

PhATS Technical Note



Demand
Creation in
Communities
June 2015



PhATS DEMAND CREATION IN COMMUNITIES

TECHNIQUES IN PhATS DEMAND CREATION APPROACHES: Experience from the field

Across Typhoon Yolanda-affected areas, the Philippines Department of Health (DoH) and Department of Education (DepEd), the League of Mayors and 46 LGUs are working in tandem with UNICEF and its 12 implementing NGO (Non-Governmental Organization) partners to improve access to and use of sustainable sanitation through a strategy called the Philippines Approach to Total Sanitation (PhATS). This approach was produced as the recovery and development strategy for promoting universal access to improved sanitation and hygiene behavior with the entry point of ending the practice of open defecation by facilitating changes in social norms and building resilience.

The 2011, a WaSH Situation Analysis conducted by UNICEF identified three bottleneck areas impeding progress on improving access to WaSH in low-income and marginalized areas in the Philippines, one of which was poor hygiene practices and low demand for WaSH services and products. To overcome this hurdle, PhATS implementing partners, led by the DoH, are using behavior change communication, social mobilization, social change and advocacy methods to create demand for sanitation products, behaviors and services. PhATS goes beyond construction of new toilets by focusing on changing social practices relating to open defecation and creating a supportive enabling environment to promote appropriate WaSH practices for the prevention of water-borne diseases and other public health risks.



PhATS DEMAND CREATION PROCESS



PRE-TRIGGERING

TRIGGERING

POST-TRIGGERING

SELF DECLARATION

MUNICIPAL VERIFICATION

Demand Creation is more extensive than household-level behavior change communication; it aims to strengthen a community's ability to: 1) identify risks to their well-being; 2) address basic needs through collective action; 3) make their needs known to decision and policy-makers.

Low demand for household sanitation and hygiene is a central constraint to service improvement, with most households unaware of the true costs of inadequate sanitation and hygiene and, therefore, exhibiting other spending priorities. For similar reasons, not many communities give priority to collective sanitation and hygiene improvement, with few of those using improved sanitation facilities realizing that their families are affected by the inadequate sanitation of their neighbours.

In line with a socio-ecologic model of change, PhATS Demand Creation, embedded in a holistic program approach, encourages the implementation of a range of different and complementary methodologies to sanitation and hygiene demand creation at community and household levels:

PARTICIPATORY DEMAND CREATION

BASIC SANITATION, HYGIENE AND SAFE WATER IN COMMUNITIES

Conduct participatory demand creation campaigns resulting in Community Action Plans incl. community based multi hazard based disaster risk WASH plan and regular event simulations.

Conduct mass media, community, religious and political leaders led campaigns

Develop locally customized communication materials on key messages

Provide collective incentives/rewards (infrastructure), also to stimulate WASH resilience innovation, recovery, mitigation, preparedness planning



CONTEXT, BEHAVIORAL AND SOCIAL ANALYSIS TO IDENTIFY THE BOTTLENECKS AND DRIVERS TOWARDS COLLECTIVE SANITATION OUTCOMES



PARTICIPATORY DEMAND CREATION CAMPAIGNS DESIGNED TO TRIGGER RAPID BEHAVIOR CHANGE, ENCOURAGE POSITIVE AND SUSTAINABLE ACTIONS TO IMPROVE HOUSEHOLD SANITATION, AND PLAN TOWARDS COLLECTIVE SANITATION OUTCOMES SUCH AS ZERO OPEN DEFECATION (ZOD) BARANGAYS;

MASS MEDIA CAMPAIGNS;



CUSTOMIZED BEHAVIOR CHANGE COMMUNICATIONS; LOCAL CAMPAIGNS INVOLVING POLITICAL, RELIGIOUS AND COMMUNITY LEADERS; AND



ORGANIZING AND MOBILIZING COMMUNITIES TO CREATE AVENUES FOR DIALOGUE WITH DUTY BEARERS TO ACHIEVE CONSENSUS ON ACTION PLANS AND COORDINATED ACTION TO ENFORCE AND MONITOR PROGRESS AGAINST THOSE PLANS



COLLECTIVE INCENTIVES AND REWARDS DESIGNED TO ENCOURAGE BEHAVIOR CHANGE, SUSTAINABILITY AND RESILIENCY.

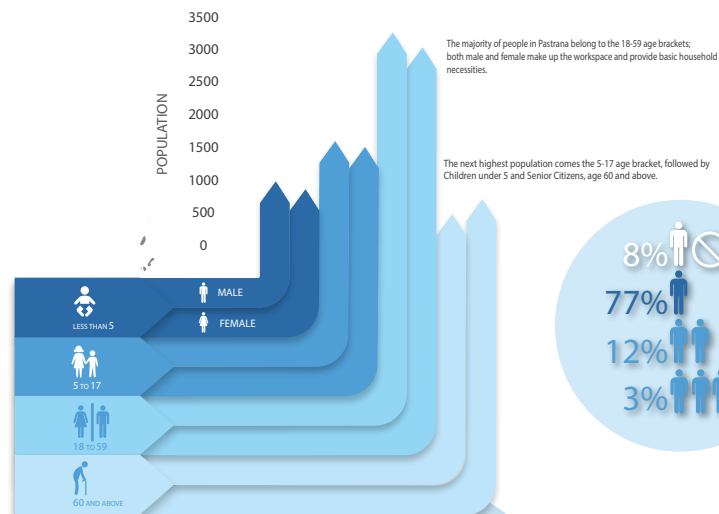
Within PhATS, Demand Creation is divided into three main phases: pre-triggering, triggering and post-triggering aiming at identifying expectations, fostering accountability of Barangays through participative development of action plans and discussion of sustainability, resulting in community members recognizing the need to change hygiene and sanitation behaviors, particularly in regards to the cessation of open defecation (OD). Once the community is open defecation free, it will first self-declare Zero Open Defecation (ZOD) status, followed by municipal verification by the municipal Sanitary Inspector (SI) and PHO representative, with the end result of being awarded ZOD certification. Following agreed official monitoring procedure, the SI will follow up on status of ZOD and report back to assure sustainability of results.

