

CARE Water+ team awards Annual Innovation in Sanitation Award to Takunda World Toilet Day 2024

OVERVIEW

In rural Zimbabwe, **25% of the population practice open defecation** because they either do not have or want to use a toilet or latrine.¹ Takunda (2020 – 2027), a USAID-funded Resilience Food Security Activity in Zimbabwe, focuses on sustainable, equitable and resilient food, nutrition and income security in targeted provinces of Zimbabwe. **Increasing access to water and improved sanitation is a core piece of Takunda's strategy to strengthen good health and livelihoods.**

In commemoration of World Toilet Day 2024, CARE's Water+ team would like to present its annual Innovation in Sanitation Award to the Takunda team at CARE Zimbabwe. This award recognizes their outstanding work in sanitation in new and innovative ways, while working on systems strengthening to deliver sustainable sanitation services to rural communities in Zimbabwe.

Below, we detail the key innovative components of Takunda's approach and feature an interview with Takunda staff to reflect on lessons learned, challenges, and recommendations.

ABOUT TAKUNDA

CARE Zimbabwe, along with partners FHI360, International Youth Foundation (IYF), Nutrition Action Zimbabwe (NAZ), Bulawayo Projects Centre (BPC), and Environment Africa (EA) and ICRISAT, is implementing Takunda '**We Have Overcome**', a five-year, USD \$55 million USAID Resilience Food Security Activity (RFSA). The program is being implemented in two provinces: Masvingo (Chivi and Zaka Districts) and Manicaland (Mutare and Buhera Districts). Takunda seeks to promote sustainable, equitable, and resilient food, nutrition, and income, directly impacting 301,636 people. Target population groups include vulnerable adult women and men, adolescent mothers, male and female youth (aged 18-35), women of reproductive age, and children under five years (CU5), who are made vulnerable by socio-economic challenges, the impacts of climate change, and the COVID-19 pandemic. Gendered behaviors and social norms continue to shape power dynamics in decision-making between women and men in the target communities, and this has significantly impacted household food security and nutrition, leading to deeply entrenched poverty. The Takunda Theory of Change (TOC) directly responds to the underlying causes of food insecurity and malnutrition. These include poverty, limited financial resources, gender inequality, persistent negative social norms, cultural beliefs and behaviors, limited youth empowerment, and weak institutional/organizational governance and accountability. Activities addressing these causes fall under the following three purpose areas:

- **Purpose 1** – Increase incomes from on-farm, off-farm, and non-farm livelihoods activities.
- **Purpose 2** – Improve the nutritional status of children under five years of age, adolescent girls, and women of reproductive age.
- **Purpose 3**– Build capacities among vulnerable households and communities to cope with shocks and stressors and reduce risk.

Across all-purpose areas, gender equality and youth empowerment are cross-cutting themes aimed at reducing disparities regarding access, control over, and benefits obtained from resources, assets, and opportunities; reducing gender-based violence (GBV) and increasing the ability of women and girls to realize their rights, determine their life outcomes, and influence decision-making at the household, community, and institutional levels.

¹ 2024 Zimbabwe Livelihoods Assessment Committee (ZimLAC) Rural Livelihoods Assessment Report.

<https://www.unicef.org/zimbabwe/media/11516/file/2024%20ZimLAC%20Rural%20Livelihoods%20Assessment%20Report.pdf>.

IMPLEMENTING PARTNERS



USING HUMAN CENTERED DESIGN TO EXPAND SANITATION UPTAKE

Takunda worked with researchers from USAID/BHA's PRO-WASH program to apply a Human Centered Design (HCD) approach to understand motivations for sustainable latrine construction and use.² Community members identified that not having a latrine for visiting relatives was shameful – and this was the top motivation for families to build a latrine. Other motivators included wanting to rebuild latrines (that fell due to cyclones), constructing fancy-looking (often not structurally sound) latrines and supporting social desirability for community-wide latrine ownership.

During the brainstorming phase of research, Takunda worked with PRO-WASH to design a latrine that is strong, meets the government ventilated improved pit latrine standards, but only requires 2 bags of cement. Previously the 1 bag version was deemed by participants as too weak structurally while the government-standard Blair Ventilated Pit Latrine (BVIP) requires 6 bags of cement and not affordable for most rural households. Lack of money to buy cement was reported as the major barrier to household latrine construction during the project's Social and Behavior Change (SBC) formative research conducted at the start of the project.

