

**Water and Sanitation Program: Toolkit**

# Introductory Guide to Sanitation Marketing Implementation

## V. Implementation

### Key Points

#### 5.1 Roles of Multiple Sectors

- ✓ The nonprofit, public, and private sectors each have roles in establishing and maintaining a sanitation marketing program.

#### 5.2 Suggested Staffing

- ✓ It is important to properly staff a sanitation program from the outset. Key positions are program manager; specialists in marketing, capacity building, and monitoring and evaluation; and district or regional coordinators.

#### 5.3 Capacity Building

- ✓ As a complementary approach to CLTs, sanitation marketing requires its own resources and tools for scaling up.
- ✓ Key tasks in capacity building include establishing training standards, formulating a training strategy, recruiting skilled training partners, and developing training materials.

#### 5.4 Monitoring

- ✓ Program managers should use various performance monitoring strategies to track progress against planned activities or outputs and intended outcomes, and adjust their implementation strategy as necessary.

#### 5.5 Budgeting

- ✓ The budget for a sanitation marketing initiative must include costs for research, advertising agency, DCC activities, and capacity building, as well as related costs, such as microfinance or grant support through partner organizations.

#### 5.6 Procurement

- ✓ Implementing a sanitation marketing program at scale requires sizable contracts for research, advertising, media placement, and capacity building.

#### 5.7 Sequencing Activities

- ✓ A comprehensive sanitation marketing program will take about a year to progress from the planning and procurement phase to activity launch.
- ✓ WSP strongly recommends maximizing synergies between CLTs and sanitation marketing activities with communication platforms.
- ✓ Demand and supply strengthening activities must carefully sequenced to avoid shortfalls in which supplies do not match increasing demand.

### Key Terms

For definitions of terms, see Appendix, p. 51

capacity-building specialist  
district and regional coordinators  
marketing specialist  
monitoring and evaluation specialist  
program manager

experiential learning cycle  
training delivery  
training design  
training management  
training strategy

communication channels  
cost exposure survey  
lot quality assurance sampling (LQAS)  
media monitoring  
message recall  
performance monitoring  
spot checks

## V. Implementation

### 5.1 Roles of Various Sectors

There is no single model to use when implementing a sanitation marketing initiative; however, most social marketing initiatives are undertaken by the nonprofit sector or government agencies. The role of private sector collaborators is critical on many levels, but their participation is motivated more by sustaining a viable business than by providing a social good. Following are some general guidelines for consideration.

*Nonprofit or public sector.* The role of the nonprofit sector, such as the international development community, or the public sector, such as government agencies, is to design, coordinate, and monitor a sanitation marketing initiative at scale and engage the private sector where it has a comparative advantage. In country implementations, WSP led the development of the communication campaign and supply-strengthening strategy, with local governments implementing certain parts but these areas could also be filled by other organizations or a national-level government agency with the appropriate staff.

As sanitation programs grow further in scale, WSP anticipates that new counterparts within the various ministries might emerge, particularly for the program design phase. A centrally or provincially located counterpart might eventually lead or support the formative research process and another might lead or support the development of behavior change communication (BCC) strategy and campaign that will be implemented and budgeted through local governments. For example, the communications counterpart could be the Information, Education, and Communication (IEC) cell typically found in the Ministry of Health or the Department of Rural Health Care within the Ministry of Rural Development. Alternatively, the counterpart could be a working group, a cross-departmental committee or a task force. Program managers must determine early in the design phase where candidate counterparts are. Within a given country, it might be instructive to look at how other large-scale social marketing initiatives in such areas as HIV/AIDS, malaria, and family planning are managed.

The public sector should play a lead role in setting and monitoring standards (for example, safe disposal of the

#### See Online Implementation

[www.wsp.org/sanmarketingtoolkit/implementation](http://www.wsp.org/sanmarketingtoolkit/implementation)



sludge removed from septic tanks) and providing the enabling environment for the sanitation business sector (for example, reduction of prohibitive tariffs on raw materials). Over time, the public sector will likely assume additional responsibilities, such as the design of the sanitation marketing program.

