

# Eradication of pit toilets in the Eastern Cape Province of South Africa

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## 1. BACKGROUND OF THE TEBA FOUNDATION

The TEBA Foundation is a Non-Profit Organisation (NPO) that aims to make a meaningful and lasting impact in the communities we implement programmes within.

As an NPO with close ties to TEBA (PTY) Ltd, the foundation has access to a broad range of skills, competencies and infrastructure to support its vision and mandate.

The Foundation focuses on the following key competencies:

- Community-based Health Services
- Community Development and
- Project Identification, research and implementation

The TEBA Foundation has more than 75% Black Beneficiaries mainly in rural areas, therefore achieving Level 1 status and a B-BBEE procurement recognition of 135%.

The following proposal outlines our proposed approach to support the efforts of the National Department of Education, the Eastern Cape provincial and local governments to eradicate pit toilets.

## 2. PROBLEM STATEMENT

### 2.1 The extent of the issue

During the State of the Nation Address of 2019, the President reaffirmed government's commitment to eradicating pit toilets in schools by March 2022; however, this deadline has since been revised twice to March 2025. The National Department of Health reports that over 900 pit latrines are still prevalent in schools in Limpopo, the Eastern Cape and Kwa Zulu Natal. These "pit toilets" are typically in deep rural communities where access to bulk water supply and electricity is not guaranteed. Road infrastructure and access also makes these initiatives difficult to implement without an in-depth understanding and appreciation of the local dynamics.

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#### Directors

T.J. Motlatsi

T. Motlatsi

Y.Z. Simelane

S.S. Truswell

Although the Department of Education has made inroads into upgrading the infrastructure of many schools, the extent of the problem is simply too great to eradicate in a short period of time. In addition, where upgrades have been done, implementing agents and contractors have neglected to demolish existing pit toilets resulting in two preventable deaths so far in 2023 and untold stories of injustice.

## 2.2 Recent Media Coverage

- **IOL 8 March 2023** - “Body of 4 year old Girl Recovered from pit toilet at school in Glen Grey, Eastern Cape”
- **News 24 26 March** – “Three year old Langalam drowned in a pit Toilet at Glen Grey Primary earlier this month, while the body of 5 year old Lumka was found lying in a pit toilet at Luna Primary School”
- **Daily Dispatch** - “Teachers join outcry as state races to end pit latrines”

## 3. OUR PROPOSAL

Given the slow progress in the eradication of pit toilets by the Department of Education, the TEBA Foundation has set itself an objective of providing new cloakrooms for 100 Eastern Cape Schools that still have pit toilets, reducing the overall burden by 11% within 24 months from project initiation.

### 3.1 Framing the problem in terms of Environmental, Social and Governance Objectives

Based on the methodology described further on in the document the following ESG areas will be impacted.

#### 3.1.1 Environmental objectives

	Impact of project
Increase use of sustainable technologies	Low
Improve energy efficiency <ul style="list-style-type: none"> <li>• Reduce peak hour electricity consumption with gravity feed systems</li> </ul>	Low
Reduce waste and improve waste management	High
Enhance water conservation	High

#### 3.1.2 Social objectives

	Impact of project
Supporting sending communities <ul style="list-style-type: none"> <li>• Increase job opportunities for vulnerable groups</li> </ul>	High
Encourage gender equality <ul style="list-style-type: none"> <li>• Ensure a girl child has access to a hygienic environment during her menstrual cycle</li> </ul>	High
Encourage equal opportunities for the differently able	High
Invest in Health and Safety <ul style="list-style-type: none"> <li>• Eliminate accidents associated with Pit Toilets</li> </ul>	High
Promote Charitable Causes	High