PRE-TRIGGERING

The primary goal of pre-triggering is to prepare all partners involved for the Demand Creation activities to follow. During pre-triggering, partners will typically hold a small meeting including all leaders from the Barangay and, if available, relevant members of the Local Governing Unit (LGU), such as the Sanitary Inspector (SI). Often other local leaders from churches or schools are included as well. The pre-triggering meeting is an opportunity to gather updated information from Barangay officials on the sanitary status of the community. Relevant information includes the number of households with latrines, the number of households practicing open defecation and any ordinances in place that prohibit open defecation. This updated information is compared with the results of the comprehensive Barangay WASH inventory and PhATS pre-KAP (Knowledge Attitude Practice) baseline results previously gathered. This also includes information on diseases prevalent in the Barangay and the daily hygiene routine of families and

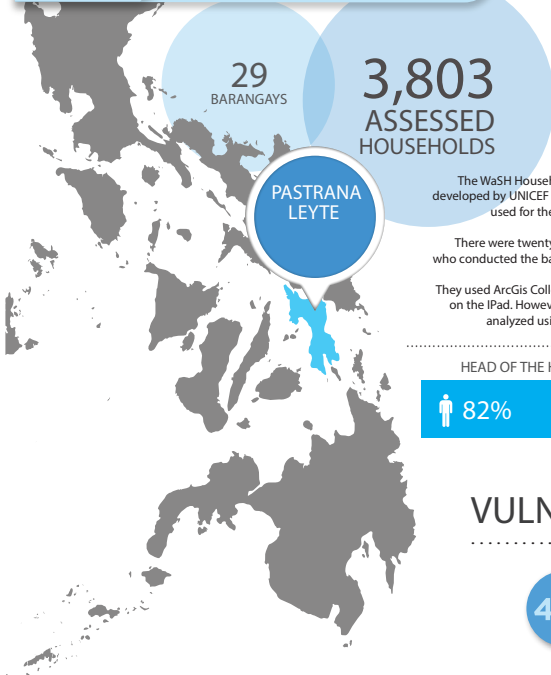
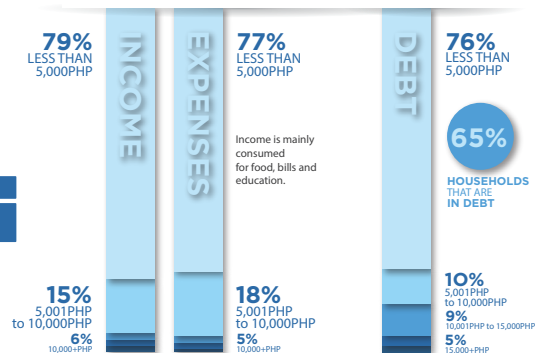
individuals. By developing a holistic understanding of the Barangay's current status, all partners can tailor their triggering approach to meet the needs of each Barangay.

A diverse variety of tools and activities are used in the Yolanda affected areas to encourage Demand Creation. Though not implemented by all partners in all Barangays, each tool on the "menu" can play a significant role in improving sanitation in a community. Each Barangay is different, and each implementing partner has its own strength and capacity. While PhATS Demand Creation provides a unifying strategy to achieve ZOD, not all tools need to be applied in the same way in each Barangay. This allows for flexibility and innovation based on the needs of target community. The road to ZOD is clear but broad, allowing each partner ample space to find their own path to achieve the goal.

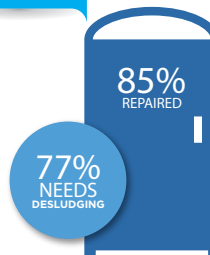


PHATS INVENTORY ANALYSIS & HOUSEHOLD SURVEY PASTRANA, LEYTE

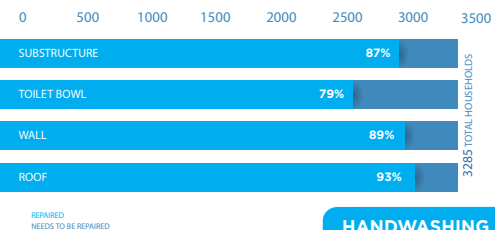
FAMILY INCOME



LATRINES



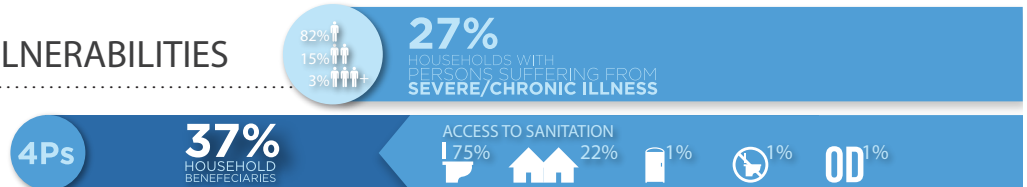
SANITATION



HANDWASHING FACILITIES



VULNERABILITIES



PhATS Technical Note

June 2015



Courtesy Call with the Mayor, Municipal Health Officer, and Sanitary Inspector

The Mayor was informed about Demand Creation Triggering activities and SP's intent to subsidize all households with septic tank. At the meeting, SP was invited to meet with the ABC.

