Global Overview
Access to safe drinking water, adequate sanitation and hygiene (WASH) are vital for the survival, growth and development of children and youth. Globally, lack of sanitation, insufficient quantity and quality of water, and poor personal hygiene contribute to an estimated 2.2 million deaths every year, with around 90% of these deaths among children under five. When access to water is limited and schools lack toilets, many children (especially girls) face increased burdens on their time and risks to their personal safety and continued education. After years of effort, there is cause for celebration as the Millennium Development Goal (MDG) target of halving the proportion of people without access to safe drinking water was achieved in 2010, five years ahead of the deadline. However, much work still remains to be done as 780 million people still lack access to potable water, and 2.5 billion lack access to adequate sanitation.

Plan International’s Approach
Plan International USA is part of a global organization that was founded in 1937 and works side by side with communities around the world to end the cycle of poverty for children. Plan reaches around 84 million children through program offices in 50 developing countries across Asia, Africa, and Latin America, developing solutions community by community to ensure long-term sustainability. Plan’s mission promises a better future for children, youth, and their communities by equipping them with the skills and knowledge they need to create their own solutions, which range from clean water and health care programs to education projects and child protection initiatives. Across program areas, Plan International’s activities are centered on the Child-Centered Community Development (CCCD) approach, which is rights-based, holistic, whole-person, gender-sensitive, and inclusive.

In November 2012, the Centre for Development and Population Activities (CEDPA) became part of Plan International USA. CEDPA’s programs, staff, training curricula, and alumni network of 5,400 now bolster Plan’s expertise in protecting and promoting the rights of children, particularly girls, and giving women the tools they need to improve their families and communities.

Through applying Plan International’s CCCD approach to WASH, children and their communities benefit from the positive impact of safe water, sanitation and hygiene on their health, environment and lives. In 2014, Plan International invested $44 million on its Water and Sanitation projects including the construction or upgrade of 4,112 water points and supporting 835,207 households with improving their sanitation facilities. Plan International utilizes its long-term presence and works directly with children, youth and adults in communities to identify priorities and develop targeted water, sanitation and hygiene programming.

The basic foundations of Plan International’s WASH work are focused around 5 pillars:

1. **Access**: children and their communities should have access to and be able to use safe drinking water and sanitation facilities all year round

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II. **Integration:** all programs should address water, sanitation and hygiene behavior change in a holistic manner to maximize impact

III. **Empowerment and sustainability:** children, their families and their communities should have the opportunity for empowerment through maximizing their chances to participate in all stages of the program/project cycle

IV. **Gender equity / inclusion:** through mainstreaming gender consideration, WASH projects should contribute to the eradication of gender based inequities and should allow for regular and continuous input by women, men, girls and boys

V. **Technology choice:** technical standards for WASH programs should be set so that relevant and appropriate technology is incorporated into system design

In recent years, Plan International has adopted a new “**One Plan, One Goal**” strategy through to 2015 that aims to reach as many children as possible, particularly those marginalized or excluded, through high quality programs with long-lasting benefits. This new strategy, coupled with its CCCD approach further strengthens Plan’s ability to deliver effective WASH interventions to those most in need.

**Plan International USA Program Support**

Plan International USA has a proven track record of supporting development programs across the 50 countries where we work. Based in the Washington DC office, the Field Program Support (FPS) unit and the Grants and Contracts Compliance unit provide technical, financial and compliance support to Plan International’s implementing country offices. A dedicated team of WASH experts, integrated within the FPS team, provides day-to-day technical support on implementation of our WASH projects. Moreover, they assist with the preparation and review of periodic performance reports and M&E evaluations, ensuring that all documents meet high quality standards expected by USAID and other prime partners. The Plan USA WASH team is led by Program Director, Dr. Darren Saywell, a thought leader with experience in both the academic and implementation worlds of WASH. Examples of the current grant portfolio include:

