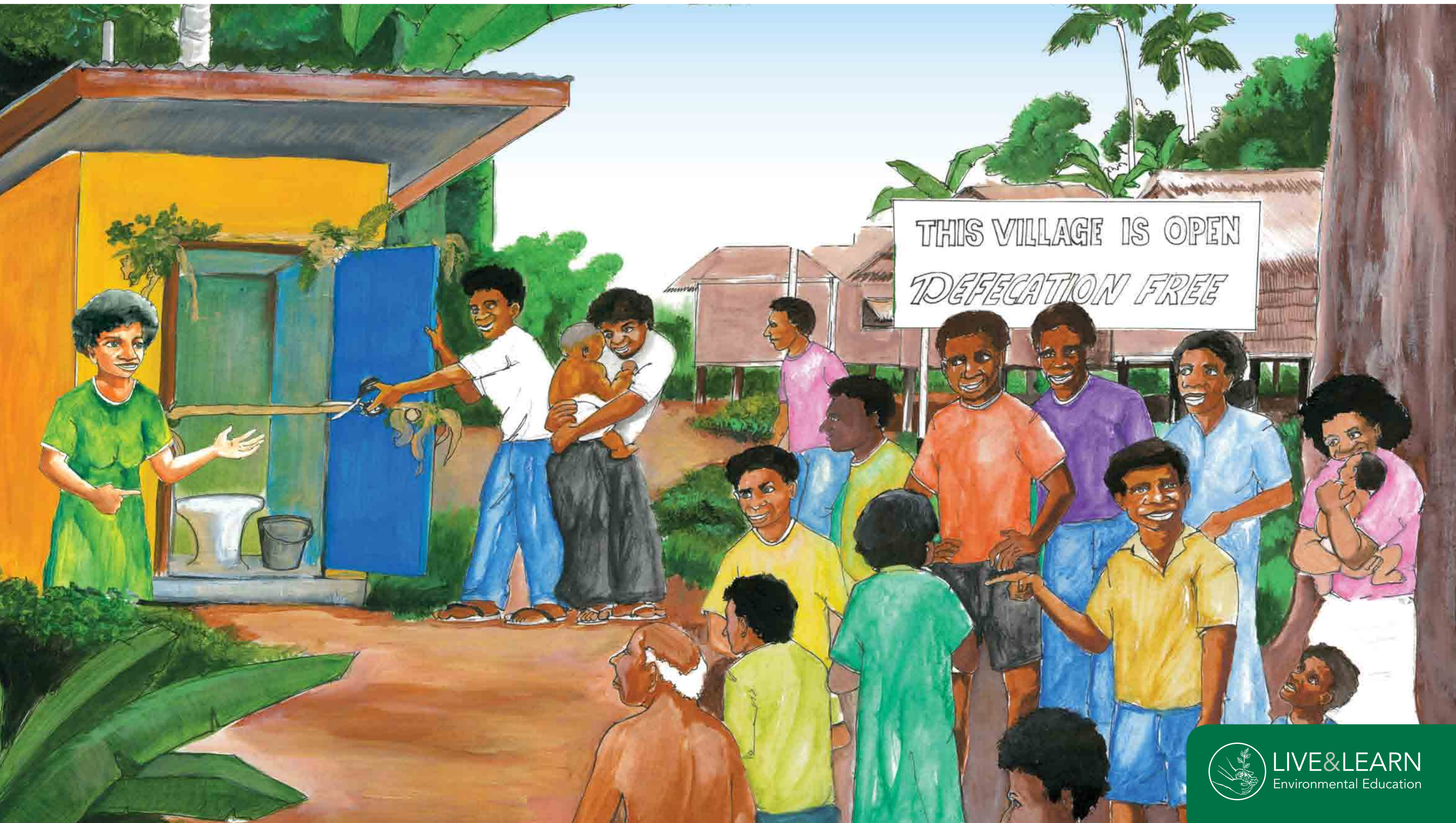


Putting your waste in the right place

A Community-Led Total Sanitation (CLTS) approach for the Pacific islands



LIVE&LEARN
Environmental Education

Introduction for facilitator

Welcome!

This flipchart is a simple ‘tool’ that can be used to improve sanitation and hygiene practices and reduce the prevalence of water-borne diseases. This flipchart can be used by NGO workers, government extension officers or health workers in Pacific communities.

The desired outcome is increased demand for and action towards improved sanitation (e.g. construction of new or improved toilets), and improved hygiene practices (e.g. handwashing and protecting water from contamination).

This flipchart is part of a set of resources to support the development of community-based solutions to sanitation needs in the Pacific islands. Details of other resources can be found in the PHAST section on page 24.

How to use this flipchart

We highly recommend that you read and familiarise yourself with the entire flipchart prior to using it. The flipchart presents two participatory approaches:

- (i) Participatory Hygiene and Sanitation Transformation (PHAST)
- (ii) Community-Led Total Sanitation (CLTS)

You can use this flipchart from either side (it has two front covers). One end is PHAST and the other is CLTS. Facilitators will need to decide whether the PHAST or CLTS approach is most appropriate or likely to achieve results in a village. It is possible that a combination of the two approaches will be most useful.

Facilitator’s notes appear throughout the flipchart and provide extra information to assist in planning of activities and sessions.

Language in the villages

The language that is used when talking about sanitation and hygiene practices can be different in different settings. Some villages have acceptable words for going to the toilet. This flipchart uses the word ‘shit’. If this is inappropriate for your setting, please substitute with a word that is widely used in the community. **But remember that the CLTS approach is meant to shock, shame and disgust so the words you choose should create these feelings.**

The role of facilitator

To facilitate means to ‘make things easy’. Your role as a facilitator is to foster the learning process by creating an environment conducive to sharing ideas and experiences. You do not have to be an expert on the topic of discussion, but it is worth understanding the flipchart materials in the context of the local community. If you do not feel comfortable facilitating this approach in your community, it might be worth organising an outside facilitator (from another area) to run this session.

Tips for the session:

Establish the ‘ground rules’ before the discussion. The following ground rules are suggestions only. You might like to add or delete ground rules to make them more relevant to your group. It may be helpful to display and refer to these at each session.

- Keep it positive.
- One person speaking at a time.
- Participate in the group and share your ideas.
- Keep the discussion on track.
- Be an active listener – pay attention to a speaker and ask questions to ensure you understand.
- Respect everyone’s opinion: especially people who may be shy or feel marginalised, like elderly, youth or women.
- Ask if you don’t understand.
- Let others have a chance to speak.
- Be gender sensitive – acknowledge women’s and men’s different needs.