*Private sector.* The private sector plays a range of critical roles in helping develop and implement a sanitation marketing initiative. There are two categories of private sector actors:

- those involved (usually on a contractual basis) in developing and implementing supporting activities such as conducting research, designing communication materials, and implementing capacity-building activities; and
- those who deliver services or products that directly contribute to improving rural sanitation (such as microfinance institutions or small-scale entrepreneurs who build latrines). Over time, associations, cooperatives or other types of networks could emerge as the business sector evolves.

Additionally, hybrid value chains involving social entrepreneurs may emerge.

### 5.2 Suggested Staffing

Several staff positions are vital to supporting a sanitation marketing program at scale:

- *Program manager.* The program manager oversees the day-to-day management of all the components in the framework described in Chapter 1.2. He or she is a sector professional who understands the problem's scale in the respective country, the political environment, the relevant private and public sector actors, and the funding structure for rural sanitation. This

person can work closely with government counterparts to help develop a strategic vision and concrete action plans to implement a large-scale rural sanitation program.

- *Marketing specialist.* WSP's experience shows that few sector professionals have a background in marketing or behavior change communication, so it is important to have a specialist on the team who can manage research and advertising agencies, interpret results from formative research, develop the marketing strategy and plan, and translate the strategy to support agencies such as capacity-building firms. This person should be recruited from the private sector or a nonprofit social marketing organization. Someone with broader communications experience such as corporate or public relations might not have the full skill set required.
- *Capacity-building specialist.* Similar to the marketing specialist, this person might lack experience in sanitation but have expertise in instructional design and training program development. This person can work with short-term consultants who are content specialists in areas such as small business management or latrine construction. This person will be in charge of developing and implementing the capacity-building strategy, and managing any contracted firm, NGO, technical institute, or university.
- *Monitoring and evaluation (M&E) specialist.* This person works with the team's other specialists to determine what critical information needs to be monitored to gauge whether the program is achieving its intended results at the output, intermediate result, and outcome levels. He or she will analyze existing systems used by the government to monitor sector performance, and develop and implement a monitoring plan that augments existing sources if required. The M&E specialist will identify the source of information, the frequency with which the data will be collected, and how the information will be used to make decisions. He or she will also provide the content necessary to build partners' capacity in M&E.

- *District or regional coordinators.* Unlike the specialists, these individuals will likely be located in the different districts or regions where implementation is taking place. These staff members play an instrumental role in coordinating capacity building and other activities in their respective geographic areas. They work closely with contracted firms to coordinate activities with local governments and service providers.

The exact team composition will vary according to the task at hand, and will include one or more staff members (program manager, marketing specialist, and so on) as well as relevant counterparts from the government or other partner organization.

### 5.3 Capacity Building

Significant progress has been achieved in developing training programs (and tools) for other approaches for scaling up rural sanitation such as Community-Led Total Sanitation (CLTS)<sup>44</sup>; however, sanitation marketing's recent emergence as a complementary approach to CLTS now requires specific efforts to develop its own tools and resources for scaling up. As previous chapters have noted, sanitation marketing is a new community of practice with many lessons learned and more to come. This chapter presents suggestions based on WSP's experience to date.

#### Standardize Training Approaches

A training program designed to scale up sanitation marketing must provide consistent, quality replication of established best practices. While recognizing that variability exists from context to context, the standardization of approaches or methodologies provides the foundation on which to build a strong program. In general, training standards serve to:

- Define a common set of expectations based on best practices in training to achieve greater quality;
- Define the criteria against which training providers can be evaluated; and

<sup>44</sup> The Institute of Development Studies (IDS) has led documentation efforts for CLTS. Its manuals have been widely adapted and used in scaling up CLTS. See [www.communityledtotalsanitation.org](http://www.communityledtotalsanitation.org).

- Enable governments, international organizations, implementing partners, and training institutions to support effective training for scaling up rural sanitation.

Some tips to keep in mind when working with governments to develop the capacity-building strategy include:

- *Develop a training strategy at the program's outset.* This strategy should include a needs assessment, situation analysis, and plan. It is a comprehensive document that answers how, what, where, when, and why the training program will be designed and delivered.
- *Follow an established training methodology appropriate to the target audience(s).* The most widely used training methodology for scaling up rural sanitation is the *experiential learning cycle*, a methodology that builds on participants' knowledge and experience to increase information retention.
- *Identify quality training partners to help develop training materials, and deliver and manage trainings.* Using pre-established criteria for identifying training partners can assist in this process.
- *Develop high-quality training materials.* Materials should be easy to translate into local languages and culturally appropriate. They should include a facilitator guide, a participant manual, and training aids (such as flip charts or PowerPoint slides) for each presentation.
- *Develop a monitoring and evaluation program.* This program should include indicators to monitor training outcomes, a plan for collecting those indicators, and a vision for what to do with the collected data.
- *Identify training managers.* Put in place training management who will oversee administrative and logistical issues necessary for successful trainings.