The main benefits of this new latrine designed with community feedback include:

- Uses two cement bags instead of six
- Reduced average latrine construction cost from \$150 to \$60
- Maintains structural integrity and durability
- Simplified design for easier construction and maintenance
- Received positive community feedback and adoption rates

ENTREPRENEURIAL LATRINE BUILDERS

One of the service delivery models used in Takunda is “Local Service Providers” or LSPs. These are men and women chosen by communities to provide services necessary to sustain outcomes achieved by the project. Latrine Builders are LSPs tasked with promoting sustained household access to basic sanitation. They are most often experienced masons that have additionally received training on building strong and desirable latrines.

Informed by the HCD study, Takunda incorporated sanitation advocacy and marketing into the Latrine Builders' training. They learned specific skills on how to approach households without latrines and offer options for building an affordable BVIP latrine. In 2024, Latrine Builders in Takunda earned on average US\$60 as income from latrine construction, from each latrine built.

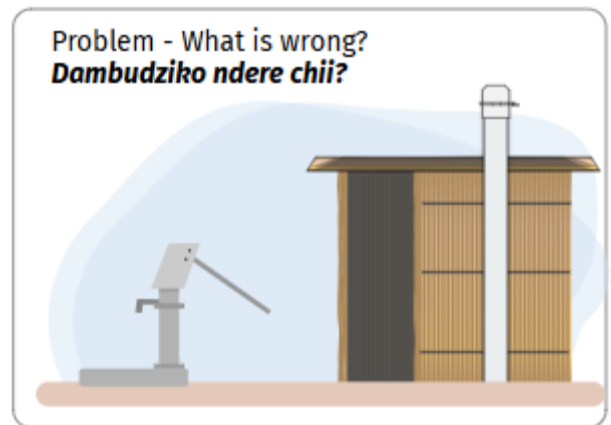
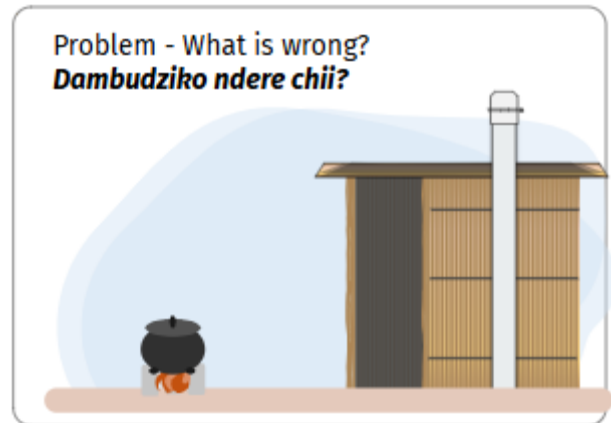


Different latrine designs tested and validated through community feedback in Takunda

² PRO-WASH, 2022. *Human-Centered Design Approaches for Safe and Sustainable Latrine Construction and Utilization*. <https://fsnnetwork.org/resource/human-centered-design-approaches-safe-and-sustainable-latrine-construction-and-utilization>.

SANITATION FOCUSED PARTICIPATORY HEALTH AND HYGIENE EDUCATION (SaFPHHE)

SaFPHHE (Sanitation Focused Participatory Health and Hygiene Education) is the curriculum from the Government of Zimbabwe, describing approaches similar to Community-led total sanitation (CLTS), which is a subsidy-free, demand-led and behavioral-change approach to expanding hygienic sanitation. Takunda has adapted the SaFPHHE approach to be more comprehensive by having more thorough discussions during the Transect Walk (part of CLTS), using Latrine Builders that are experienced and paid for their services, and integrating discussions of latrines into all platforms within the Takunda program: Farmer Field and Business Schools (FFBS), Village Savings and Loan Associations, and Care Groups. Latrine “problem” cards and “sanitation ladder” cards initiate discussion and reflection about priorities, costs and benefits of sanitation. Additionally, from the first interaction with the community, to the Triggering, Transect Walk and Community Action Planning – listening to community members is core to the strategy. **Listening to experiences, challenges, opinions and proposed solutions has been essential to building trust and rapport among community members.**



Too close to kitchen.

Too close to waterpoint.