There is no one right answer

The activities in the flipchart are open-ended. This means that there is no correct answer or result. Decisions made by the group reflect what is right for the group and what it is prepared to take responsibility for.

How to cope with difficult or dominant people

The facilitator needs to ensure that others have the opportunity to speak. If someone is dominating the discussion try saying ‘those are interesting points. Let’s go round and see what others think’. You could introduce a quota system, in which each person is given three stones or bits of paper, and they have to give one up every time they speak. When they have no more, they cannot speak again! If the dominant person is a community leader, approach them formally or privately early in the planning phase, explain the process, and try to gain their support.

Managing conflict

Sometimes people will have strong and conflicting ideas on a subject. Poor relationships within the group will also affect the way the group works together. You need to be sensitive to possible differences and tensions and encourage people to work through these, keeping their common goals and interests in mind. If the conflict is not related to the topic being discussed, ask the people involved to meet after the session to resolve the issue.

If discussions get heated, you can implement the ‘time-out’ rule, where the group stops talking and listens to the facilitator for instructions on the next session.

CLTS or PHAST?

PHAST seeks to help communities improve hygiene behaviour and encourage better community management of water and sanitation facilities. It achieves this by demonstrating the relationships between sanitation and health, building confidence and empowering community members to take ownership of water and sanitation facilities, and to plan improvements. PHAST is about creating understanding, and attempts to link this understanding to real action.

CLTS does not aim to ‘teach’ about good sanitation practices and is less about developing knowledge and understanding about sanitation and health. Instead, it aims to lead communities to ‘discover’ the need for better sanitation. The activities are intended to generate feelings of shame, disgust and unhappiness with current sanitation and to provoke urgent collective local action. CLTS is mostly relevant for villages where open defecation is common practice, and aims to create villages that are ‘open defecation free.’ It is not to be used in conjunction with programs that provide free or subsidised toilets for communities.

Use the table below to assess whether you should use PHAST or CLTS. Ticks in both columns could indicate that a combination of both approaches could be used. Never use CLTS if it is likely to lead to violent conflict. However, it may be very effective in motivating action if it causes people to feel shame or embarrassment. Use your best judgement and change approaches during your program if required.

Situations that may exist in your village	Which flipchart would be appropriate?	
	PHAST	CLTS
Sanitation is a sensitive topic and may lead to feelings of shame and embarrassment, but it's not likely to lead to violence	✓	✓ CLTS is ideal in this situation
Sanitation is an extremely sensitive topic in the village. Highlighting certain issues could lead to violent conflict within or between families, or towards you (the facilitator)	✓	✗ Avoid CLTS in this situation
Most people in the village already use some kind of toilet	✓	✗
Hygiene is the main issue that must be dealt with	✓	✗
The village has done PHAST training before	✗	✓
The program also involves providing the village with free or subsidised toilets	✓	✗
The village has toilets but many people don't use them	✓	✓

Local sanitation business

If your village has a local sanitation business, this flipchart can be used as a valuable tool to increase demand for better water, sanitation and hygiene facilities. If appropriate, use this resource to promote the services of the enterprise.



1. Discovery walk

Aim:

To encourage people to start talking and thinking about the places where people go to the toilet and the problems that creates. The activity will be a success if many people feel disgusted and possibly ashamed at what they see and smell.

Materials:

None required

Step 1:

Decide where you will lead the discovery walk. Select places where people go to use a toilet, or where they go in the open (e.g. beach, bush or mangroves), places where people go in an ‘emergency’ (e.g. behind the house) and places where water is collected. If the group is too large, consider dividing the group into smaller groups. Each group can go to a particular part of the village, take notes/draw a picture of the situation and bring it back. Once all groups have completed their walks and have re-formed as a larger group, ask each group to share what they saw.



Step 2:

Get a group together and start the walk. Include men, women, children and people from different families or clans.

Step 3:

At each place: Stop – Look – Smell – Talk.



Step 4:

Questions to ask people:

- Is this the place where most of our village shits?
- Did anyone shit outside today?
- Can we count the amount of shit in this area?
- Are there flies on this shit? How many flies are on it?
- Who has used this place today?
- Is your shit still here? If not, where did it go? Where does all this shit go?
- Whose animal is this? (Dog/pig/chicken). Does it eat the shit?
- Is this the same animal that you will eat? Does it come into your house?

Step 5:

Propose a meeting to talk more about the issue.



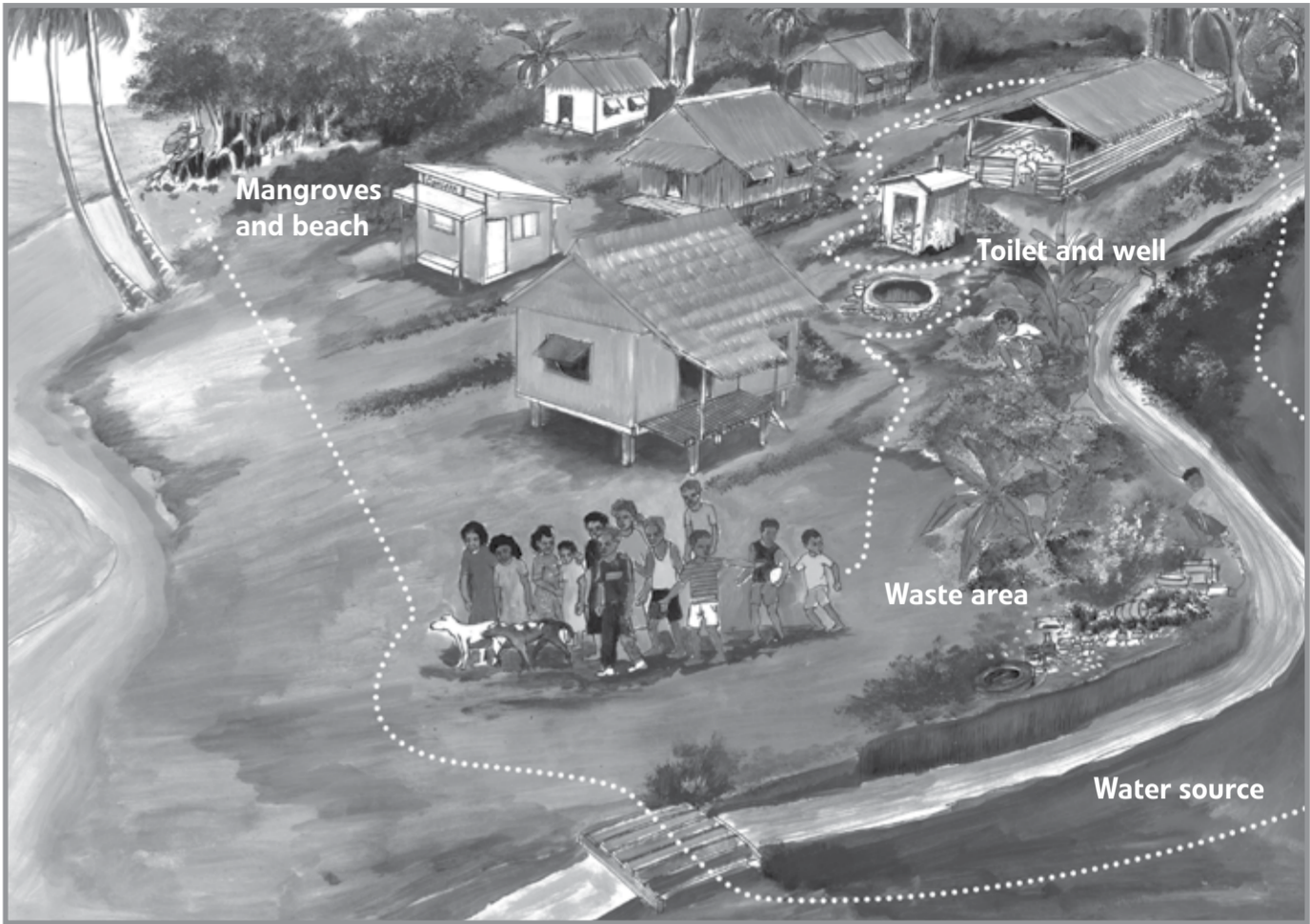
Facilitator’s note:

Before you carry out the walk, find out if there are any local taboos about men and women going near each other’s toilet areas. If there is a taboo, the groupings of participants and walking areas need to be arranged to accommodate this in order to prevent embarrassment or lack of participation.

Don’t be discouraged if people are a little disgusted or upset during this activity – this is the reaction we are hoping to generate.

Talking about shit is often ‘taboo’, but this means that sanitation issues are not attended to. A goal of CLTS is to talk openly and frankly about shit – even if it makes people feel a little uncomfortable. The CLTS approach aims to provoke people to act because they have felt disgusted, embarrassed or unclean.

During the discovery walk, do not avoid the toilet areas, but rather spend as much time there as possible, asking questions, while people inhale the smell of their shit and feel uncomfortable.



How people might react



Not interested: Try to engage people further and keep going with the activities.



Concerned and disgusted: This is good! Keep going with the activities.



Concerned, disgusted and determined that something should change: Well done! If most people react like this, consider skipping some activities and commence planning.



Angry at people (not at the problem): If the activities are creating potentially violent conflict you should stop and consider another approach (e.g. PHAST).

It might be worthwhile recording or noting people’s thoughts and responses during this session to assess learning outcomes.



2. Water and sanitation mapping

Aim:

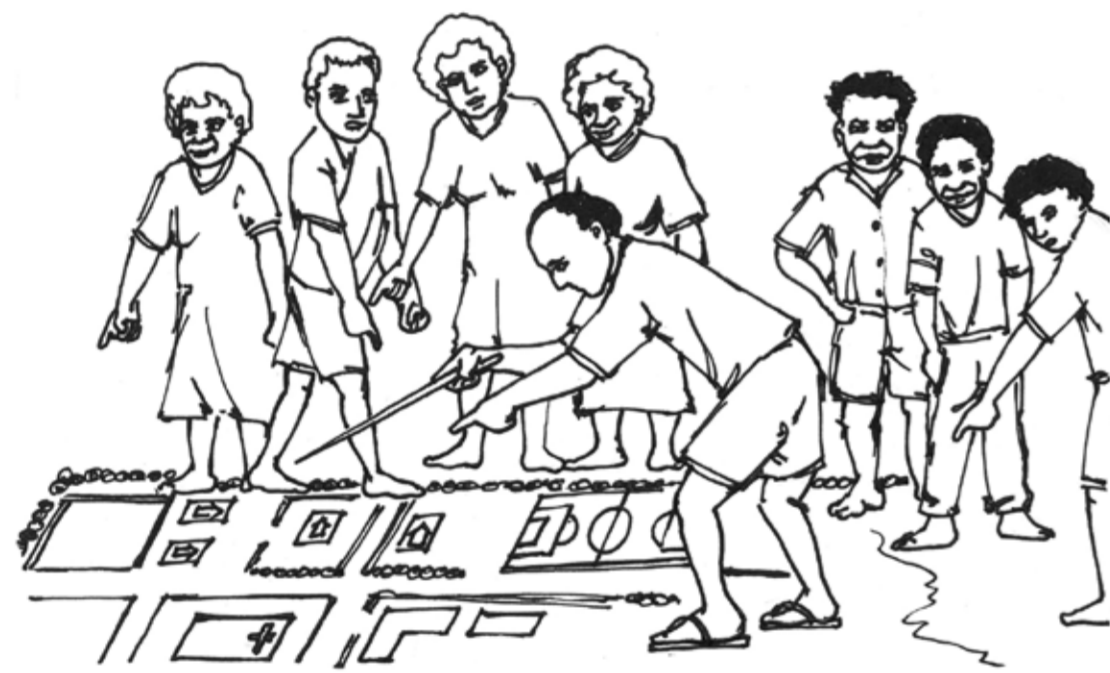
To allow people to discover where other people shit, in and around the village. People may be shocked at what they discover and unhappy about the amount of shit in their neighbourhood.

Materials:

Paper (so participants can draw their house), or stones, or coconuts.
500 grams of yellow powder (e.g. curry powder, chalk powder or sawdust).
Ball of string or wool.

Step 1:

Use local materials to mark the boundary of a map of the neighbourhood in a large open space (on the ground).



Step 2:

Ask a volunteer to mark the location of well-known local landmarks (e.g. church, school, marketplace etc). Use local materials such as rocks or sticks.