### Formulate a Training Strategy

A training strategy is a comprehensive guide that outlines the steps and resources necessary to put a training program into action. Questions that the strategy seeks to answer include:

- What are the training needs with respect to sanitation marketing?
- What are the program's purpose and objectives?
- Who needs to be trained and what will they be trained to do?
- Who is responsible for what part of the program?
- Is the government providing resources?
- Is the private sector involved?
- What training partners are available to design trainings as well as conduct and manage them?
- Are there qualified training specialists?



CLTs triggering in Indonesia



Mason training in Tanzania



Mason training in Indonesia

- What facilities are available for training delivery?
- Who will be invited to a given training?
- In what sequence will trainings be delivered and when?

### Recruit Skilled Training Partners

Once a training strategy has been developed, or concurrent to its development, you will need to recruit qualified and skilled training partners to fill three distinct roles:

- *Training delivery* is the most common role associated with trainings. It requires specific skills such as strong facilitation, the ability to provide constructive feedback, and competence in managing groups. Many organizations and/or individuals perform this function. Some are polyvalent and can deliver trainings in several technical areas (latrine construction, business management, and so on), while others specialize in a given area. The Tanzania program hired two organizations, each responsible for implementing all technical aspects of the training program in separate regions. In WSP Indonesia's program, however, an institution implemented the mason training program while an NGO implemented the vendor/entrepreneur trainings.
- *Training design* is a specialized skill requiring information gathering, decision-making, design, and facilitation. In general, subject matter specialists (for example, sanitation technical experts) do not make good training designers because they tend to begin with training content instead of course design. This role requires knowledge of the training design process and recognition that training materials must include a facilitator guide, a participant manual, and training aids, such as presentation slides or flip charts. The WSP programs in India and Tanzania recruited separate firms/individuals with specific training design skills, whereas the program in Indonesia has a training specialist on staff whose responsibilities include training design.
- *Training management* includes all of the logistical requirements for running the trainings, such as venue, budget, and materials. Often, the same organization responsible for training delivery also performs the management function. In a scaling up program with trainings at cascading levels, procurement of an entity that can assure training management lifts a huge burden from program managers.

Although one person or organization might be able to undertake all three roles, these related but unique skill sets are often found in separate entities.

### Develop Training Materials

Developing quality training materials requires both training design specialists and subject matter specialists (such as in marketing or latrine construction). The training design expert typically takes charge of designing the session outlines and details to be included in the facilitator guide. Subject matter specialists take charge of putting together technical handouts to be included in a participant manual. Given the repurposing of these materials for different target groups (for example, regional and local implementers), it is best to use simple language.

After the training materials have been drafted, we strongly recommend testing them before implementation.

### Understand Training Participants

Understanding participants includes knowing their roles and goals. Questions to answer include:

- Whose capacity are you building? The government's? NGOs'? The private sector's?
- What are you training participants to do? Build latrines? Market latrines? Start-up businesses? Monitor a program?
- Do you need to train people to ensure the supply of sanitation goods or also to create demand through the use of BCC materials?

There are two broad categories of training participants:

- *Implementers* will actually implement components of the sanitation marketing program. The technical skills to implement these components require attention to both the supply and demand sides of the market equation. Masons/product manufacturers must be trained in building the latrine products (sanitation slabs, substructure components, and so on). In some cases, they also need to know how to market their products and/or how to monitor their progress. Retailers (also referred to as entrepreneurs or vendors) must know what products are available, where they can procure them, and how best to market them. They can benefit from



business management skills training and monitoring. They might also need assistance in developing seller collectives,<sup>45</sup> which can help promote their businesses. Program managers (such as district governments) need to know how to monitor progress and, in some cases, how to use sanitation budgets to implement BCC campaigns that have been centrally developed.