AUGUST 12



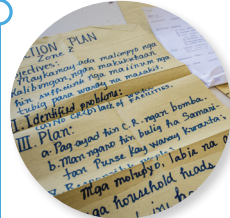
Meeting with the Association of Barangay Captains

Introduction of Demand Creation Triggering activities and SP's intent to subsidize all households with septic tank.

SEPTEMBER 3

Post-triggering

Hygiene promotion
Barangay will present their Action Plan to SP & have discussion of Overview of ZOD: a challenge is issued to the barangay ("none in Pastrana - maybe you'll be the first!")



SEPTEMBER 20

Facilitation of the Barangay Self Declaration

SP will come collect the Barangay Request for Verification Form to submit to the SI

Some (80%) weren't ready on initial visit, but were before their next Barangay Session; Half of those were ready upon the 2nd visit; After 3 visits, SP informed the SI who would then follow up through Barangay Health Workers

"Constant visit is very important!"

OCTOBER 10

Letter of Request for Verification Team Formation

Sent to the Mayor, requesting that the team include:
Municipal Health Officer
Sanitary Inspector
1-2 independent verifiers (NGO reps)

AUG 2014

SEP 2014

OCT 2014

Letter sent to Barangays for Pre-Triggering Activity

AUGUST 21 - 22

August 21, 2014
The Barangay Captain
Jones, Feitiana
Leyte
Dear Sir/Ma'am,
Greetings in Jesus Name!
Samaritan's Purse International Relief is a nondenominational evangelical Christian organization providing spiritual and physical aid to hurting people around the world. Our goal is to save lives, reduce suffering, and share the hope of Jesus Christ.
Our organization focuses on the importance of sanitation to raise awareness to those people who don't have access to toilets and proper sanitation. Until today, billions of people were practicing open defecation and lacked access to improved sanitation, almost all in developing countries and predominantly in rural environments. Philippines is one of the affected countries, especially in Leyte province.
In this connection, we would like to inform you that we will visit your barangay this coming Tuesday, August 26, 2014 at any time of the day. We just want to talk with any of your officials so that we will know the hygiene and sanitation situation of your barangay.
We are looking forward to see you.
Thank you so much for your cooperation!

Gathered data where possible on the barangay sanitation situation
Scheduled triggering event

Pre-triggering

AUGUST 26

the first ZOD

Mapping Transect walk
Children's Triggering

SEPTEMBER 5

House to House follow-up

Conducted by Barangay Health Workers and Natural Leaders using the G1 form

SP endorses all data gathered in the house-to-house follow up (about 10% of Barangays are still OD)

SP points out OD households and asks for action from the Council

SP introduces the Barangay Request for Verification Form
PhATS Orientation for Brgy Officials and Natural Leaders

SEPTEMBER 9



EXAMPLE:

Zone 7 has an OD household; SP asks the attention of Barangay Councilor assigned to that zone. After the meeting, Barangay Health Workers and Barangay officials will visit the OD offenders to confront the household and ask them to change their behavior.



PASS Declaration on that day (ZOD)



FAIL Barangay Health Workers or officials go back to OD households

Verification team returns again (only 2 failed second visit)

SP schedules Verification and informs the Municipal Health Office of the ap

Verification

OCTOBER 16

SP schedules Verification and informs the Municipal Health Office of the

BUILDING RAPPORT WITH BARANGAY OFFICIALS

The pre-triggering meeting is also a time to cultivate relationships with Barangay leaders prior to triggering. Many implementing organizations use this meeting to build rapport with the leaders and make them feel comfortable with the facilitators if the facilitation is done by the implementing partner. Often, facilitation is conducted by the Sanitary Inspector or Barangay Health Worker, based on a training provided by UNICEF and the Implementing Partner. Because the Barangay leaders play a large role in encouraging the community members to pursue ZOD, it is critical to gain support early in the process.

SUPPLEMENTARY TECHNIQUE: CLIMATE SETTING

To help create a comfortable space, ACTED intentionally avoids bringing paper and pens into the pre-triggering meeting. ACTED believes that taking notes may make the Barangay officials feel uncomfortable or as if they are being studied. To avoid this, facilitators focus on relationship-building conversations with the Barangay officials and memorize key facts that the officials share.

Save the Children (STC) shares information to help Barangay leaders understand and value the Demand Creation process fully. STC contacts the Barangay health center or Barangay midwife before the pre-triggering meeting to

Request for Verification and Certification of Zero Open Defecation (ZOD) Status

To: _____
Municipal/City Verification Team

By/City of: _____ Province of: _____

Address: _____

Barangay: _____

Households: _____

Households using toilets as of _____ (date): _____

Individual toilet facility: _____ (%)

Shared toilet facility (owned by one household but used by multiple households up to a maximum of 20 people in situations dictated by emergency and up to 10 people otherwise): _____ (%)

Community toilet facility (facility built for public use, owned by the community but not any specific household): _____ (%)

How long has this been the case? _____ years.