**Testing CLTS Approaches for Scalability (Bill and Melinda Gates Foundation, $7M, 2011-2015)**

This four year project aims to advance rural sanitation programs in Kenya, Ethiopia, Ghana, and worldwide by analyzing and improving the cost-effectiveness and scalability of the CLTS approach through increased engagement of local actors (natural leaders, teachers and district officials). This goal is achieved by collecting, critically evaluating, and disseminating practical lessons learned that address challenges to implementing CLTS at scale. The project is based on systematic applied research from pilot interventions in Kenya, Ghana, and Ethiopia that are embedded in broader knowledge generation activities. In line with the CLTS approach, the project applies community-led solutions to address both demand for and supply of sanitation, to help communities eliminate open defecation and maintain and improve sanitation status over time. The project is led by Plan USA with key support from the Water Institute at UNC (University of North Carolina-Chapel Hill) and local implementing partners. To date, the project has completed a range of scheduled activities: rigorously assessing CLTS operating context in all three countries; reviewing literature worldwide to inform the project approach; community based implementation of CLTS (treatment vs control groups) in pilot countries; conducted rapid assessments of CLTS programming in 9 comparison cases worldwide; and completed process learning focused workshops with regional stakeholders in Africa and Asia.
The **Cambodia Rural Sanitation and Hygiene Improvement Program** (CR-SHIP), aims to increase sustained access to improved sanitation and promote proper hygiene practices. Specifically, CR-SHIP will target 5,600 villages in provinces where current sanitation coverage is below 50%. The program will directly benefit more than 400,000 households in rural areas of Cambodia, indirectly reaching more than a million households. The program utilizes and delivers its services through effective non-hardware subsidized approaches – Community-led Total Sanitation (CLTS); School and Community WASH (SC-WASH); Sanitation Marketing; information, education, and communication (IEC) and behavior change communication (BCC) campaigns - that have been proven successful in increasing sanitation access, particularly among poor households and communities in the country. Multi-faceted, multi-stakeholder, and comprehensive in nature, CR-SHIP catalyzes large-scale demand for sanitation, improves hygiene practices, and helps to organize supply chains that provide technology and services at the community level. As of December 2013, 330,000 people in the target areas were washing their hands with soap; 558,000 people were using improved toilets; and 826,000 people were reached by hygiene messages. In addition, 1,517 villages were triggered for improved sanitation practices as part of the CLTS approach, and 236 were declared open-defecation-free (ODF), a key milestone in the CLTS approach.

**Future Trends**
In looking to the future, Plan International USA recognizes the importance of stronger innovation and adaptation within its programming and tracks emerging trends in the WASH sector. To address cost effectiveness, sustainability and scalability through existing efforts, Plan International plans to elevate hygiene behavior change within its programming approach, improve the M&E of its programs and further explore the possibilities of sanitation marketing practices. Plan International’s experience in health, education, economic empowerment and disaster risk reduction provide ample opportunities for further integration to increase the capacity and reach of WASH programs. Additionally, population shifts towards urban areas (small towns, informal settlements in cities) will require greater adaptation of approaches intended for rural communities (i.e., addressing density, regulation, marketing, supply chains, the private sector, etc) and increased emphasis on sustainability of operations, maintenance and life-cycle costs.

**Plan International’s Experience in Sanitation**
In the sanitation field, Plan International is recognized as a leading organization in the implementation of **Community-Led Total Sanitation (CLTS)**. Dissatisfied with the results of traditional latrine subsidy and distribution programs, Plan was an early adopter of CLTS and has rapidly spread the approach through its extensive field presence. The CLTS approach empowers communities to take collective action and mobilize to eliminate open defecation (OD) and encourages use of locally available and affordable resources so that community members can build their own facilities without outside assistance. CLTS was integrated into Plan Indonesia’s WASH program in 2007 and since then 104 villages have been declared open defecation free (ODF) and 27,297 non-subsidized latrines (equivalent to $1.36 million) have been constructed. Plan Uganda’s WASH program utilized the CLTS approach leading to over 70 communities reaching ODF status across four districts. Plan International also utilizes Sanitation Marketing principles to complement CLTS programming by facilitating the supply of local, affordable sanitation solutions to address the increase in demand for services. Plan International now implements CLTS, SanMark, and other sanitation approaches (e.g., school-led, urban) in more than 20 countries in Asia, Africa, and the Americas through projects such as:
• **Empowering Self-Help Sanitation of Rural and Peri-Urban Communities and Schools in Africa (DGIS, $10M, 2009-2014):** Focuses on sanitation and hygiene through a non-subsidized approach in Malawi, Kenya, Ghana, Uganda, Zambia, Niger, Sierra Leone, and Ethiopia. Using School-Led Total Sanitation (SLTS), and Urban Total Sanitation (UTS), the project empowers the target populations to eliminate open defecation, install appropriate sanitation facilities, and undertake proper hygiene practices. Mid-term progress reports (2012) indicate that 985 communities have been reached; approximately 50% have been declared Open Defecation Free (ODF), accounting for 744,000 people.