### 3.1.3 Governance objectives

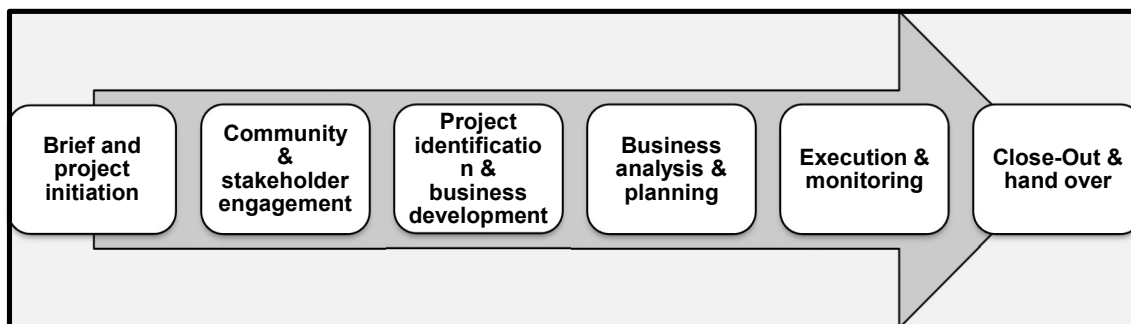
	Impact of project
Robust Internal Expenditure and Audit Controls	High
Transparent and Accurate Reporting	High
Fight Corruption, Nepotism, and Cronyism	Low
• Transparent appointment of contractors	

## 4. EXECUTION METHODOLOGY

### 4.1 Situation Analysis

A desktop review of the current state of sanitation in the target area through existing TEBA offices in the Eastern Cape to enable the development of an informed implementation plan, that responds to community needs.

We follow the following process for project implementation.



### 4.2 Brief and Project Initiation

4.2.1 As a first step, a project briefing and initiation meeting will be held with all the Project Funder, Service Providers and other select stakeholders; The purpose of the meeting is to;

4.2.1.1 Define a clear project scope and budgets

### 4.3 Community and Stakeholder Engagement

Stakeholder	Objective
Office of the Premier – Eastern Cape	<ul style="list-style-type: none"> <li>• Obtain Provincial support for the project</li> <li>• Secure SAPS involvement in protecting the site, attending briefing sessions etc</li> <li>• Secure Provincial Department of Education Support and Involvement</li> <li>• Identify specific schools</li> <li>• Secure Land use permissions</li> </ul>
National Department of Education	<ul style="list-style-type: none"> <li>• Obtain Project Approval and Support</li> </ul>
Traditional Leaders	<ul style="list-style-type: none"> <li>• Create awareness and gain support for the project</li> </ul>
School Principal and Teachers	<ul style="list-style-type: none"> <li>• Create awareness and gain support for the project</li> </ul>
Business Leaders	<ul style="list-style-type: none"> <li>• Create Awareness of the project, Quote processes and qualifying criteria</li> </ul>

#### 4.4 Project Identification and Development

4.4.1 Conduct site visits with Implementing agent and Building contractor

#### 4.5 Business analysis and planning

- 4.5.1 Issue RFQ to contractors
- 4.5.2 Obtain and evaluate quotes
- 4.5.3 Conduct Due Diligence on short listed contractors
- 4.5.4 Appointment of contractors

#### 4.6 Execution and Monitoring

- 4.6.1 Create a project steering committee (PSC) to provide project oversight
- 4.6.2 Monthly PSC meetings, Site Visits and reporting