Very much. _____ years.

Over printed name _____
Chairman/Captain



JANUARY 27

Pastrana becomes the First ZOD Municipality in the Philippines
Barangay Capilla is the last Pastrana Barangay to be declared ZOD

NOV 2014

DEC 2014

JAN 2015

FEB 2015

As part of a reward for reaching G-1, SP facilitates a Barangay-wide celebration: dancing, games, prizes, the awarding of certificates, a ZOD Flag to be displayed at the entrances to the Barangay, and two SP trashcans to encourage proper disposal of solid waste are given.



First ZOD Certification Celebration

NOVEMBER 24



SUPPLEMENTARY TECHNIQUE: MANAGING EXPECTATIONS

Another important activity that is intentionally focused on during the pre-triggering meeting is managing the expectations of the Barangay leaders and implementing partners. Several implementing partner organizations were confronted with the expectation that the PhATS program would come with 100% subsidy or donation following triggering for all households without a toilet. The Barangay members expressed disappointment when they learned that only approximately 10% of the poorest households would receive subsidies in the form of vouchers, material to build a toilet or a rebate to help build their latrines. To correct this misconception, the facilitators explain the approach to be used in detail emphasizing that their efforts center on software, such as behavior change activities and improvement of planning skills, rather than provision of hardware.

In addition to clarifying the end result of the program, some organizations also prepare the Barangay for the difficult emotions they may encounter during the triggering event, such as shock, disgust, shame and fear.

collect updated morbidity and mortality data on the Barangay. Their experience shows that Filipinos are particularly receptive to health information as compared to people groups from other Asian cultures. STC believes that sharing morbidity and mortality rates - especially focusing on water-borne diseases - has increased receptivity of Barangay councils and heightened their interest in solutions to improve health, which supports their ownership and increases engagement within the program.

SUPPLEMENTARY TECHNIQUE: MANAGING EXPECTATIONS



In May 2014, a Barangay in Leyte was triggered by the Samaritan's Purse International Relief (SP) team following the decision to include Demand Creation as early as possible in any humanitarian response activity. All UNICEF partners operating under humanitarian response, as well as other WASH Cluster partners, were trained in a reduced Demand Creation Techniques to at least facilitate the beginning of a social change process right after the emergency occurred. However, after the triggering process was implemented in one community, the Barangay captain felt humiliated and disrespected. He refused to cooperate with SP following Demand Creation. Later in the year, SP returned to the Barangay multiple times to explain the PhATS model, which was then fully developed and agreed upon by all WaSH Cluster partners, and apologized for not explaining the method in more detail at the start of implementation. After further dialogue, the Barangay captain eventually gained a better understanding of the purpose of triggering and even self-declared ZOD status for his Barangay.

Recognizing the importance of cooperation by community leaders for successful Demand Creation, SP has since aimed to be open with the Barangay captains and triggering participants about some of the challenging and possibly uncomfortable revelations that may come to light as a result of the Demand Creation process. Without sharing specific details of triggering activities, SP practitioners explain to the Barangay leaders that some activities may be uncomfortable and offensive for participants. However, the practitioners assure Barangay leaders that full-disclosure of the entire process and the reasoning behind the process will be clarified at the conclusion of the triggering event.

WEALTH RANKING

Some organizations use the pre-triggering meeting to collect information on Barangay economic status and household ranking. Households are "ranked" in order of declared income and possessions as well as family composition; this ranking is used as a diagnostic tool and can provide helpful information to identify the most vulnerable households in the community. The 4Ps beneficiaries often (but not always) rank among the poorest households. Many organizations use this type of ranking activity to determine which households to subsidize and how much subsidy to provide them.

TECHNIQUE: WEALTH RANKING

Save the Children (STC) has found that using systematic markers to identify the most vulnerable households can lead to inaccurate information. For example, lactating mothers or households with over seven children are often labeled as vulnerable groups; however, these groups may actually have higher levels of income or access to resources than other households due to comprehensive support by Government or other NGOs. Because the marker for "most vulnerable" households can shift between Barangays, STC uses the pre-triggering meeting to ask the Barangay council members to define the terms "poor" and "very poor" specific to their Barangay and to give a description of these two groups including average income, access to resources, and of income. STC has found that this personalized definition for poor and very poor is more effective at identifying the most vulnerable households than a uniform designation.



SCHEDULING THE TRIGGERING EVENT

One of the most important agreements to be reached during the pre-triggering meeting is commitment to a schedule to meet with the entire Barangay for the triggering event. All members of the community, including children, are invited and encouraged to attend; however, only one person per household is required to attend the triggering. It is important that also those Households which already have access to (but might not use) a toilet attend the triggering meeting.

TRIGGERING

Triggering aims at facilitating community self-analysis and realization of the need to change their current behaviors of practicing Open Defecation. It is the crux of Demand Creation. During the triggering meeting, partners use a series of tools that incite feelings of shame, fear, and disgust to help community members realize the importance of eliminating open defecation. Rather than using soft terms for feces, such as poop, that mask the vulgarity of the substance, PhATS encourages facilitators to use the crudest word for feces, such as "shit" or the Tagalog "tae," to elicit feelings of disgust and shame. The specific tools used in triggering may vary depending on the implementing partner or Barangay involved.