Step 3:

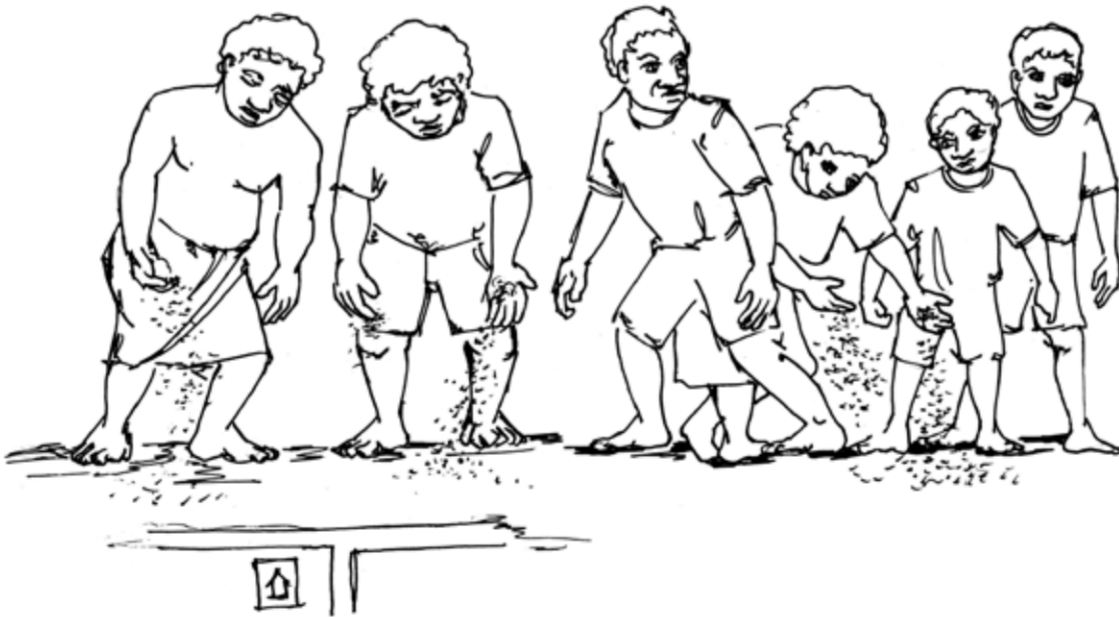
Ask the people to mark the location of their own house by placing a 'house card' (a marker such as a stone or coconut) on the map. Allow everyone to do this and arrange the map so it is a good representation of the village.

After the map is complete ask a child to show you where their house is – this is to test if the map is clear and accurate.



Step 4:

Ask each person to mark the places where they *normally* go to shit by sprinkling yellow powder on the map. There should be a lot of powder in places where many people go, and less in places where few people go.



Step 5:

Ask each person to mark the map with yellow powder where they shit in an 'emergency'. (e.g. late at night, when it's raining heavily or if they have diarrhoea).

Optional additional activity – villagers can use string to draw a line from their house to where they shit. The facilitator needs to be mindful that this identifies specific individuals and may be sensitive for some participants.

Step 6:

Observe and talk. Comment that the village seems to have a lot of shit. Ask people to identify which areas have the most shit. Ask questions such as:

- Why do people choose to shit in these places?
- Who lives near the places where people shit?
- Do animals go to the places where people shit?
- Which house is located far away from the shit? Where do they go to shit?

How people might react



Not interested: Try to engage people further and keep going with the activities.



Concerned and disgusted: This is good! Keep going with the activities.



Concerned, disgusted and determined that something should change: Well done! If most people react like this, consider skipping some activities and commence planning.



Angry at people (not at the problem): If the activities are creating potentially violent conflict you should stop and consider another approach (e.g. PHAST).

Facilitator's note: Keep it quick and to the point

Sometimes the participants may want to spend a lot of time getting the map 'right'. However, the activity is not about making a perfect map with precise locations of houses, roads and other landmarks. Remember that the objective of this activity is to discover where people shit around the village and to talk about this issue. Try to keep people moving and let them know that approximate locations are okay. You may help by placing markers on the map to show the location of a particular landmark. However, it is important that each person marks the locations where they shit by themselves.



3. It all adds up

Aim:

This activity aims to reveal the scale of the open toileting problem in the village by calculating the amount of shit and the cost of medical expenses. It also aims to highlight that without proper sanitation (such as toilets), people could be eating their own shit.

Materials:

This activity can be undertaken while standing around the village map.

Step 1:

Display the picture on the top of the flipchart showing the calculations of shit.

- Using this formula, ask the village to calculate how much shit they defecate in the open in a month or a year.
- Ask each family to write down the figure for just their family, on a piece of paper (or on the back of their house card, if you have already done the mapping activity).

e.g. 0.35 kg (average weight of a shit) x 7 family members x 30 days (1 month) = 73.5 kg of shit per month (x 12 months = 882 kg of shit per year).



Note: Those individuals or families that use toilets will calculate far less or no shit in open toilet areas.

Step 2:

Discuss:

- On average how much shit does each family produce?
- A person weighs around 70 kg. Ask them how many people it would take to weigh as much as the shit produced by the village in one year?
- Ask them what else has equal weight to the total amount of shit produced by an average family. eg. a truck of rice, or a dinghy.
- Ask them where they think all the shit goes?

Step 3:

Display the picture on the bottom of the flipchart showing calculations of medical expenses resulting from diseases that can be spread through shit.