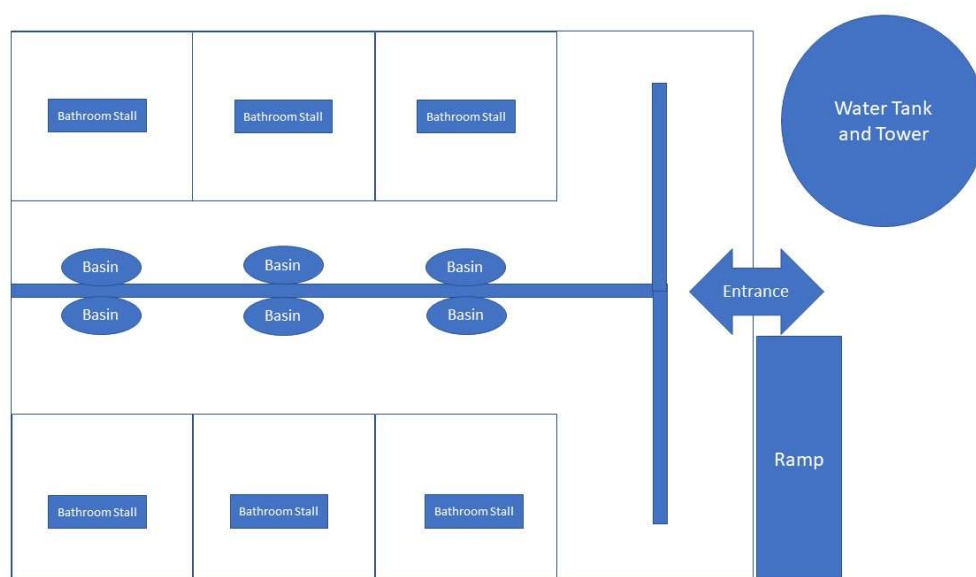
#### 4.7 Close out and Hand-over

### 5. SOLUTION DESIGN

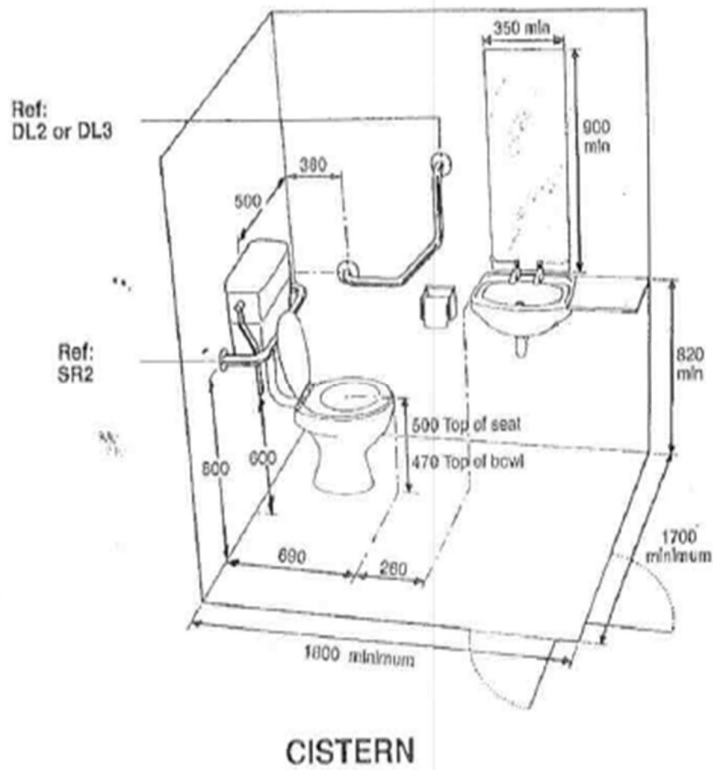
The following section describes the design of the cloakrooms for each school.

#### 5.1 56m2 Cloakroom Facility with

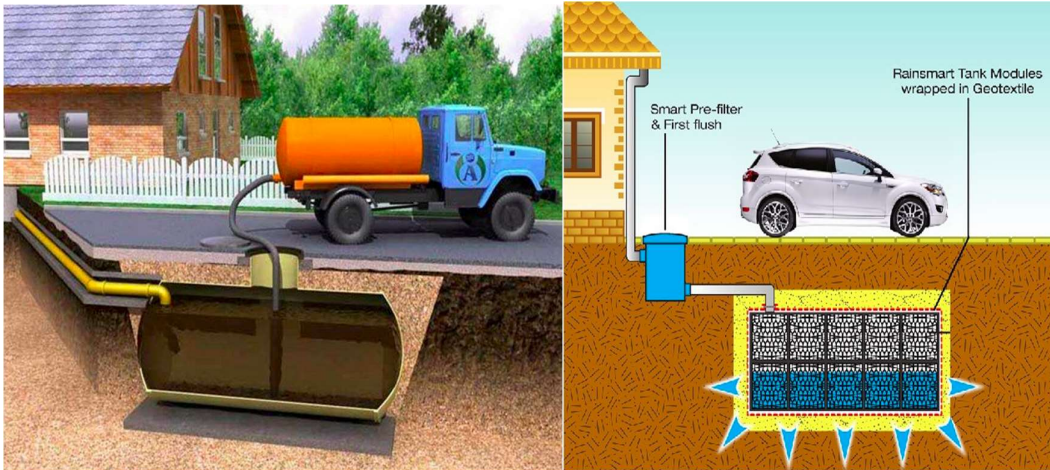
- 5.1.1 2 separate access doors for both male and female students
- 5.1.2 6 Bathroom Stalls with provisions for disabled students. 3 for female and 3 for male students
- 5.1.3 No dedicated Urinals to accommodate the privacy of gender-neutral students