TRIGGERING TECHNIQUE:

Oxfam adapts their triggering tools selecting from the tool box provided and generally trained for in facilitation, depending on the needs of the particular Barangay. Before triggering, Oxfam facilitators meet with the SI to review information gathered during a pre-triggering meeting and jointly decide which tools or activities would be best suited for the Barangay.



TRIGGERING TOOLS

Based on the PhATS Demand Creation facilitators training provided to each of the implementing partners and LGU Sanitary Inspectors, often including Barangay Health Workers of all 46 LGUs, a set of facilitation tools is available based on Barangay- specific needs and in agreement between LGU and implementing partners. Usually, all tools are to be used as they complement each other.



ABOVE: Community members participate in Barangay mapping: each family assigns a location to their home and to the places commonly used for Open Defecation.

TRIGGERING TOOL: COMMUNITY MAPPING

OBJECTIVE: Learn what the community looks like, the areas of importance for them, identify open defecation areas and facilitate realization of the relationship between their living environment and their defecation practices.

Encouraged by the triggering facilitators, Barangay members will draw a map of their community either on paper, in chalk, or in the dirt so it can be seen by most participants. Participants start with roads and fill in important landmarks including bodies of water, schools, places of worship and finally, homes. Community members then identify which houses have toilets. Finally, Barangay members, using sawdust or dirt, mark where open defecation typically takes places and the houses that do not have a toilet. Once finished, everyone can see the spread of feces across the map, including areas near homes, landmarks and bodies of water.



© Samaritan's Purse | Kristine Wogter

ABOVE: A barangay in Pastrana, Leyte follows PhATS facilitators on a Transect Walk, looking for evidence of open defecation.

TRIGGERING TOOL: TRANSECT WALK

OBJECTIVE: Observe and pause to elicit shame, fear and disgust at having tae in the open within the community

The facilitators join the Barangay members on a walk through their community. Once they come across areas with open defecation, facilitators stop and point out the feces. They take time to ask questions about whose feces it is and why they chose to defecate there. Usually, participants start smelling the feces and become embarrassed, which is one desired outcome of the transect walk.

TRIGGERING TOOL: TAE WITH FOOD AND TAE WITH WATER: FOOD AND SHIT DEMONSTRATION

OBJECTIVE: Demonstrate transmission of tae to food and water.

Facilitators place a plate of food near tae to show participants how flies travel between the two. Once the flies have moved between the food and tae, the facilitators ask if anyone wants to have some of the food. The participants, disgusted, naturally refuse. Community members understand that this happens whenever feces are left exposed in the environment.

Facilitators often place a strand of hair on tae and then mix that strand of hair in a glass of water. Again, the facilitator offers the drink to the community members, emphasizing that the water is still clear and looks perfectly clean. When the Barangay members refuse, the facilitators explain that flies have six legs that can pick up feces just like a strand of hair. When the flies land on food or water, they can transmit bacteria even if it cannot be seen.

TECHNIQUE: TAE WITH FOOD AND TAE WITH WATER

Tae is an integral part of the triggering process. Several steps require a physical specimen of fecal matter for demonstration purposes. Sometimes, facilitators are unable to find signs of open defecation, which can make the Transect Walk and Tae with Food and Water activities difficult to implement. To address this challenge, STC creates artificial feces to simulate open defecation. Using rice powder as a base, turmeric or curry powder for coloring, and dried fish to attract flies, STC fashions the mixture into a feces shape. Though the fecal matter is artificial, STC has found that it still prompts feelings of disgust and fear and can lead to beneficial discussion. STC will use the artificial feces as a substitute for all tae-required triggering tools.



TRIGGERING TOOL: SHIT CALCULATIONS

OBJECTIVE: Calculate the volume of tae left in the open by the community

There are two calculation activities that are performed as part of the triggering event. First, with the Barangay's input, facilitators calculate the amount of tae generated by the community. Starting with the number of grams of tae produced per person each day, they calculate an estimated weight, measured in tons, of tae produced across the entire Barangay in one year.

TRIGGERING TOOL: MEDICAL COST CALCULATION

OBJECTIVE: Calculate the financial costs incurred because of having tae left in the open.

The second calculation activity compares the cost of building a latrine with the cost of getting sick from a fecal-oral disease due to open defecation. Considering physician, medication, transportation, time away from work and hospital costs, the facilitators reveal that building a latrine is more affordable than getting sick from exposure to fecal matter.

TRIGGERING TOOL: DAILY INCOME VERSUS DAILY EXPENSES

OBJECTIVE: Compare the daily income and expenses vis-à-vis additional expense if a household member gets sick

Triggering facilitators determine the primary source of income/ livelihood of the community. They help participants calculate average daily, monthly, and annual income per household, and compare those numbers to the stated primary/daily needs and expenses of the household. Facilitators instruct participants to subtract the total daily expenses from the total income, and to determine if the remaining sum is adequate to cover the cost of medical treatment calculated in the previous activity. Community members are then challenged to compare the cost of medical expenses caused by lack of improved sanitation, to that of building a simple toilet. Targeted beneficiaries usually realize that proper sanitation and hygiene is much less expensive compared to health cost.