- *Trainers* will train the implementers. Trainers need both technical skills related to the above trainings (manufacturing, selling, marketing, managing businesses, running media campaigns, and so on) and specific facilitation skills that allow them to conduct high-quality trainings. These trainers must be recruited using pre-established criteria that include field experience in the subject matter they are training on. For example, a trainer who is to conduct a technical training on manufacturing latrine products must have field experience manufacturing those products.

### Training Models

WSP has tested several training models in different contexts. In Indonesia, masons and retailers (or vendors and entrepreneurs) are separate target groups and follow separate trainings. In Tanzania, masons also serve as retailers, so one training covers both functions.

Although sanitation marketing and CLTS are a natural combination, the training of CLTS facilitators and sanitation marketing supply actors (masons, retailers, and so on) has typically been separate. Masons and CLTS facilitators may go to the same training site for an introductory session. They then separate for specific technical training content but come back together for field exercises and debriefing. During the field visit, CLTS facilitators stimulate demand and masons present technical options and take orders for follow-on visits.

It is expected that capacity-building models and approaches will evolve over the next years as the sanitation marketing programs scale further up and results become shared within the community of practice.

## 5.4 Monitoring

Performance monitoring allows program managers to track progress against planned activities or outputs (such as capacity

building) and intended outcomes (such as cessation of open defecation and correct disposal of children's feces) so they can adjust their implementation strategy and plan. Key intermediate outcomes to monitor are changes in behavioral determinants such as improved access to sanitation suppliers. These will have been identified in the formative research phase.

The program manager can conduct performance monitoring through a range of data collection strategies and sources whose reliability and cost vary. These activities are similar to the primary and secondary research methods described in the formative research chapter (Chapter 2) and include:

- *Activity reports.* Implementing agencies, staff, or partners report back on key activities of interest to the program. Being self-reported, some spot checking might be required to verify their accuracy. It is generally easier to obtain data on a regular basis from agencies that have been contracted and report back on commitments/deliverables. Non-contracted partners might not have the necessary resources or incentives to do so.
- *National surveys* (for example, Multiple Indicator Cluster Surveys [MICS] and Demographic Health Surveys [DHS]).
- *National databases/Management of Information System (MIS).* WSP in India has drawn on data from the Total Sanitation Campaign (TSC) to follow progress on achieving open defecation-free communities and other indicators.
- *Ad hoc surveys.* Tracking surveys and the surveys described in formative research can be used to monitor population-based indicators.
- *Private sector data.* Data such as sales from sanitation providers could help the team monitor demand as well as supply strength. However, these data are more challenging to obtain: small providers might not keep records or maintain accurate ones; larger providers might not share them for competitive reasons.

Table 3 presents illustrative indicators of interest and possible data sources.

<sup>45</sup> Seller collectives bring together multiple retailers to work as teams and achieve economies of scale—for example, a marketing collective can pool resources to develop more marketing tools for less money.

**TABLE 3: INDICATORS AND POSSIBLE DATA SOURCES**

Indicator	Comments	Possible Data Sources
Number of people with effective access to improved sanitation facilities by 2015, as defined by the Joint Monitoring Program (JMP) on Water Supply and Sanitation (WSS) and national government standards <sup>46</sup>	This indicator uses JMP Question 6, “Type of sanitation facility used by household,” as an indication of the household’s access to adequate sanitation. JMP criteria for improved sanitation facilities are pour/flush, ventilated improved pit latrine, pit latrine with slab, or composting toilet.	Surveys
Percentage of households with children under 3 for whom the youngest child’s feces are disposed of safely as defined by JMP	The indicator directly uses JMP Question 9: Disposal of child feces. The indicator aims to determine what was done with the feces of the youngest child in the household when he or she most recently passed a stool.	Surveys
Uptake/use of centrally developed materials by local governments or partners	Impact of communication campaign might be limited if budget or uptake for dissemination of materials at local level is low.	Budgets/actual expenditures, partner reports, surveys
Exposure to interventions	If target audience is not sufficiently exposed to the intervention, intermediate outcomes (such as changes in behavioral determinants) may not be achieved. It is therefore important to monitor exposure to the intervention, particularly when implementation is being led by local governments or some other non-contracted partner.	Surveys
Quality of supply/service delivery	Includes quality of toilets built, quality of service at point-of-sale, and so on	Mystery client surveys, observations, customer surveys, field supervision reports
Coverage of supply	A certain minimum standard of coverage could be established as a goal (for example, at least 90% of the communes have one accredited provider) and periodic surveys conducted to monitor coverage.	Lot quality assurance sampling (LQAS)
Behavior change	Effective use of toilets, maintenance (including cleaning) and handling of children’s excreta should be monitored in addition to toilet construction.	Surveys, structured observations
Concentration index	Measures equity based on socioeconomic access of use of product (for example, improved facility) or adoption of a behavior (such as open defecation). <sup>47</sup>	Surveys
Changes in behavioral determinants	Monitors determinants identified as associated with behavior through the formative research (social norms, access to desirable products, and so on).	Surveys