Latrine "problem" cards used to initiate discussion

PROGRESS ON EXPANDING SANITATION COVERAGE

Zimbabwe has experienced higher-than-expected levels of hunger and food insecurity in the areas where Takunda works. Despite the multiple innovative adaptations of latrines and sanitation tools in Takunda – only **33% of the target households have built latrines**. One factor that could be affecting this is that local community leaders do not necessarily have latrines themselves – rendering them ineffective advocates. Additionally, although the 2-bag latrine model has proven to be strong and stable, many government technicians are hesitant to promote it without further evidence. Although there has been minimal progress in achieving Open Defecation Free (ODF) villages, there are villages that are “almost there” and only require 8-10 latrines to be built for ODF certification. Takunda recognizes that the published research has **demonstrated that drastically increasing sanitation coverage in a village, while not reaching 100%, can still positively affect nutrition and health.**³

INTERVIEW WITH TAKUNDA STAFF

As part of this award, the Water+ team interviewed Egnés Muchanykwa (right: Takunda Water and Sanitation Specialist) and Delilah Takawira (left: Takunda Social and Behavior Change Lead) to discuss the success, challenges, and next steps for Takunda’s sanitation program.



³ Contreras, JD et al. 2022. Influence of community-level sanitation coverage and population density on environmental fecal contamination and child health in a longitudinal cohort in rural Bangladesh.

<https://www.sciencedirect.com/science/article/pii/S1438463922001146#:~:text=Existing%20evidence%20on%20the%20relationship,Fuller%20and%20Eisenberg%2C%202016.>

What has been the most innovative aspect of this project in terms of sanitation?

- Working with communities to design and implement the 2-bag (cement) latrine, which has **reduced the cost of latrine construction by 60% without changing the design or reducing the strength.**
- **Applying HCD to engage participants in designing sustainable approaches** for latrine construction and use.
- **Training latrine builders as sanitation advocates** in addition to improving their brick laying skills.

What have been some of the most challenging pieces in your sanitation work?

- Some influential members of the communities build visually appealing latrines which require significant amounts of funding and materials but do not serve the purpose of blocking the transmission route for pathogens. The communities deem the BVIP “old fashioned”, and construct “fashionable” yet unsafe latrines, which, for example, have windows, creating an unsafe environment for women and girls in particular.
- The concept of uBVIP (upgradable Blair Ventilated Improved) is not well understood. The idea was to start with a basic affordable latrine and add more features later. Most latrines are pit latrines (lacking important features such as a roof, flyscreen, and ventpipe) and communities are not willing to upgrade.
- We faced challenging circumstances trying to promote latrine construction amongst project participants classified as extremely poor and vulnerable during overlapping crises, including the most severe drought in decades and rising inflation.



A woman in Mutare in her community's new latrine

How has the sanitation approach in Takunda been inclusive or promoted gender equality?

- **The Takunda HCD study engaged men, women, girls and the elderly** using a participatory methodology called Difference Mapping⁴ to understand their preferences for different latrine features. We learned that women and girls prefer safety when using latrines. In Zimbabwe latrines are also used as bathrooms (for bathing) and women and girls feel unsafe using latrines without doors. The BVIP latrine design does not include a door (to promote air circulation). Takunda incorporated this community feedback by including a steel screen door.
- Takunda promotional messages for latrine construction include highlighting the risk of women being sexually abused while relieving themselves in the bush, which resonates very well with women and men, serving as motivation for household latrine construction.

⁴ Difference mapping is a participatory activity that explores how different types of people experience changes differently.

What are the next steps?

- Engaging the Ministry of Health in Zimbabwe in policy dialogues to endorse the modifications to the standard BVIP (such as 2-bag) to enable widespread promotion by government environmental staff.
- Supporting LSPs in income-driven latrine promotion, now and beyond Takunda.

Based on our experiences promoting sanitation in Takunda, we make these recommendations to other CARE teams:



Use participatory approaches, with a focus on women and girls, to understand barriers to the construction and use of safe latrines and incorporate this feedback into the design of latrines that respond to community needs.



Increase the sustainability and scalability of project outcomes by working with the government to promote improved latrine design based on community feedback, and train LSPs in proper latrine construction and maintenance and as community advocates for safe latrines.



Include messaging, such as the risk of gender-based violence during open defecation, that speaks to the needs of women and girls to better promote safe latrine use and community-wide behavior change.



A group using latrine “problem” cards to discuss latrine preferences

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