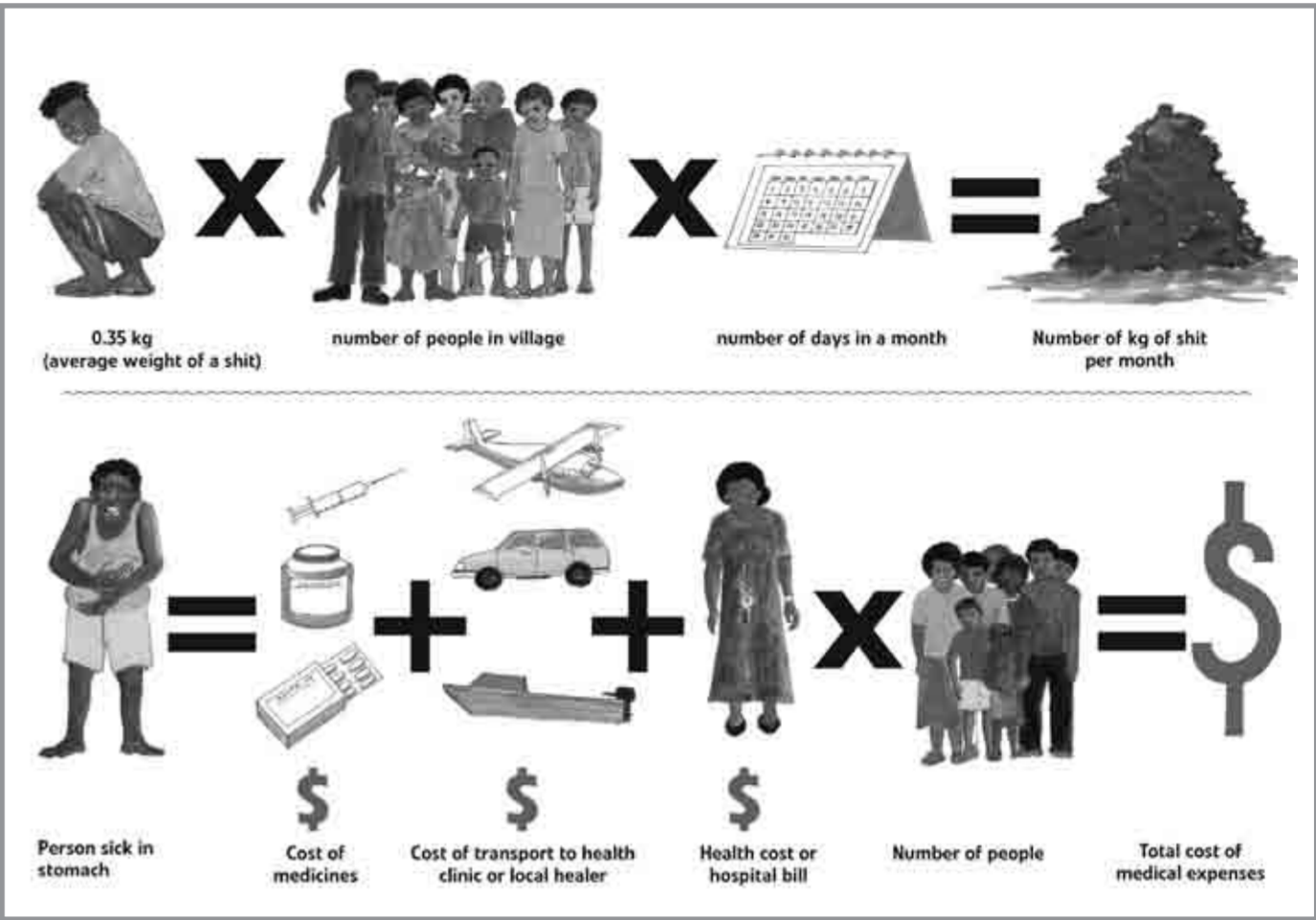
- Ask someone to explain what is shown on the flipchart.
- Ask each family to estimate how much they pay in medical expenses for stomach or diarrhoea-type illnesses in one year.

e.g. \$15 (medicines) + \$10 (boat fuel) + \$10 (doctors' fees) x 5 family members = \$175 per year.

Step 4:

Discuss:

- What happens if we become ill?
- What would happen to the total expenses if we included the amount of days of missed work?
- How does illness affect children? (e.g. Do they miss school? Who looks after them?)
- Do any families have high health expenses? Is this connected to where they live?
- Ask the group to estimate the medical expenses (due to diseases that can be spread through shit) for the whole village.
- Now that they know how much money is spent on medical expenses, ask the community what else they could have spent this money on?
- How does the community feel about this?



How people might react



Not interested: Try to engage people further and keep going with the activities.



Concerned and disgusted: This is good! Keep going with the activities.



Concerned, disgusted and determined that something should change: Well done! If most people react like this, consider skipping some activities and commence planning.



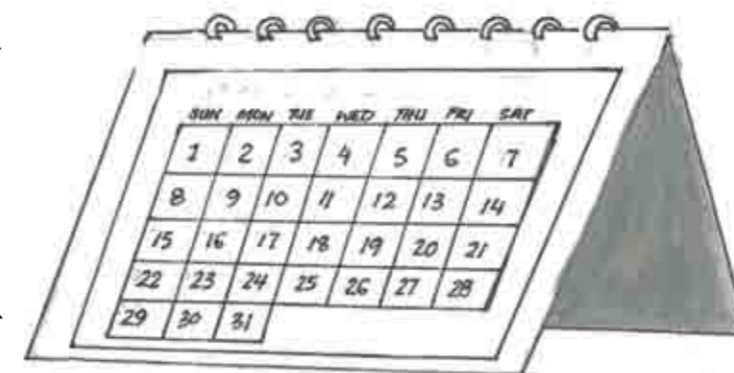
Angry at people (not at the problem): If the activities are creating potentially violent conflict you should stop and consider another approach (e.g. PHAST).



X



X



=



0.35 kg
(average weight of a shit)

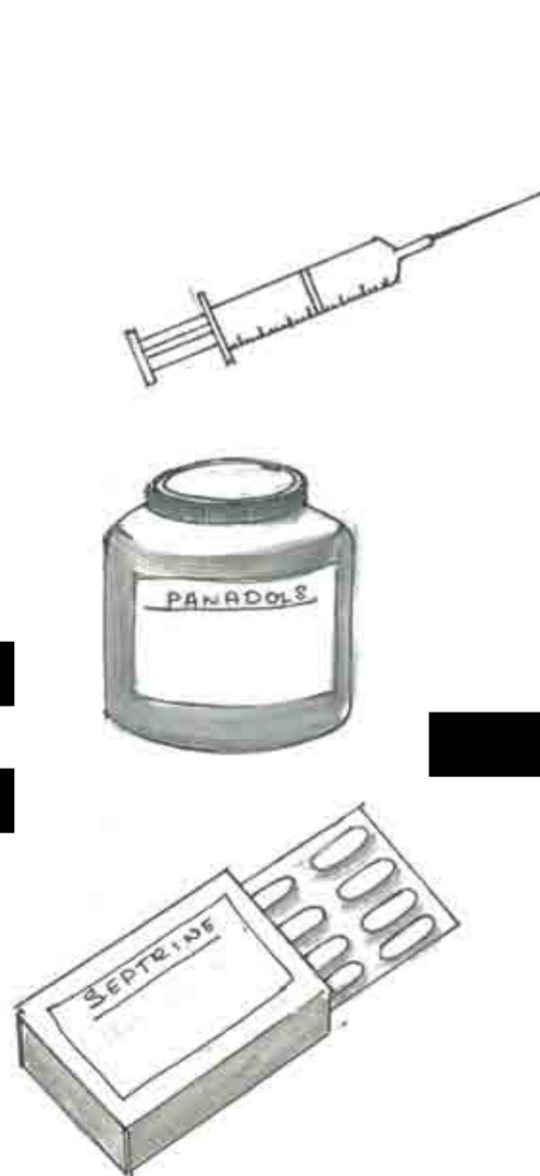
Number of people in village

Number of days in a month

Number of kg of shit
per month



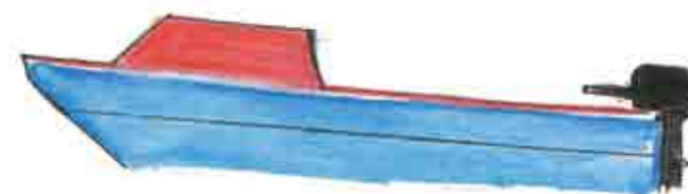
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+