<sup>46</sup> Quantitative and qualitative targets and timelines for performance indicators will be defined during the preparation process and will involve each country team. Additional, country-specific indicators might also be included and monitored at the country level.

<sup>47</sup> World Bank (n.d.) *Quantitative Techniques for Health Equity Analysis—Technical Note #7: The Concentration Index*. Retrieved November 2, 2007, from [www1.worldbank.org/prem/poverty/health/wbact/health\\_eq\\_tn07.pdf](http://www1.worldbank.org/prem/poverty/health/wbact/health_eq_tn07.pdf)



The team can monitor dissemination of the communication component of the sanitation marketing initiative using several methods.

- Through *media monitoring*, third-party agencies can verify whether TV or radio spots are being aired according to plan and billboards maintained and functional. For example, in many countries, billboards are dismantled for the metal's scrap value or get damaged by severe winds.
- Front-line workers (such as health extension workers (HEWs) and sanitarians) carrying out IPC should submit *field reports* on their use of various materials (how many, where, and so on).
- When feasible, program managers should conduct their own *spot checks* during their supervision trips to the field or consider hiring a consultant to do so. The main purpose is to verify that the materials are being used as they were intended both in the short term and over time.
- Population-based surveys can be used to track the level of exposure to various communication channels and gauge message recall (the main messages taken away). Tracking surveys are quantitative surveys that collect cross-sectional data to enable the monitoring and evaluation of key population-based indicators from the results framework as well as variables that the program hopes to influence and improve.

Tracking surveys allow program managers to identify the behavioral determinants that are associated with key behaviors (such as open defecation or sharing) which, in turn, can be used to fine-tune their marketing strategy.

The data gathered through each round of the study can be presented in a set of standardized tables for segmenting populations, monitoring trends on key population and service delivery indicators, and evaluating program effectiveness. Externally, results can be used to meet stakeholder information needs in terms of intervention performance and advocacy, as appropriate. Furthermore, the surveys can include analyses that will allow program managers to not only monitor the reach of their activities among target groups but also evaluate the correlation between changes

in SaniFOAM determinants and promoted behaviors with exposure specifically to program activities.

## 5.5. Budgeting

The cost of any sanitation marketing initiative will vary from country to country due to such factors as location of program sites and distances among them, transportation, and availability of support agencies. Traditionally, costs in African countries tend to be higher than those in South or Southeast Asia. Following are some costs to consider:

*Research costs.* Costs vary depending on sample size, geographic area to be covered, number of population segments of interest, and ease or difficulty of reaching the targets. Factors that will influence research costs include sample sizes, data-collection methods, timing, transportation costs, quality-control measures such as double data entry, the use of computer-assisted field-based data entry, and transcription when using qualitative methods. To make an informed estimate, program managers should talk with in-country colleagues to get a sense of unit costs for recent work.

*Advertising agency costs.* Your budget for communication may influence the amount and quality of attention from the ad agency. WSP has found that in some countries such as India and Indonesia, smaller agencies can be more affordable and motivated to do the work than larger multinational ones. When contracting an agency, be sure to confirm the staff that will be working on the program and require the agency to inform you of staff changes and to replace staff with professionals of equivalent experience.

*Direct Consumer Contact (DCC) event costs.* DCC events tend to be relatively expensive in terms of cost/exposure. However, these events can be powerful channels to reach remote areas underserved by mass media. DCC events provide value through their ability to involve local officials and service providers and interact with targeted communities through multiple media (audio-visual and promotional materials).