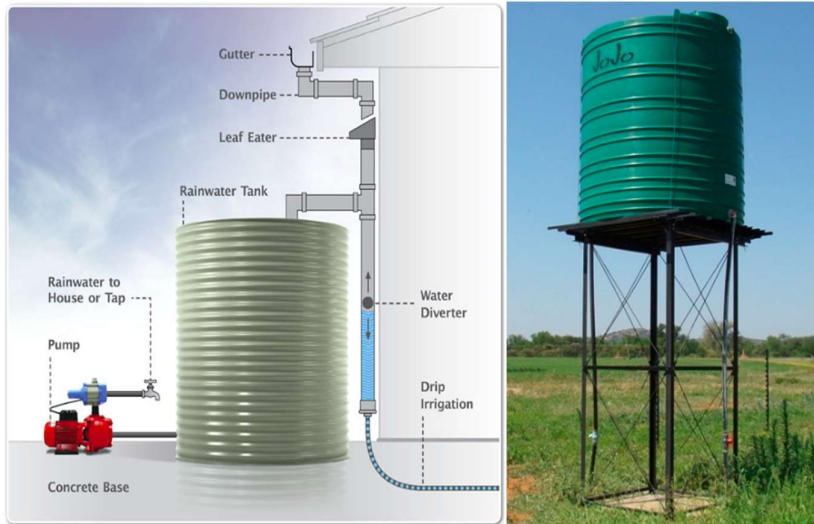
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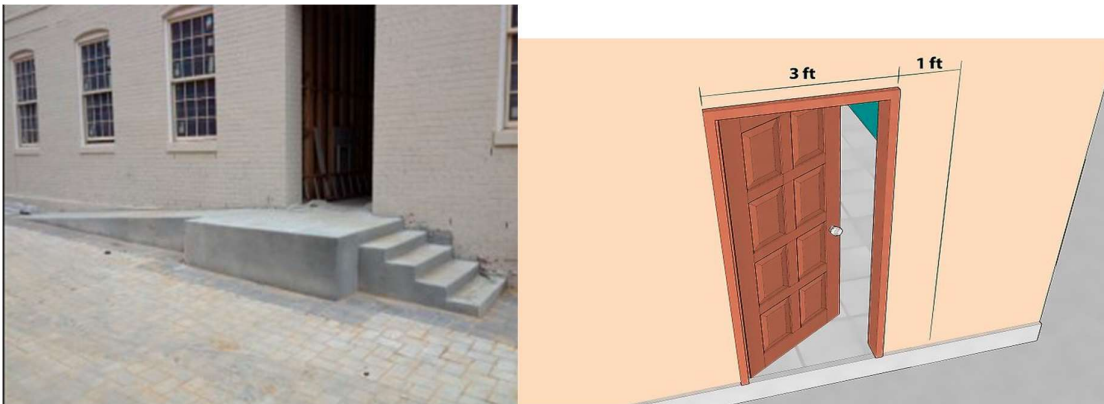
5.3.1 Equipped with a soak away system to preserve ground water resources