• **Community and School Water Supply, CLTS and Hygiene Promotion (AusAID, $2.7M, 2010-2012):** Supports community and school water supply, CLTS, and hygiene improvement in Kenya, Ethiopia, and Tanzania. The project is reaching two schools / 36,000 people / 84 villages in Ethiopia; 14 schools / 26,000 people / 18 villages in Kenya; and 12 schools / 70,000 people / 55 villages in Tanzania.

• **Government-led Replication of Total Sanitation in Bangladesh (AusAID, $0.5M, 2010-2012):** Building upon Plan International’s CLTS strategy implemented in Bangladesh since 2002, the project focused on improving capacity of three communities in disaster-prone areas to improve hygiene practices and access to sanitation. Local government has reported significantly improved sanitation coverage in the wards the program has worked in (from 25% at baseline to 77% as of October 2012).

• **Scaling Up Rural Sanitation in Flood Affected Districts of Pakistan Phase I, II & III (RuSFAD) (UNICEF, $12M, 2010-2012):** Focused on “Low subsidy to no subsidy” and this project was based on a modified version of CLTS approach in Pakistani context which is known as Pakistan Approach to Total Sanitation (PATS)². The project was scaled up through three phases, and reached a targeted population of approximately 7 million in 32 flood affected districts of Pakistan. 62% of households in project areas reported construction of latrines at household level following project intervention. More than 411 masons were trained during the program; 47 sanitary marts were developed and over 100 new entrepreneurs have entered into the market.

Plan International’s sanitation experience also extends into its other programmatic areas, particularly through integration within health and education programming. An emphasis on equity and inclusion has resulted in sanitation programming in schools that ensures that facilities are child-friendly, addressing the needs of all girls, boys and children with disabilities. Consultation with children on latrine structure has resulted in designs with smaller pit openings to ensure the safety of child users and gender specific facilities as standard. Plan International’s health and Early Childhood Care and Development (ECCD) programming often includes training mothers on the importance of sanitary disposal of children’s excreta.

**Plan International’s Experience in Hygiene**

Plan International’s hygiene related work utilizes a variety of methods for behavior change and is particularly influenced by its CCCD approach. Working with children and their communities to promote behavior change through child-to-child approaches encourages children and youth take on a strong role in influencing their peers and families at home to adopt positive hygiene behaviors. Through hygiene-related activity-oriented learning methods, children become more knowledgeable and develop into agents of change in their local environment with other children, their families and the community.

Plan India’s Water and Environmental Sanitation (WES) program values children as the biggest crusaders for school cleanliness and worked with children’s clubs to develop games for sanitation and hygiene

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² PATS is an approach approved by Government of Pakistan to ultimately achieve ODF and total sanitation at community level. Plan Pakistan was part of group mandated by Govt. of Pakistan to devise Pakistan specific approach considering CLTS as model.
education and a handbook “Hum Swachh Rahenge” (We will remain clean), a self-monitoring tool for assessing personal hygiene. In program intervention areas, WES committees comprised of students and teachers used the handbook and games to spread awareness and monitor school and student hygiene indicators. Plan International also employs information, education and communication (IEC) tools for behavior change in the (a) proper use and handling of water e.g. water treatment and storage, protection of water sources and the environment; (b) good hygiene practices e.g. hand-washing with soap to prevent disease transmission; and (c) containment and proper disposal of excreta.