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X



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Person sick in
stomach

\$
Cost of
medicines

\$
Cost of transport to health
clinic or local healer

\$
Health cost or
hospital bill

Number of people

Total cost of
medical expenses

4. Contamination pathways

Aim:

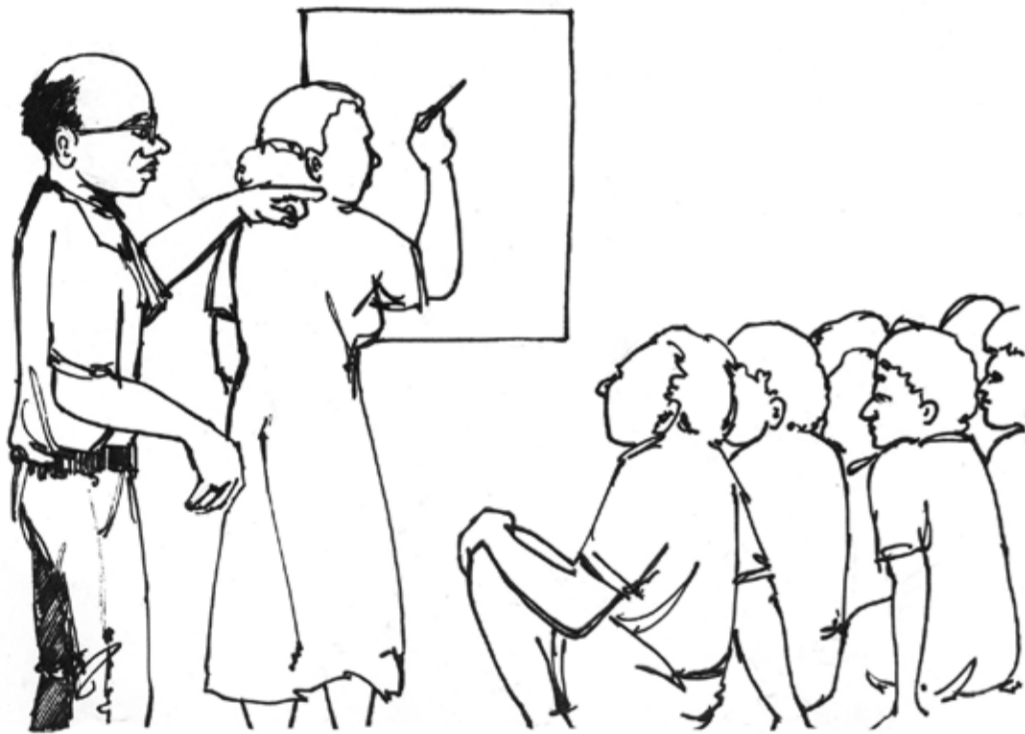
To enable people to discover the many possible ways that faecal material (shit) can be ingested (eaten or drunk) by people.

Materials:

Paper (e.g. newsprint) or blackboard, and writing materials (marker pens or chalk).

Step 1:

Before you show people the picture on the flipchart, ask them to think about the possible ways that shit could come into contact with people in the village. Make a list by drawing or writing each way it could happen.



Step 2:

Show the group the pictures on the flipchart. For each picture on the left-hand side, ask:

- What is happening in this picture?
- Which event/s could this lead to (on the right-hand side of the flipchart)?
- In this situation, how could a disease found in the shit get into a person’s mouth?
- Could this really happen in our village?
- If there is a dog/pig/chicken nearby, ask: Whose animal is this? Where has it been today?
- Do you think it is possible that we are actually eating and drinking each other’s shit?

Step 3:

Take a glass of water and ask the group if anyone wants to have a drink from it. Some may take a drink.

Then take a hair and explain that it has been wiped on a fresh shit. (If possible, it can be actually wiped on a piece of fresh shit in front of the group. The shit would need to be collected before this activity.) Put the hair in the glass of water. Now ask if anyone would like to take a drink from the glass.

Ask the people:

- Do you think fly’s legs are as thick as a hair?
- How many legs does a fly have? (They have six)
- If there are flies around, ask: Where do you think these flies have been today?