*Capacity-building firm costs.* These firms will make up a sizeable portion of any sanitation marketing budget because they provide intensive training—some centralized and

**Keep in Mind**

As a general rule of thumb, allow three to five months to procure a research, communications, or capacity-building firm.

some decentralized—requiring in-country travel. Labor and transportation costs will comprise most of the contract costs.

Based on the WSP's experience in several countries, Table 4 gives an overview of costs related to firms hired to implement a sanitation marketing initiative at scale. The numbers are illustrative to provide a sense of the resources it takes to work at scale. Working in partnership with governments and other international organizations, and tapping into the private sector's growing corporate responsibility funds are potential ways to distribute costs across various actors.

Other costs might need to be budgeted—for example, microfinance or grant support to small businesses or provided through partner organizations.

**5.6. Procurement**

Your organization will likely have its own procurement policies. Before you move forward with procurement, you should conduct preliminary research on potential firms. You might be able to speak with various organizations to get a sense of prices for labor and transportation.

**TABLE 4: RANGE OF COSTS (IN US DOLLARS, ROUNDED TO NEAREST US\$100)**

Budget Item	Tanzania (Target Audience 750,000)	Indonesia (Target Audience 1.4 million)	India (Target Audience 2.3 million)	Cambodia (Target Pop. 75,000)
Informal assessment by short-term consultant)	32 days	48 days	50 days	60 days
Formative consumer/household research (qualitative and quantitative)	\$283,200	\$101,400	\$30,400 (one state)	\$15,000
Marketing strategy development	Performed in-house by WSP	Performed in-house by WSP	\$37,000	\$22,900
Communication campaign development	\$100,000	\$97,000	\$115,500	\$7,600
Promotional items (e.g., t-shirts, posters)	\$15,700	\$20,300	N/A; done with state/district budgets	\$35,500
Radio/TV air time	\$66,800	\$103,700*	N/A; done with state/district budgets	\$1,000
Capacity building/training, including mason training, entrepreneurial skills, and advocacy/introduction of sanitation marketing to local governments	\$82,100	\$143,800	\$77,000	\$49,400
Direct consumer contact (DCC) events	\$110,200	N/A	N/A	\$86,900

\*The figure includes cost for print advertising. This media value is part of the JPIP Sanitation Award campaign targeting district executives. Only a limited time airing of radio spots and TV drama is included as it is intended for local governments to fund dissemination of communication tools.

**BOX 10: THE IMPORTANCE OF TOP-LINE RESULTS**

A common practice in market research is to request that the consultant firm present top-line results before producing a report. Top-line results are the preliminary findings that can be quickly shared through a presentation format after the initial data analysis. Top-line results present the following advantages:

- They can be available shortly after data entry and sooner than a report.
- They provide critical information that can be fed into program design or support other decisions.
- They allow the program manager to request additional analyses and guide the final report writing.
- They allow a wider team to be exposed to the findings, including implementing agencies.

Experience demonstrates that implementing at scale requires sizeable contracts for research, advertising, media placement, and capacity-building organizations. A general rule of thumb is to allow three to five months to procure a firm. This estimate includes developing a sound Terms of Reference, putting together and issuing expressions of interest, short-listing firms, issuing request for proposals (RFPs), allowing firms to develop their proposals, evaluating proposals, negotiating, and contracting. However, the actual length of time needed for procurement will depend on specific organization or donor policies.

Countries where the advertising market is more mature might have advertising agencies that specialize in mass media planning and placement. Separating the media planning and buying and having firms compete on just those components can result in cost savings. In some instances, the more experienced ad agencies might be in a neighboring country. This is the case in Tanzania, where most advertising agencies have regional hubs in Kenya and maintain a small staff in satellite offices.

Once a firm is hired, expect a ramp-up or mobilization period. An option to consider is to contract firms for one year at a time, but include a clause in the RFP that allows the award of follow-on contracts without competition if the agency's performance is satisfactory. This strategy lets you maintain consistency, with an option to procure a different firm if the firm is underperforming.

Depending on capacity or availability of consultants and other considerations, program managers can opt to divide the scope of work between two consultants. For example,

you can have an individual consultant develop the study proposal and perform the analysis and a firm carry out the fieldwork and enter the data. Request a presentation of top-line results in addition to a final report (see Box 10).