Plan International ensures that gender issues and the needs of the most vulnerable populations are considered through tackling exclusion. To ensure that barriers to school attendance and retention for girls are eliminated, Plan International has utilized gender sensitive programming such as the inclusion of menstrual hygiene programming for girls in school. Through its Transition and Persistence (TAP) Project, Plan Ghana promotes menstrual hygiene management through ensuring gender sensitive toilet facilities at its intervention schools as well as including health and hygiene discussion during their Girls Vacation Camp. Additionally, Plan Uganda has demonstrated the important intersection between WASH and HIV/AIDS through its Uganda Hygiene Improvement Project (HIP), a $358,000 USAID funded project, which implemented activities to improve poor hygiene and other WASH related practices in the homes of people living with HIV/AIDS (PLWHA). The HIP focused on the integration of WASH into Home Based Care (HBC) of PLWHA through training 297 people and by promoting key hygiene practices including hand-washing with soap, safe disposal of feces, safe storage of drinking water and proper menstrual hygiene management.

Plan International’s Experience in Water
Plan International’s CCCD approach supports the provision of safe water to schools and communities through the delivery of simple, appropriate technology. Through the participation of both children and adults in communities, Plan International facilitates the identification of needs and the development and implementation of suitable solutions. Thus, Plan International has worked with a variety of technologies including: gravity flow piped water schemes, boreholes with manual pumps, wells with child-friendly hand-pumps, water systems, filters, storage tanks and solar-power for pumping and for disinfecting water. Ensuring long-term impact of benefits is central to Plan International’s strategy and it works to facilitate communal water source management through capacity building and technical support for local water user committees. Multiple use of water is encouraged at the household, community and in schools, which links all aspects of Plan International’s WASH work together.

Case Study - Rainwater Harvesting Project Makwanpur ($0.5M, 2009-2011)
Over a two year period in Makwanpur District Plan Nepal and its local non-governmental partner Rural Awareness Development Organization, with support from Plan Netherlands, introduced the possibility of constructing household-level rainwater harvesting jars. Each jar had a 6,500-litre capacity. Rainwater that fell on the roof of a house flowed into a gutter and then into the jar, where it was stored. What’s called a “first flush” system ensures that the first few minutes of rain, which is contaminated by accumulated dirt and refuse, is washed away, leaving only the purest of water.

The 250 residents of Damgade community in Agara, Makwanpur District, always faced water shortages during the dry months from February to May. Unfamiliar with the potential for rainwater harvesting they were initially skeptical of the idea. However, since Plan had established a reputation for effective development initiatives, the idea was presented and through orientation and training, the people of Damgade came on board. They formed a committee of users to supervise construction and mobilized local cash and labor to meet their target of 39 jars with additional financial support from Plan Nepal. The
increase in potable water supply has had the added benefit of improving sanitation and hygiene behavior as latrine uptake and hand-washing practices have developed.

Corporate Foundation case studies in water

Improving Community-Based Water Supply and Basic Sanitation (Coca-Cola Africa Foundation, $0.1M, 2014-2015): Develops WASH infrastructure in Mwoyoweshumba, Zimbabwe to improve access to sustainable clean water at the primary and secondary schools, and health clinic. The project also conducts demand-led sanitation and hygiene promotion campaigns at these schools and an additional 12 schools. The project will reach 14 schools/ 446 primary school children/ 162 secondary school children/ 27 teachers/ 6 health personnel.

Providing Access to Water and Sanitation in Cameroon (Kosmos Energy LLC, $0.1M, 2014-2015): This project focused on the improvement of water and sanitation access and practices at the Government High School Mbongo Balongo in Cameroon through the provision of safe drinking water, and water to operate newly constructed latrines. The project also involved a WASH educational campaign that will benefit the students and 19 communities in Bamusso Sub-Division.