5.4.1 Ensures unhindered water supply through load shedding and water supply constraints



## 5.5 Wheelchair access



## 6. CONSTRUCTION TIMELINES

- 6.1.1 Each Unit takes between 6 to 8 weeks to complete
  - 6.1.1.1 Schools that lack any sewage infrastructure may take up to 8 weeks
- 6.1.2 Depending on the district, 4 Constructions can take place simultaneously
- 6.1.3 The project will take 24 months from start to completion

## 7. IMPLEMENTATION PARTNERS AND SERVICE PROVIDERS

### 7.1 TEBA (Pty) Ltd

As a well-known implementer of Health, Infrastructure and other Development Programs and, with a team of +60 and 11 offices in the Eastern Cape, will be appointed to;

- Oversee the appointment of the contractors including;
  - Issuing Calls for Quotes
  - Adjudicate Quotes

- Facilitating contracting processes between contractors and the TEBA Foundation
- Provide continuous monitoring of projects against milestones through
  - Site Visits
  - Monitoring of expenditure against contract terms
  - Reviewing project reports and
  - Regular reports to the TEBA Foundation
- Facilitate the payment of invoices to contractors at agreed milestones on behalf of the Foundation and
- Write close out reports for each completed project a

See Addendum 1 for more information regarding TEBA Track record as an implementer.

## **7.2 Local Building Contractors**

19 Reputable contractors have been identified in the Eastern Cape. These contractors have been identified to meet the following criteria;

- Black Owned as per the expanded BBBEE definitions
- Minimum of a level 3 BBBEE Score
- Previous Track record with TEBA projects
- No Black Listing
- Registration, where possible, with industry bodies

As part of submission requirements, contractors will have to prove that they;

- Employ locals from the surrounding area
- Employ locals from vulnerable groups including Woman and Youth
- Procure Materials from BBBEE suppliers

## **7.3 Consulting Engineer**

The consulting engineer will be responsible for;

- Signing off building plans and technical specifications
- 6 Site visits during the construction of the project
  - 2 Visits during foundation phase
  - 2 Visits during the brickwork phase
  - 1 Visit for snagging and practical completion and
  - 1 Visit for sign-off

# **8. MARKETING AND BRANDING**

## **8.1 Hand Over Ceremony**

- 8.1.1 Donor will be invited for a, low key, hand over ceremony with the school principal and local government officials
- 8.1.2 The resulting photographs will be availed to the donor and published on the TEBA Foundation website and social media presence

## **8.2 Branding and Signage**

- 8.2.1 Signage including the Donor Funders logo, insignia on the top left hand corner



8.2.2 The TEBA Foundation brand will feature at the right of the signage

### 8.3 Mass Media Marketing

8.3.1 Localised radio Broadcasts will be done for 1 week after the hand-over ceremony to celebrate the project

## 9. FUNDING REQUIREMENT

### 9.1 The estimated cost per facility is

Description	Amount Incl VAT	Paid to
56M <sup>2</sup> Cloakroom	R224 225.97	Building Contractor
4* VIP Toilets	R71 763.38	Building Contractor
Sewage and septic Tanks	R76 825.53	Building Contractor
Water Tank and Pressure Pump	R77 369.47	Building Contractor
Wheelchair Access	R4 739.87	Building Contractor
<b>Total Capital Cost</b>	<b>R454 924.22</b>	Building Contractor

\*Costs were calculated using a sample of 2022/2023 costs and May fluctuate by between 10% and 20%. 20 Current and previous constructions were part of the sample.

### 9.2 Other Expenses

Description	Amount Incl VAT	Paid to
Travel and Accommodation per project	R4 600.00	TEBA (Pty) Ltd
Consulting Engineer	R37 950.00	External Engineer
Marketing and Branding	R27 830.00	External Supplier
Total other expenses	R70 380.00	

### 9.3 Project Fees

Description	Amount Incl VAT	Paid to
Project Management	R104 362.57	TEBA (Pty) Ltd
Total Project Fee	R104 632.57	

The total cost per installation is R629 936.79

### 9.4 Assumptions

The following costs **will not** be recoverable from the project;-

- Vehicles
- Office Space
- Furniture and other equipment

Allowable expenses include;