**5.7 Sequencing Activities**

Each program's marketing strategy and plan will determine the specific interventions that need to be developed. WSP's experience in the Global Scaling Up Rural Sanitation Project suggests that it will take at least 12 months to progress through the planning and procurement phase to the point of launching sanitation marketing activities. A shorter time frame might be possible if there are existing research and readily available competent firms that can help design and implement activities. However, to manage the expectations of staff, stakeholders, and donors, you should be realistic in your planning assumptions.

Table 5 shows a sample timeline of activities undertaken to reach initial implementation, based on WSP's experience. Not shown are activities related to monitoring and to strengthening the enabling environment that will sustain the sanitation marketing approach including identifying and working with a counterpart, and activities to developing the CLTS component. As such, this table reflects a project-like timeline within a larger program.

Experience shows that identifying and developing consumer-responsive products and distribution channels such as local retailers or masons might take longer than stimulating demand for sanitation facilities. WSP's experience has been that CLTS is a powerful mechanism to stop the practice of open defecation and create demand for

**TABLE 5: SAMPLE PLANNING AND DEVELOPMENT TIMELINE**

Phase	Activity	Months												
		1	2	3	4	5	6	7	8	9	10	11	12	13
Start Up	Hire key staff—marketing specialist; capacity building specialist; etc.													
	Do informal scoping of local research consultants/advertising agencies and cost estimates													
Formative	Procure research firm(s)													
Research (demand and supply)	Firm mobilizes and conducts field research													
	Data analysis and reporting													
Marketing Strategy	Develop marketing strategy and plan (1)													
	Develop business capacity development strategy (2)													
	Develop mason/business training curriculum													
	Procure firm/consultant for business development													
	Conduct orientation and mobilization for firm													
	Implement capacity building development activities													
	Procure advertising and media placement agency													
	Agency develops creative concepts, test concepts, production, launch													
	Procure DCC firm													
	Firm develops DCC event content and field test													

(1) Note this phase could take longer. If supply side research indicates that there is a lack of affordable products then more time may be needed to work with the private sector to develop an affordable product that meets the needs of the consumer and is practical for the context. For example, the Easy Latrine in Cambodia was developed because low cost existing sanitation facilities were not durable during the rainy season; therefore, the project had to inject innovation into the market. (2) Experience to date shows that rural sanitation providers are a fragmented group that would benefit from capacity building on appropriate technologies and business skills. While the supply chain research will help refine the interventions, sector knowledge can be used to initiate the process as experience shows this process takes time to develop.

sanitation facilities. In addition, the CLTS approach tends to be more widely understood by stakeholders than the concept of sanitation marketing, which under the Global Scaling Up Rural Sanitation Project has led to demand-creation activities (using CLTS) being implemented before the Four Ps of the sanitation marketing strategy are fully developed.

Common questions being raised by sector professionals are, “How should CLTS and sanitation marketing activities be sequenced?” or, “If it takes at least 12 months to get to the point of launching sanitation marketing activities, should you wait to implement CLTS activities until the sanitation marketing activities are ready?” This guide does not recommend holding back specific interventions, but WSP strongly recommends maximizing synergies between CLTS and sanitation marketing activities with communication platforms. Moreover, data from the formative research studies in Indonesia<sup>48</sup> and Tanzania<sup>49</sup> suggest that the level of satisfaction with unimproved or shared facilities is relatively low; easy access to affordable and desirable improved facilities should ideally be in place by the time CLTS occurs lest demand is created without affordable, user-responsive products and services being readily available. It is critical for the program manager to undertake

these discussions with government and support the decision-making and planning processes.

Based on our experience, we recommend to plan activities in an integrated manner from the beginning. The capacity-building plan for developing a cadre of CLTS facilitators at scale is no trivial task. You might be able to package the CLTS capacity building with the mason training in one contract. Again the point is to think of the activities as one integrated intervention in which the activities are rolled out as closely together as possible. This requires all members of the team including government partners of course<sup>50</sup> to work together from the inception to plan the activities in a joint manner even if there is different phasing. The more cohesive the planning, the easier it will be to communicate activities to stakeholders and the greater the opportunity for synergy among all components.