TRIGGERING TOOL: EGG DEMONSTRATION

OBJECTIVE: Show the transmission of dirt from hand to food and how hands that look clean can still be dirty

During this activity, facilitators ask participants if they would like a snack. To those who answer affirmatively, hard-boiled eggs (or any other white-colored food commonly eaten, such as singkamas) are dispersed. The audience is asked to peel the eggs and share with others. Recipients of the eggs are asked to observe the food given to them, and describe what they see on the egg. Many times, dirt has been transferred from one hand to another, and is visible on the egg. This serves as an illustration of the importance of handwashing with soap even when hands look clean.

TRIGGERING TOOL: SHIT AND SHAKE

OBJECTIVE: Show the transmission of tae from person to person.

Using this tool, a facilitating team rubs colored powder or other materials (e.g. charcoal, wet mud, colored chalk, etc.) on their hands. Without calling attention to or explaining the activity, facilitators will then shake the hands of participants, transferring the colored substance to the next person's hand.

Community members slowly start to notice that their hands are dirty, at which time PhATS facilitators explain the symbolism of the colored substance as tae, and the easy of transference to someone else's hands. In this activity, the community realizes the importance of handwashing with soap after using the toilet.



TRIGGERING TOOL: CHILDREN'S TRIGGERING

OBJECTIVE: Facilitate the children's realization to change their sanitation behavior; enable children to become advocates/agents of change of proper sanitation norms and practices.

Recognizing that children can have a significant effect on their parents and the larger community, several partner organizations dedicate one or two facilitators to lead separate triggering events for children. The children's triggering events often include songs, games and a presentation to the community. Under PhATS, the specific triggering of children in the community is complemented by activities in schools, led by the Department of Education (DepEd) and implemented in addition to reconstruction of Latrines, Group Handwashing Facilities and Water Supply improvement.

TRIGGERING TOOL: CHILDREN'S TRIGGERING SESSIONS

In their separate Demand Creation events for children, Relief International (RI) seeks to help children understand the dangers of open defecation. First, RI makes the children feel comfortable by singing songs and leading ice breaker games. Next, to mimic transmission of germs, the practitioners put dirt on the children's hands and have them play a common Filipino hand game called Ate Kuya (Sister, Brother). When the children play the game, they do not want to touch each other's hands. The facilitators use this natural aversion to demonstrate how germs can be passed from one person to another and to emphasize the importance of hand washing with soap, especially following latrine use.

Samaritan's Purse (SP) also conducts a specific triggering event for the children, although their strategy is to mimic the adult triggering steps: children participate in community mapping and transect walk. SP found that children are less ashamed and more willing to directly reveal the community's areas of high open defecation. After this exercise, the children are asked a series of questions; their most common responses are recorded below.

RI and SP both reported teaching a song for children to perform for the triggered Barangay at the conclusion of the Barangay triggering event. SP uses the song "Yesterday's Dream" to illustrate the effects of open defecation on community health and well-being (lyrics below).



Why would you decide to stop open defecation?

*"Mother, father, I don't want to be sick anymore."
(Nanay, Tatay ayoko ng magkasakit.)*

What can you contribute to changing the sanitation situation?

*"I will help in cleaning our toilet."
(Tutulong ako sa paglinis ng aming palikuran.)*

What do you want for your future?

*"I want to have a brighter future."
(Gusto kong magkaroon ng mabuting kinabukasan.)*

As a child, what is your right in terms of hygiene and sanitation?

*"I have the right to a clean & healthy community."
(Karapatan ko ang magkaroon ng malinis at malusog na pamayanan.)*

YESTERDAY'S DREAM:

*We are the children of yesterday's dream
We are the promise of the future we bring
Waving the banners of love to all
To every nation, the rich and the poor*

*We are the world of the restless and young
And we need a hand to guide us
Helping each other build each other
As long as we're together you and me*

*For together we stand, divided we fall
Together we climb to the top of the world
We can be what we want for the world to see
We are the children of yesterday's dream
We have the yearning to do what is best
Be someone special from all the rest
Nation and brothers in unity
Building tomorrow for you and for me*



© Samaritan's Purse | Kristine Wogter

CASE STUDY: CHILDREN'S TRIGGERING SESSION

SP Lead Hygiene Promoter, Glaiza Calero, shares her experience at one memorable children's triggering event in Barangay Pago, Tanauan, Leyte where this song was performed:

"The best triggering activity that we had was because of the reaction of the mothers after the presentation of the kids. Those mothers were really crying because they are so much carried away by the action song performed by the kids. They consider the song to be heart-warming, thought-provoking, and worth reflecting upon....One mother told us that when she witnessed the kids' presentation, she was reminded that her children are meant for greater things. The Barangay captain had tears in his eyes when he delivered his inspirational message for the community after the event."

FOLLOW UP: INTRODUCING THE COMMUNITY ACTION PLAN

OBJECTIVE: Formulate an Action Plan with the participation of the community and local leaders.

Once the Barangay begins to realize their need to eliminate open defecation, a critical step in the triggering process is developing a Community Action Plan. During the triggering session, the facilitators introduce the action plan format and describe how it should be implemented. The Barangay is then asked to develop their action plan before the follow-up post-triggering meeting. This plan walks through the concrete steps the Barangay would take to achieve ZOD status and consists of the following: objective; identified problems; solutions; responsible persons; and time frame. Action Plans copies are collected and kept in order to use as an accountability measure in future visits to the Barangay by the community as well as the implementing partner.