- Transport at a Rate of R3.30 per Private Km Travelled by the project management team or
- Fuel provided that proof of mileage is provided in the form of a logbook



- Marketing and Branding expenses including;
  - Signage erected at the school with the Branding
  - Local Radio Campaign post the project' completion

### **9.5 Project Targets**

The TEBA Foundation is targeting the construction of 100 such facilities in the Eastern Cape

### **9.6 Total Project Budget**

- R62 993 679.32
- \$3 284 341.99 at the current exchange rate of R19.18 to the US Dollar.
- Donors are able to fund a portion of the project

### **9.7 Funding**

- Funding may be deposited directly into the TEBA Foundation Bank account which will be availed when an expression of interest is received.
- All Funding qualifies for a Section 18 A SARS Tax Certificate.

## **10. ADDITIONAL CONSIDERATIONS**

- Limpopo and Kwa Zulu Natal Provinces have similar infrastructure deficiencies – The TEBA Foundation has a footprint in select communities in both provinces
- Solar Installations could be added to assist with the pumping of water.

## 11. ADDENDUM 1 – TEBA TRACK RECORD AS DELIVERY AGENT

Since 2012 TEBA has implemented various projects across SADC on behalf of various clients and in collaboration with donor agencies.

### 11.1 Construction of homes for Individuals with Spinal Cord Injuries (SCI)

TEBA has successfully overseen the construction of 48 SCI homes since 2012  
20 of these Homes were constructed in 2022 alone. These homes typically include;

- Construction of a structure or augmentation of existing structures
- Installing wheelchair access
- Installing and upgrading bathroom and toilet facilities
- Installing water supply
- Installing septic tanks and soak away systems
- Successfully handing over the project to families

### 11.2 Borehole project

In partnership with Gold One, TEBA implemented a project to improve access to water in three districts in Mozambique, i.e. Gaza, Maputo and Inhambane.

The aim of the project was to upgrade and transform from six (6) manual water pumps to six (6) electrical powered small water pumps systems in the Southern African mine labour sending communities in the southern provinces of Mozambique.

### 11.3 Enhancing Productivity for smallholder farmers for increased food security and income generation

Through the PDIU services to Anglo-American Platinum, TEBA provided implementation support to the Mineworkers Association in Mozambique, AMIMO, for the project.

The purpose of the project was to create a suitable environment in which, mineworkers, retired mineworkers, their families (including **HIV/TB co-infected persons**), widows of mineworkers and communities affected HIV and TB epidemic through access to food and quality nutrition by the end of the project.

TEBA facilitated periodic disbursements of the R2, 2 Million funding to AMIMO and provided implementation support and monitoring to the project. The funds were for the implementation of income generation activities such as rice production on a 12-hectare farm in Chibuto, Gaza Province.

### 11.4 Skills Development Centre for Widows and Orphaned and Vulnerable Children

The PDIU service also provided project implementation to the Cross Mozambique Association (ACM) for the construction of a skills development centre in Chibuto. The PDIU has also provided implementation support to Associação Cross Moçambique – ACM. Associação Cross Moçambique (ACM) is an integral Catholic ministry that serves the needs of orphans, vulnerable girls and destitute elderly through nutrition, education, preventative health care and spiritual formation.

The purpose of the centre is to provide skills to widows of mineworkers, child-headed households and reskilling of ex-mineworkers. It is envisaged that the skills taught at the centre will increase employability for those who are still within employable age; and enable others to

identify and create income generating opportunities for themselves, such as starting their own subsistence businesses such as poultry farming.

A total of R 3,4 Million was managed by TEBA to construct a Women's and Children Centre in Chibuto Gaza Province of Mocambique.

#### **11.5 Skills Development Centre for Vulnerable young women and Children**

Construction of Women's Centre in Motimposo Maseru Lesotho targeting 116 vulnerable young women. The project supported vulnerable girls and women by improving their education status and skills levels by:

- Equipping the newly constructed women's centre in Motimposo, Maseru with IT equipment and training materials;
- Delivering a training programme that provided a formal qualification in early childhood care and development

The centre, which is operated by the Sepheo Trust and has also secured R359 180,00 from the Australian High Commission to complete this initiative

#### **11.6 Water Infrastructure in Berea and Botha Bothe Districts**

Before the project was introduced, community members used to draw water from open wells and shared water from natural streams with domestic animals.