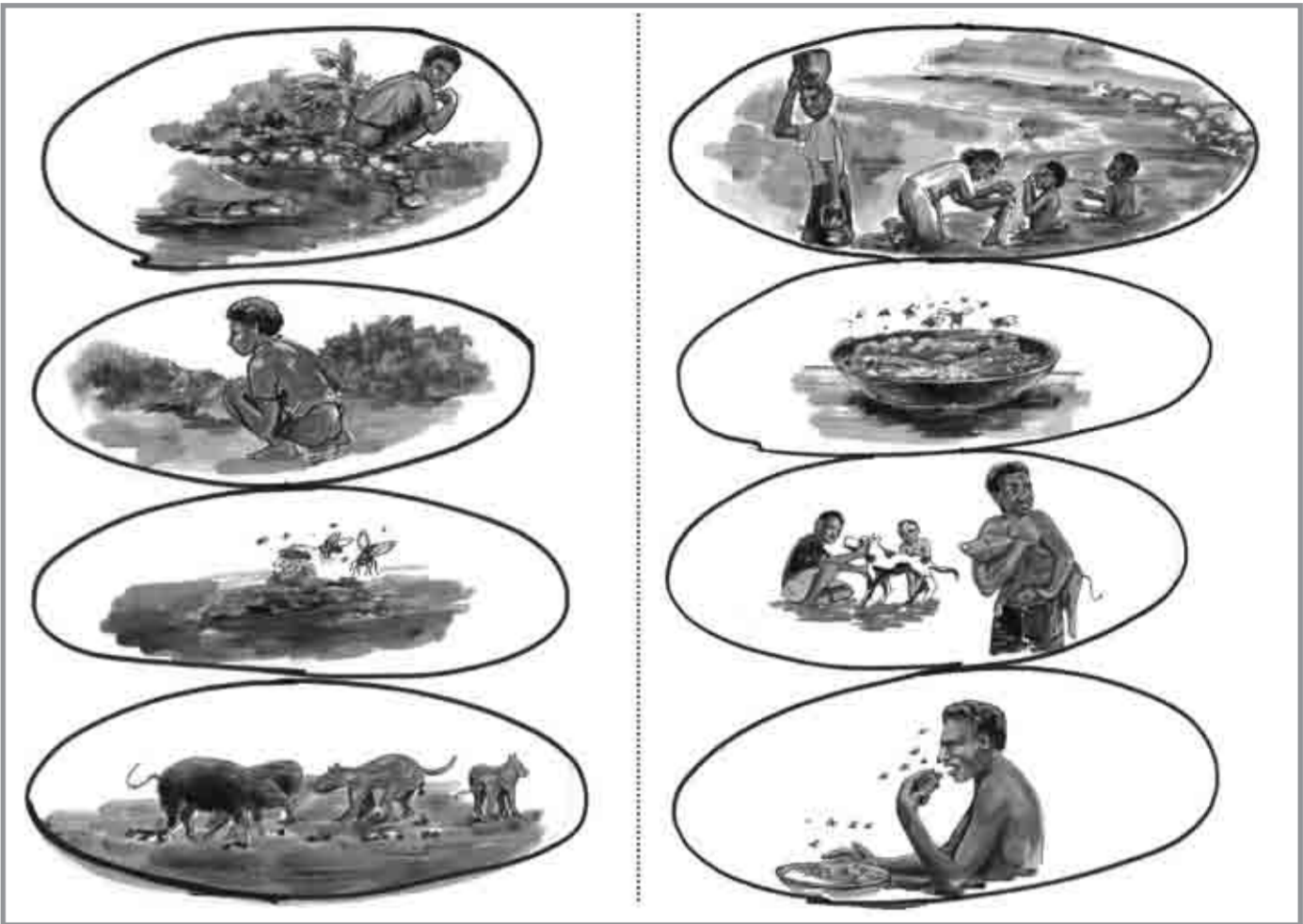


Optional additional activity – an alternative to the hair activity is the ‘Shit to mouth’ demonstration. A fresh shit can be collected whilst on the Discovery Walk. This shit is placed near an uncovered plate of food. Flies are quickly attracted, and begin to fly from one plate to the other. This visual demonstration really affects people.

Step 4:

Refer back to the list of ways that shit can come into contact with people and to the flipchart picture. For each possible pathway, ask:

- How could we stop this from happening?
- What are we currently doing to stop this from happening?



How people might react



Not interested: Try to engage people further and keep going with the activities.



Concerned and disgusted: This is good! Keep going with the activities.



Concerned, disgusted and determined that something should change: Well done! If most people react like this, consider skipping some activities and commence planning.



Angry at people (not at the problem): If the activities are creating potentially violent conflict you should stop and consider another approach (e.g. PHAST).



5. Committing to action

Aim:

To encourage members of the village to commit to improving toilets and/or building new toilets. Discuss the next steps for action in the community.

Materials:

Create a ‘public commitment board’ by using a poster, newsprint paper, or piece of timber mounted to form a sign. The board should have space for people to record their name, signature and to write what they are committing to do.

Step 1: Commitments

Show participants the ‘public commitment board’ that you have made. Ask the people if they are committed to doing something about the shit problem in the village, or if are they happy to leave things as they are, even though they are ingesting each other’s shit?

If they say they are committed to act, ask each and every person to put their name and signature on the board. Also ask them to write down what action they are committing to take. Hint: Nominate someone to write for those people who cannot do it themselves, however the person making the commitment should sign.

It is vital to seek people’s commitment to act. Knowing that you should act is seldom enough to motivate people to actually do something. Making a commitment in writing and in public is known to be a powerful motivator. However, forcing people to make a commitment will never work. It must be voluntary.

If people do make a commitment it is important to plan further meetings to decide what to do next, and to track the progress of any actions that are decided upon.

With advice from the group, select a public place to erect the public commitment board.

Step 2: Arrange your next visit to the community

At this stage, it is time to arrange your next visit to the community. This could be in a matter of weeks or a month. The idea is that the community is given time to put their commitment into action.

Step 3: Return visit to the community

When you return to the community, revisit the commitments made by the community on the ‘public commitment board’. Have there been any changes?

Yes: there have been changes

The community has highlighted their willingness to make a change to their sanitation situation. Given this important foundation, it is now time to work with the community to consider the next options.

Level of willingness in the community:

- HIGH Option 1: Training takes place to construct toilets (see Live & Learn’s manual, *Clean communities: A practical guide to building and maintaining toilets in the Pacific*).
- MED Option 2: The community undertakes a workshop on how to establish a sanitation enterprise (see Live & Learn’s *Building strong and healthy communities: Setting up a sanitation enterprise in your community*).
- LOW Option 3: The community learns more about the need for improved sanitation through undertaking the PHAST workshop (on the flipside of this resource).