COMPONENTS OF A GOOD ACTION PLAN

1
2
3
4

REFERS TO THE **BASELINE DATA** (FROM PRE-TRIGGERING)

HAS A **SMART** OBJECTIVE (SPECIFIC, MEASURABLE, APPROPRIATE, REALISTIC & TIME-BASED)

HAS CLEARLY ARTICULATED **ACTIVITIES**

WRITTEN WITH A **REALISTIC** TIME FRAME IN MIND (TARGET DATE FOR ZOD)

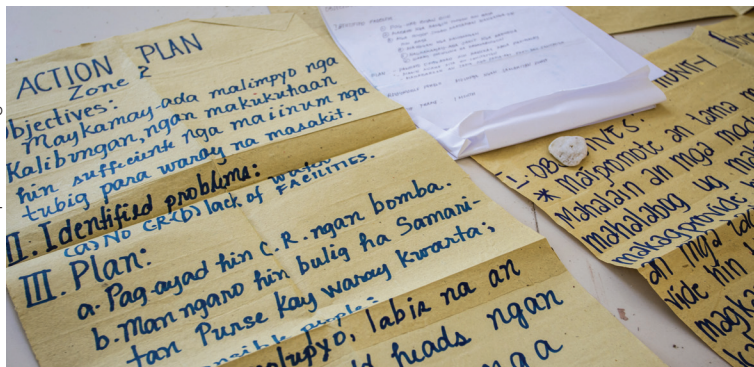
5
6
7
8

HAS OUTLINED **FEASIBLE** AND **ACHIEVABLE** TARGETS

AVAILABLE **RESOURCES** ARE IDENTIFIED

INCLUDES A **MONITORING** AND **REPORTING** STRATEGY

PEOPLE RESPONSIBLE ARE CLEARLY SPECIFIED



ABOVE: Samaritan's Purse catalogues all Community Action Plans and files them for future use and to honor the commitment made by over 100 communities.



ABOVE: Members of a triggered community come together after making their Action Plan to take a "Changed Barangay Photo."

POST TRIGGERING

Following Demand Creation, facilitators hold a post-triggering event for the entire Barangay. This event is generally used to review and further develop the Community Action Plan. During this event, practitioners often identify and offer any additional

support needed by the Barangay. This support may involve technical assistance in latrine construction or organizational assistance in designing accountability methods, including hygiene promotion and subsidy distribution.

SUPPLEMENTAL TECHNIQUE: HYGIENE PROMOTION

Several organizations have developed hygiene promotion programs that educate participants on key hygiene behaviors and encourage them to adopt these behaviors. Realizing that community members are most excited and interested in changing behaviors following the triggering event, a hygiene promotion workshop is conducted as part of the post-triggering phase.

To launch the post-triggering meeting, SP leads an energetic and entertaining hygiene workshop. This event was originally developed



CASE STUDY: HYGIENE PROMOTION

In January 2014 by nurses and teachers from SP as a stand-alone program to encourage proper hygiene behaviors following Typhoon Yolanda. The workshop has since been adapted to the PhATS Demand Creation context. Relying heavily on audience participation, the workshop incorporates lessons on water, sanitation, environment, personal hygiene and most importantly, hand washing with soap. In order to

affect behavior change, the event departs from traditional lecture format: key hygiene messages are presented through adaptations of popular songs, dances and games. SP's creative team has choreographed three participative dances and four songs with original hygiene lyrics, like the one below:

*Come on let's listen to the hot issues
You need to know about the hot issues
So you can take control...
So come on let's listen to the hot issues!*



*Clean and neat body for us to be healthy
With soap let's wash our hands, do it daily
Our surroundings let us all make it tidy
Potable water let us boil it properly!*

*Long and dirty nails should be trimmed weekly
Let us make it sure that we brush our teeth daily
Toilets and latrines should all be sanitary
Potable water, it should be stored safely!*

(TAGALOG)

*Halina't pakinggan nyo ang hot issues!
Dapat nyong malaman ang mga hot issues
So you can take control...
Kaya dapat nyong malaman ang hot issues!*



*Linis ng katawan para sa kalusugan
Ang mga kamay dapat nating hugasan
Kapaligiran dapat nating linisan
Tubig na inumin dapat nang pakulu-an!*

*Mahaba na kuko ay dapat nag putulin
Magsipilyo na sa ating mga ngipin
Ang palikuran dapat nating linisan
Tubig na inumin may malinis na sisidlan!*

POST TRIGGERING TOOL: SUPPORT TO (NATURAL) LEADERS

OBJECTIVE: Celebrate the achievement of ZOD status and cement the Barangay's commitment to sustaining ZOD status; stimulate the desire of neighboring villages to become ZOD.