This project repaired community boreholes in Lesotho in partnership with Thembaletu Development (the implementing agent), the Department of Rural Water Supply, and the Ministry of Education and Training within the Lesotho Government

##### **Project Impact**

- 21 363 community beneficiaries have access to safe drinking water
- Total of 683 learners & 24 teachers are currently:
  - Travelling less km to draw water
  - Have Improved hygiene
  - Schools have vegetable gardens
- 300 water minders received basic training on hand pump maintenance

#### **11.7 Livelihoods recovery through agriculture & access to finance**

This initiative assisted the Semonkong community with innovative approaches to enable recovery from the effects of the drought and climate change. The initiative improved livelihoods through sustainable agriculture practices and provided access to micro finance for 876 beneficiaries (378 female & 498 male).

#### **11.8 Development projects on behalf of community Trusts**

TEBA currently has 66 offices in 8 of the 9 provinces of South Africa. Some of the offices are on mine premises and service mine host communities. TEBA has successfully delivered development projects as follows:

Province	Projects	Projects Total Value
Limpopo	<ul style="list-style-type: none"> <li>• Dikuno Community Development Trust</li> <li>• Bohwa Bja Rena Community Development Trust</li> <li>• Ditholwana Tsa Rena Community Development Trust</li> </ul>	<ul style="list-style-type: none"> <li>• R25 000 000 (2021/2022)</li> <li>• R42 000 000 ( 2017-2022)</li> <li>• R 66 000 000 ( 2017-2022)</li> </ul>
North-West	<ul style="list-style-type: none"> <li>• Zenzele-Itireleng Community Development Trust</li> </ul>	R 14 000 000 (2019/2021)
Eastern Cape	<ul style="list-style-type: none"> <li>• Zenzele Itireleng Community Development Trust</li> </ul>	R 33 000 000 (2016-2022)

### 11.9 Health Services

Since 2012, TEBA has been providing healthcare services to medically boarded miners who may or may not be repatriated to their homes in the rural areas or foreign countries across SADC. TEBA healthcare services include, but are not limited to:

- Home-based care for terminally ill and injured ex-mineworkers
- Treatment support for mineworkers diagnosed with TB
- Management of home adaptation projects for injured ex-mineworkers
- Health education
- Screening and initiation of medication for TB at TEBA Points of Care in Lesotho
- Linkage to public health facilities for continuation of care for all patients
- Support for development of household gardens

These direct community-based services to mineworkers are implemented through a network of 64 community care-supporters and 11 nurses spread across TEBA offices.

In addition to the community-based health services, TEBA has over the years also implemented donor-funded health systems strengthening projects in Lesotho through Points of care clinics; Mozambique and Eswatini for the benefit of mineworkers, their families and communities. Below are donor-funded projects successfully implemented.

### 11.10 University Research South Africa (URSA) \_ World Bank TB Program in South Africa, Mozambique, Swaziland and Lesotho

With the South African mining industry dubbed as the leading industry in terms of TB prevalence, TEBA, as an industry service provider, developed a cross-border TB referral system to care and support for mineworkers who have been medically boarded by mines. The cross-border referral system introduced tracking and reporting mechanisms (i.e. the pink slip) in line with the World Health Organization standards ensuring continuity of care across borders. With the support of TEBA's health staff (care-supporters and nurses), mineworkers and their families receive the following services:

- Direct Observation Treatment Systems (DOTS's)
- Prevention of TB and HIV (including distribution of condoms)
- Clinical services such as systematic screening, diagnosis, and treatment through the opening of TEBA Points of Care in Lesotho
- Adherence care and support
- Psychosocial support
- HIV testing
- TB contact tracing
- Tracing of defaulters
- Referral (cross boarder) of mineworkers, their families including children

To enable the effective provision of these services, TEBA offices in Lesotho are equipped with Gene X-pert machines. TEBA's partnership with the various ministries of health ensures the credibility of the services provided by the various offices and ultimate attainment of project objectives.