No: there have not been changes

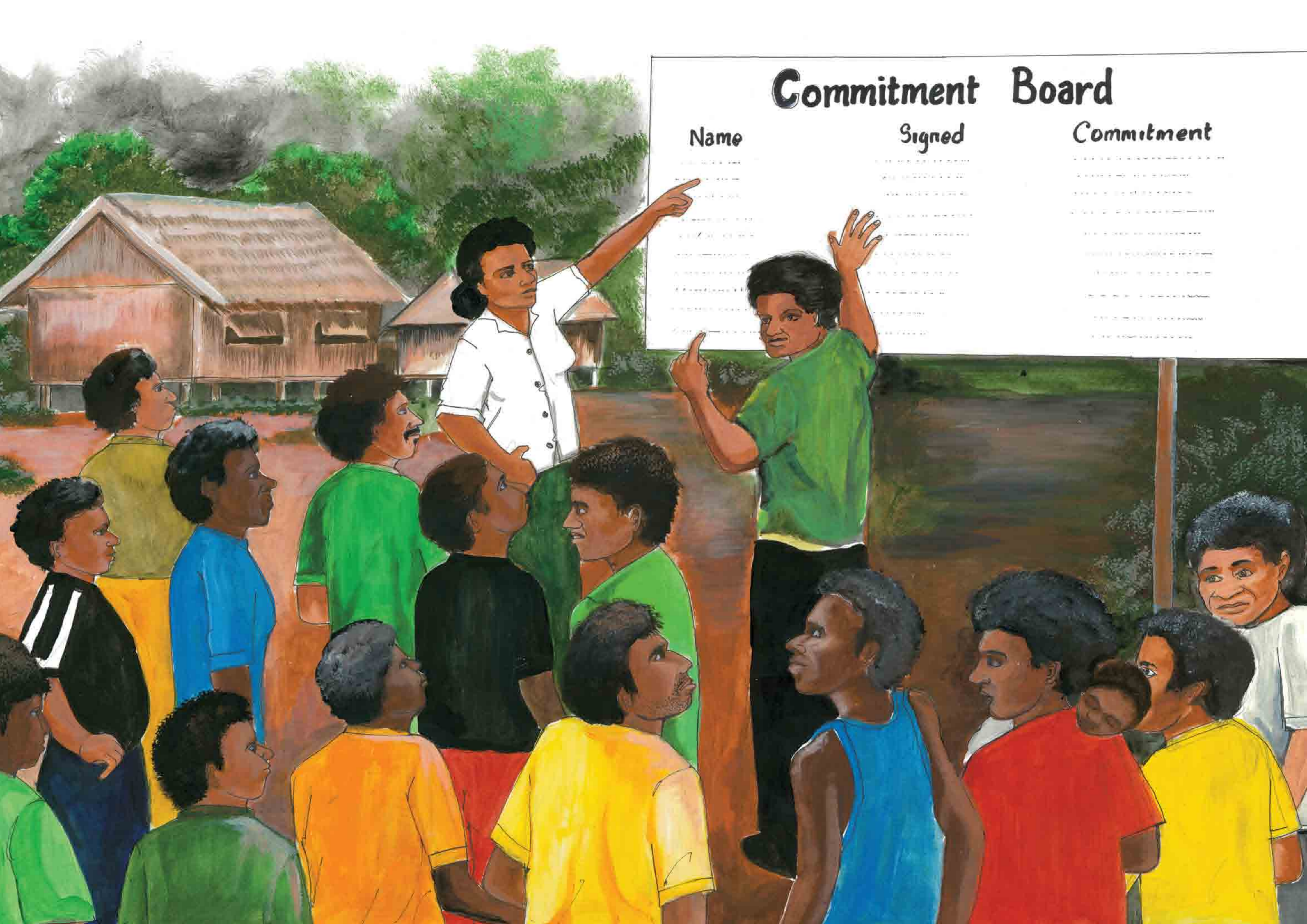
Whilst the community may have demonstrated the best of intentions to improve the level of sanitation in their community, there might be a need for additional discussions before progressing to the next steps.

Facilitator’s note: Existing groups

Most villages have existing groups that people belong to. If considering ‘collective action’, the participants should be encouraged to think about the role these groups could have. Existing groups could include:

- Women’s groups
- Church groups
- Registered business collectives or associations
- Water committees





Commitment Board

Name

Signed

Commitment

1. Mr. John Doe

2. Mr. John Doe

3. Mr. John Doe

4. Mr. John Doe

5. Mr. John Doe

6. Mr. John Doe

7. Mr. John Doe

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Glossary words

Bacteria: very small living things, some of which cause illness or disease.

Biodegradable: materials, chemicals etc that change naturally by nature into substances that do not harm the environment.

Composting: the process of converting/breaking down plant and animal waste into useful soil additives.

Contamination/contaminant: food, water, soil or air etc that is contaminated has come into contact with a substance that may be harmful or potentially poisonous.

Defecation/defecate: to pass faeces from the body.

Dehydration: losing more fluid from the body than is replaced by drinking.

Diarrhoea: frequent and watery bowel movements; can be a symptom of things such as infection, food poisoning, illness.

Excreta: the solid or liquid waste material that people and animals produce and get rid of from their bodies.

Faecal/faeces: solid waste products from the body.

Faecal-oral route: transmission from faeces to the human digestive system via the mouth.

Fertile: fertile land or soil is able to produce good crops.

Gender: being man or woman, the roles and responsibilities of men and women and how they are expected to behave. Gender roles are changeable between and within cultures.

Germ: a very small living thing that can make you ill.

Groundwater: water that is below the ground.

Health: the general condition of your body and how healthy you are.

Hygiene: clean and healthy practices that maintain good health.

Infection: a disease that affects a particular part of your body and is caused by bacteria or a virus.

Latrine: a small building or structure, usually separate from a house, where people go to get rid of faeces and urine.

Malaria: a serious disease, resulting from the bite of an infected mosquito, which causes repeated high fever and headaches and may cause death.

Menstrual pads: an absorbent item worn by a woman while she is menstruating (see menstruation).

Menstruation: the regular monthly loss of blood and womb lining from a woman of child-bearing age.

Microbes: a general term to describe the many different kinds of microorganisms which can cause diarrhoea and disease.

Nausea: the unpleasant feeling of being about to vomit.

Nutrients: a chemical or food that provides what is needed for plants or animals to live and grow.

Open defecation: defecating in the open and leaving faeces exposed.

Oral: relating to or involving the mouth.

Organic: living, or produced by or from living things.

Organism: an animal, plant, human or any other living thing.

Parasite: a plant or animal that lives, grows and feeds on or within another living organism.

Parasitic infections: infections caused by a parasite (see infection and parasite).

Participatory: a way of organising or doing something, or making decisions etc that involves everyone who will be affected.

Pathogen: a disease-causing organism such as bacteria, virus or fungi.

Personal hygiene: maintaining cleanliness and grooming of our own body. In general, it refers to looking after yourself.

Robust: strong

Sanitation: safe methods to dispose of human faeces, urine and other household waste.

Sanitation enterprises: Demand-driven small businesses that aim to improve sanitation.

Scabies: an infestation of mites in the skin, characterised by small pimples that itch.

Soakage trench: a trench that urine and liquids seep into.

Toilet pan: the part of the toilet that receives the human waste (urine and faeces).

Transmission: the process of sending or passing something from one person, place, or thing to another.

Waste water: water that has been used in homes, industries, and businesses that is not suitable for reuse as a drinking source unless it is treated.

Water-logged: a term used to describe something that is full, or saturated with water.

Wheelie bin: an outdoor rubbish bin on wheels so it can be easily moved.

References

Kar, K (2008) Handbook on Community-Led Total Sanitation, Plan International UK.

WHO (2008) Sanitation, hygiene and drinking-water in the Pacific island countries: converting commitment into action, Suva, Fiji Islands, World Health Organization.

WHO (2000) PHAST Participatory Hygiene and Sanitation Transformation Series, Geneva, World Health Organization.

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With thanks from Live & Learn Environmental Education



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