Facilitators meet the natural leaders and review monitoring data against the Community Action Plan. Monitoring data are being gathered, and the facilitators review the progress. PhATS facilitators then ask diagnostic questions to determine progress status of the Barangay and areas where they can support the natural leaders. Challenges to ZOD declaration and certification are uncovered and further action steps are determined to overcome them. Some commonly reported challenges are: geographic location (i.e. high water table, soil type); far-flung sitios/households; no low-cost technical designs are available; inadequate community-level monitoring; lack of awareness of the processes for self-declaration

POST TRIGGERING TOOL: SUPPORT TO (NATURAL) LEADERS



Some communities were unreceptive or unmotivated to change following the triggering event. Rather than returning to the community for a post-triggering event, Oxfam facilitators, in partnership with the rural SI, focus on changing the viewpoint of Barangay Council Members; these individuals often hold the power to develop and enforce ordinances which can shape sanitation behavior. During the meeting facilitators ask questions and use basic triggering tools to prompt feelings of shame, fear, and disgust. The SI also motivates officials to take a strong stance against open defecation by sharing the municipality's commitment to improving sanitation. Once the Barangay Council is triggered and realizes their community's need for a change, Oxfam explains how the community can advance on the sanitation ladder from open defecation to ZOD status, to Sustainable Sanitation, where each household has their own latrine. Together, the SI and Oxfam facilitators help the Barangay Council develop concrete action steps to achieve their new goals.

POST-TRIGGERING TOOL: FOLLOW-UP ASSESSMENTS

Once the Barangay has self-declared ZOD status, a door-to-door assessment is launched using the same survey tools that the SI uses to verify ZOD status. This serves both as a system for internal verification and a simulation to prepare Barangays for municipal verification. Though the Barangays have already self-declared ZOD status, the survey reassures the community that no community member is practicing open defecation, or alerts them to the presence of backsliders if relevant. This is valuable information for Barangay officials as it focuses their attention on the overlooked households prior to official verification.

VERIFICATION FOR G1, CELEBRATION & CERTIFICATION

As part of the post-triggering phase, both SP and ACTED perform an internal verification. In one notable example, SP's follow-up survey in Barangay Kiling, Tanauan, identified one household still openly defecating. The homeowner was an elderly disabled man who was unable to travel or build his own latrine. Once presented with this information, the Barangay mobilized to come together in the Filipino spirit of *Bayanihan*, or community volunteerism, and build the latrine for this man.



IS THERE ANY DIFFERENCE BETWEEN CLTS AND PHATS?

	COMMUNITY LED TOTAL SANITATION	PHILIPPINES APPROACH TO TOTAL SANITATION
<p>ANTONIO P. OROZCO WaSH Officer, Oxfam</p>	<p>"The approach is different. In CLTS, the way you deliver the question is a bit rude, and of course, there's a big possibility that the people may get offended."</p>	<p>"In PhATS, you just facilitate the community to elicit their fear, disgust and shame... on their own. With the three components being together, PHATS is the whole big picture."</p>
<p>RICHARD G. YAUNA Brgy. Kagawad BHW, 7 years Brgy. Pagnamitan, Guiuan Eastern Samar</p>	<p>"CLTS, after the triggering, then it is done. The whole community was triggered but that stopped there."</p>	<p>"In PhATS, we are guided. We know the steps. The good thing is -- it is slowly done to ensure the sustainability of the program. Before, the people approached me as I was the Committee Chair on Health, asking for this and that. Now, people are coming to me and asking what they can contribute. "</p>
<p>HON. ENRIQUE A. CABOS Mayor, Municipality of Mercedes Eastern Samar</p>	<p>"Even before, my advocacy has always been health and education. CLTS was quite good because we were even qualified to compete on the Provincial and Regional DOH National Search for Barangay with Best Sanitation Practice in 2013, which we attained even without the support of external entities. Unfortunately, Typhoon Yolanda came and we had to start again from the beginning."</p>	<p>"PhATS has given me an idea on how to strategize the plan. The interventions of the three components are essential to the sustainability of the program. Today, we have this regular schedule on monitoring the WaSH in School every last Wednesday of the month. We also have WaSH facilities to support it. I believe that change should start from the inside: the internalization that you need to be clean in order to be happy."</p>
<p>WANDA LYNNE CABALTERA HPO</p> <p>BEVERLY ANN KALINGAG MEO</p>	<p>"With CLTS, there is no subsidy. And it's harder. As a Yolanda survivor, you don't have the money, you are nothing. It's quite a big challenge as you also need to finish the tools. The momentum they were triggered with is slowly fading. If there are special challenges like a small number of OD households, you still need to finish the tool. Which makes it heavier."</p>	<p>"With PhATS, it's faster, especially if there is decision matrix, particularly with special challenges. You are guided of what you need to do. And of course, it has the subsidy that can be used as a reward for the community effort."</p>
<p>IMELDA B. EUSEBIO Rural Sanitary Inspector Municipality of Dagami, Leyte</p>	<p>"Yes, they have toilet bowls made of marble, but if they don't know how to use them, what will happened?"</p>	<p>"The program is really good because they focused first with behavioral change. There was a similar program like this on 2007, but it's only now they make it clear."</p>



FOR MORE INFORMATION:
VISIT OUR WEBSITE: WWW.UNICEF.ORG

OR CONTACT:
SIMONE KLAWITTER, PHD
WASH TEAM LEADER YOLANDA RESPONSE
SKLAWITTER@UNICEF.ORG

KRISTINE WAGER
KNOWLEDGE MANAGEMENT SPECIALIST
SAMARITAN'S PURSE INTERNATIONAL RELIEF
KWAGER@SAMARITAN.ORG

OR WRITE TO:
UNITED NATIONS CHILDREN'S FUND
PHILIPPINES COUNTRY OFFICE
MANILA, PHILIPPINES