#### **11.11 Southern Africa TB Health Systems Strengthening (SATBHSS) Project- World Bank through the Lesotho Ministry of Health**

Following the success of the URSA project, the Ministry of Health (MoH) in Lesotho was awarded funding through the World Bank's SATBHSS Project to continue with TB systems strengthening. The MoH in Lesotho, in turn provided TEBA with funding to continue and build on the work of the three Point of Care (PoCs) attached to TEBA offices in Lesotho.

The overall objectives of the SATBHSS projects are to:

- Improve coverage and quality of TB control and occupational lung disease services in targeted geographic areas;
- Strengthen regional capacity to manage the burden of TB and occupational diseases.

The funding made available to TEBA was mainly to provide administrative support (including provision of medical supplies) and human resource support to TEBA PoCs. This support would ensure that the PoCs are functional at all times and accessible to miners, ex-miners and their families for TB, HIV and other healthcare services, such as family planning.

#### **11.12 Building Local Capacity for Delivery of HIV Services in Southern Africa Project (BLC) – USAID-funded through Management Sciences for Health (MSH)**

The BLC project started in 2010 and was implemented in 6 SADC countries. The aim of the project was to provide technical assistance in organizational development, including leadership, management, and governance in three key areas, i.e. care and support for orphans and vulnerable children; HIV prevention and community-based care.

TEBA was selected as one of 13 regional civil society organisations (CSOs) in Southern Africa which partnered with BLC through a rigorous selection, orientation and priority setting process. Through an Organizational Capacity Assessment (OCA) process, BLC facilitated a participatory baseline assessment in July 2013 which prioritized TEBA's capacity development needs. A re-assessment in September 2014, followed by a simulated USAID pre-award survey, confirmed the organization's strengthened technical, operational, strategic, and financial capacity and compliance to generally accepted management standards and USAID rules and regulations. This positive outcome led to the BLC recommending TEBA as capable of independently receiving, managing, and reporting on USAID funding.

#### **11.13 3.4 ICAP-PEPFAR- Strengthening Local Capacity to Deliver Sustainable Quality-Assured Universal Coverage of Clinical HIV and TB Services in Eswatini**

In 2016 TEBA launched a partnership with ICAP in Swaziland to strengthen local capacity to deliver sustainable, quality assured, universal coverage of HIV/AIDS and TB in Manzini Region, targeting current and former miners and their dependants.

The TEBA office in Manzini was funded to provide prevention and screening activities as well as HBC services and community education programs that address stigma around TB and HIV; and to empower vulnerable groups to identify disease symptoms and improve health-seeking behaviour.

The project's main objectives were to:

- Provide TB and HIV screening services for miners and their dependants; and
- Track and trace miners (in-country and across borders) who are missing their appointments or lost to follow-up from TB and/or HIV clinical care and treatment for the purpose of treatment re-initiation.

#### **11.14 Project Ku-Riha- National Department of Health**

In November 2014 eight gold mining companies committed to seeking a comprehensive solution to compensation and medical care of mineworkers and ex-mineworkers with occupational lung diseases. The project focussed on a number of key areas including;

- Building a database of previously certified individuals who have either been paid or are yet to be paid due to outstanding documents;
- Tracing individuals who are due a payment and collecting the necessary documents;
- Providing facilities for the diagnosis of occupational diseases; and
- Strengthening the administrative capacity of the MBOD.

Initially TEBA was contracted to build an electronic database of 200 000 paper-based files. This exercise enabled further analysis which eventually revealed that 105 000 individuals are due for compensation by the MBOD. As a follow-up initiative the Chamber of Mines contracted TEBA to provide Tracking and Tracing Services over a 6-month period from April to September 2016. At the end of the project 4 700 individuals were successfully contacted and 3 500 submitted documents to the MBOD for compensation for occupational diseases.