Factors such as baseline sanitation coverage prior to a program can influence the sequencing and even the relative weight of CLTS and sanitation marketing activities. In this area and others as noted, the sanitation marketing community of practice will have much to learn and share.

### See Online

#### Implementation

[www.wsp.org/sanmarketingtoolkit/implementation](http://www.wsp.org/sanmarketingtoolkit/implementation)



Below is a list of sample resources. Additional resources will be added on an ongoing basis.

*Terms of Reference: Consumer Research (WSP)*

*Terms of Reference: Marketing Coordinator (WSP)*

*Terms of Reference: Supply Chain Analysis (WSP)*

<sup>48</sup> See *Understanding Sanitation Habits, A Qualitative Study in East Java Indonesia*; available in the online resources.

<sup>49</sup> See *Market Research Assessment in Rural Tanzania for New Approaches to Stimulate and Scale up Sanitation Demand and Supply*; available in the online resources.

<sup>50</sup> See Section 5.2 for more information on team composition.

**By Jacqueline Devine and Craig Kullmann**

Today, 2.6 billion people live without access to improved sanitation. Of these, 75 percent live in rural communities. To address this challenge, WSP is working with governments and local private sectors to build capacity and strengthen performance monitoring, policy, financing, and other components needed to develop and institutionalize large-scale, sustainable rural sanitation programs. With a focus on building a rigorous evidence base to support replication, WSP combines Community-Led Total Sanitation, behavior change communication, and sanitation marketing to generate sanitation demand and strengthen the supply of sanitation products and services, leading to improved health for people in rural areas. For more information, please visit <http://www.wsp.org/scalingupsanitation>.

This Toolkit is one in a series of knowledge products designed to showcase findings, assessments, and lessons learned through WSP's Scaling Up Rural Sanitation program. It is conceived as a work in progress to encourage the exchange of ideas about development issues. For more information please email Jacqueline Devine at [wsp@worldbank.org](mailto:wsp@worldbank.org) or visit [www.wsp.org](http://www.wsp.org).

Much of the content is based on the work done by WSP's global rural sanitation team. Without their hard work and dedication on the ground, this publication would not have been possible. Contributions from Eduardo Perez, task team leader for WSP's Scaling Up Rural Sanitation, Yolande Coombes, senior water and sanitation specialist, and Ian Moise should also be acknowledged.

WSP wishes to thank peer reviewers from within its team, notably Malva Baskovich, Edkarl Galing, Peter Hawkins, Ari Kamasan, Nelson Medina, and Jan-Willem Rosenboom for technical inputs; and Amy Grossman and Joan Taylor for managing content development and production. WSP also thanks peer reviewers from other units of the World Bank, including Pete Kolsky and Michael Webster, and from partner organizations, including Michael Favin (The Manoff Group), Oliver Jones (The Global Sanitation Fund), Sanna-Leena Rautanen (Rural Village Water Resources Management Project), Andy Robinson (independent consultant) and Ann Thomas (UNICEF).

WSP is a multi-donor partnership created in 1978 and administered by the World Bank to support poor people in obtaining affordable, safe, and sustainable access to water and sanitation services. WSP's donors include Australia, Austria, Canada, Denmark, Finland, France, the Bill & Melinda Gates Foundation, Ireland, Luxembourg, Netherlands, Norway, Sweden, Switzerland, United Kingdom, United States, and the World Bank.

WSP reports are published to communicate the results of WSP's work to the development community. Some sources cited may be informal documents that are not readily available. The findings, interpretations, and conclusions expressed herein are entirely those of the author and should not be attributed to the World Bank or its affiliated organizations, or to members of the Board of Executive Directors of the World Bank or the governments they represent. The World Bank does not guarantee the accuracy of the data included in this work.

The material in this publication is copyrighted. Requests for permission to reproduce portions of it should be sent to [wsp@worldbank.org](mailto:wsp@worldbank.org). WSP encourages the dissemination of its work and will normally grant permission promptly. For more information, please visit [www.wsp.org](http://www.wsp.org).

© 2012 Water and Sanitation Program



The Water and Sanitation Program is a multi-donor partnership administered by the World Bank to support poor people in obtaining affordable, safe, and sustainable access to water and sanitation services.

