mapping activities

- Lapping
CLTS evaluation

- Long-term evaluation over the period 2014-2018, data collection timeline:

- Cluster Randomized Control Trial:
  - 247 rural community clusters randomly allocated to CLTS and Control
  - Sampling over 4,600 households

- Primary outcomes:
  - Open Defecation (OD)
  - Toilet ownership and usage
Key findings

- CLTS successfully improved sanitation behavior in poor rural communities
  - It generated a decrease in OD of 9pp
  - Though OD is still high after CLTS at 53%
  - OD decreased through increased ownership of functioning toilets by 10pp, reaching 34%
  - Impact is sustained in the medium- to long-term (2.5 years after intervention)

- CLTS did not work in richer communities
  - No impact on OD (still at 36%) or functioning toilet ownership (still at 46%), and more difficult to trigger
Community wealth seems to be a relevant factor that can explain heterogeneous CLTS impacts beyond the Nigerian setting:

- Nightlight → proxy for community wealth/SES consistent across countries
- Within each country, split communities in two groups: low nightlight index (poor) and high (rich), relative to country median and calculate the impact of CLTS on outcomes for each group
- Rank studies according to nightlight index

Findings consistent with cross-country evidence
Community wealth is a relevant factor for heterogeneous CLTS impacts beyond Nigeria:

- Nightlight → proxy for community wealth/SES status
- Within each country, split communities into low (poor) and high (rich) relative to country median
- Calculate the impact of CLTS on outcomes
- CLTS only effective at increasing toilet ownership and at decreasing OD in relatively poorer areas, i.e., with lower nightlight intensity
  - Even in these cases, CLTS didn’t eradicate OD

Findings consistent with cross-country evidence: CLTS impacts on OD and toilet ownership by nightlight intensity.

Nigerian median nightlight intensity index = 0.89
Results are

- Robust across several measures of community SES (isolation, nightlight, density), although community wealth is the best proxy for SES
- Do not seem to be driven by
  - baseline community differences in toilet coverage, in social capital or social interactions, in public goods infrastructure or in leader’s characteristics
  - household level wealth at baseline

Further research and people working in implementing CLTS can provide valuable insights on the potential reasons for this consistent finding
Main policy takeaways to inform national sanitation strategy in rural communities

- CLTS alone won’t eradicate OD in rural Nigeria
  - It is effective at decreasing OD and toilet ownership only to some extent and only in poor communities
  - This is consistent with findings from other countries

- Target CLTS to improve its effectiveness
  - Target CLTS towards poor communities, to ensure more efficient use of funds
  - Explore improving intensity: follow-up activities have been effective in other contexts

- Complement CLTS in poor communities with other interventions
  - To tackle other households’ constraints, e.g., affordability and liquidity constraints
Strategic targeting of CLTS: poor communities with high OD rates and no previous exposure to CLTS

- Example mapped at the state level for simplicity, but exercise can be done at community/district level
  - Dark red: higher proportion of poor rural communities & higher OD proportion
    - i.e., states in which 1 in 2 rural communities are poor & 1 in 2 rural households engage in OD
  - Replicable using DHS 2018 or other data that has community or district level information on wealth and OD rates
- Combined with information from the field on previous CLTS exposure of each community

Data source: DHS 2013
THANK YOU!!!!

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