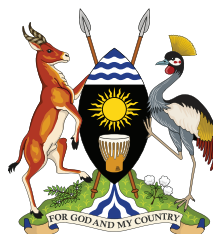




Social Behavior Change Communication

FOR IMPROVED SANITATION



TRAINING TOOLKIT 2015



giz Deutsche Gesellschaft
für Internationale
Zusammenarbeit (GIZ) GmbH



USAID
FROM THE AMERICAN PEOPLE

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ABBREVIATIONS

- AIDA** — Attention, Interest, Desire and Action
- BCC** — Behavior Change Communication
- C2C** — Children to Children
- CLST** — Community Led Total Sanitation
- DCC** — Direct Consumer Contact
- DHS** — Demographic and Health Surveys
- DILO** — Day in the Life Of (Analysis)
- FOAM** — Focus on Opportunity, Ability, and Motivation
- GIZ** — German Corporation for International Cooperation
- HICDARM** — Hear, Informed, Convinced, Decision, Action, Reconfirm, Maintain
- IPC** — Interpersonal Communication
- IEC** — Information Education Communication
- JMP** — Joint Monitoring Program
- KAP** — Knowledge, Attitude and Practice (reports)
- MICS** — Multiple Indicator Cluster Surveys
- M&E** — Monitoring & Evaluation
- NSWG** — National Sanitation Working Group
- OD** — Open defecation
- PHAST** — Participatory Hygiene and Sanitation Transformation
- POD** — Points of Differentiation
- RUWASS** — Reform of the Urban Water and Sanitation Sector Programme
- SBCC** — Social Behavior Change Communication
- SMART** — Specific, Measurable, Appropriate, Realistic, Time-bound
- TC** — Town Council
- TOMA** — Top of the Mind Analysis
- UDHS** — The Uganda Demographic Health Survey
- UNICEF** — United Nations Children Fund
- VIP** — Ventilated Improved Pit-latrine
- VHTs** — Village Health Teams
- WASH** — Water, Sanitation and Hygiene
- WHO** — World Health Organization
- WSDF-N** — Water and Sanitation Development Facility- NORTH

FORWARD

Sanitation and hygiene in a community is a key factor affecting morbidity and mortality among communities. Poor sanitation practices are mainly manifested in diarrheal disease. According to the Uganda Demographic Health Survey (UDHS) 2011, children under five mortality is 90 deaths per 1,000 live births with a target of 56/1,000.

It is against this background that the German International Cooperation (GIZ) in collaboration with Ministry of Water and Environment (MWE) is funding and implementing the Reform of the Urban Water and Sanitation Sector (RUWASS) programme. Co-funded by the United States Agency for International Development (USAID), RUWASS seeks to contribute an improved and equitable access to water supply and sanitation in small towns.

RUWASS is supporting local governments to develop and implement town sanitation plans. The Sanitation plans integrate town planning with sanitation marketing and behavior change communication, involvement of local private sector, law enforcement and other stakeholders. This project is working with Oyam, Kamdini, Aduku and Apac town councils in Lango sub region.

It is hoped that the BCC toolkit and attendant tools presented herein will enable these town councils to develop, implement and monitor effective BCC campaigns that will result in increased knowledge and favorable attitudes on sanitation.

They will also help in the adoption of good hygiene practices at the household, school and community level, as well as enactment of enabling policies and by-laws at community level.

We thank the partners and stakeholders who have contributed to the development of this toolkit.

Head of Programs

GIZ/RUWASS



1. INTRODUCTION

This toolkit was developed by consultants commissioned by GIZ/RUWASS project in partnership with sanitation experts at WSDF North and members of the sanitation taskforce in four town councils--professionals working in water, sanitation and hygiene. Working with several field practitioners and staff, the consultants explored programming challenges in Water, Sanitation and Hygiene (WASH) and designed this toolkit and resulting materials to assist the sanitation taskforces in the town councils of Oyam, Kamdin, Apac and Aduku to improve sanitation.

This toolkit was developed after a scoping mission that was conducted by the consultants in the four town councils where they conducted interviews with a broad spectrum of stakeholders including representatives from the town council leadership, health facilities, schools, churches, NGOs and households. The key informant interviews coupled with field observations across the town councils informed the key gaps in sanitation programming and identified skill gaps and priority capacity building needs of WASH actors and stakeholders. This toolkit was therefore designed to address the capacity building needs in response to the priority gaps identified.

Additionally, the BCC consultants sought opinions from a cross section of national level experts that comprise the National Sanitation Working Group (NSWG) with a view to obtain expert opinion on the critical aspects that should be included in the BCC toolkit for the campaign on sanitation and hygiene in the targeted town councils of Oyam, Kamdini, Aduku and Apac.

The consultants presented the toolkit training outline developed following the

scoping mission to the stakeholders and discussed what the training for the sanitation taskforce would cover. The consultants then obtained feedback on the different sections of the toolkit and on the kind of tools that should be developed. Consequently, a draft toolkit was developed.

The draft toolkit was tested for feasibility and effectiveness in a five day co-creation workshop that brought together sanitation practitioners at WSDF North and grassroots BCC actors including district health inspectors, community development officers, head teacher representatives on the respective sanitation taskforces, town council sanitation planners and enforcements officers, religious leaders among others. The workshop was used as a platform to train WASH practitioners in SBCC while also identifying areas of the toolkit that need further development and improvements. Highly interactive and practice oriented, the workshop also provided a platform for field practitioners to participate in developing sanitation BCC plan specific to their town councils in which they assessed the sanitation situation, profiled key audiences, set behavioral and communications objectives, developed key messages and developed a communications mix strategy and work plan. Additionally, the group of field practitioners developed the initial concepts that were later used by the creative team and graphics designers to produce communications materials to be used for the town councils' sanitation BCC plans.

What is in the Toolkit?

The toolkit is a resource to assist the sanitation taskforces in the town councils of Oyam, Kamdini, Apac and Aduku to improve sanitation through strategic Social Behavior Change communication (SBCC). This toolkit will enable teams to plan programs for different target groups at varied levels of service delivery—facilities, schools, communities, health centers and homes.

It was developed to provide the sanitation taskforces with a set of flexible materials to raise their own understanding and help them to develop and implement effective strategic behavior change communication for sanitation improvement. The aim is to enable the people charged with designing sanitation improvement campaigns to more effectively do it, so that people at all levels in these town councils increasingly change their behavior.

In addition practitioners are expected to integrate elements of WASH in existing town council activities so that even with limited funds, water, sanitation, and hygiene interventions are a regular part of all behavior change and education activities in the town councils.

The toolkit also provides how to steps and examples from the co-creation workshop to aid learning and application. Sample communication materials designed after the co-creation workshop are also provided



2.

BACKGROUND

Sanitation Situation in the town councils

The Uganda Demographic Health Survey (UDHS) 2011 shows children under 5 years who had diarrhea in the last 2 weeks in the North was 24% and 4.6% had diarrhea with blood while national prevalence was 23% and 4% respectively

What is the current sanitation and hygiene situation?

- Apac TC has the highest coverage of improved sanitation facilities (VIP, ecosan, pour, flush) at 74% while the other town councils have a much lower coverage Aduku(35%), Oyam (27%) and Kamdini (21%). In Oyam, most households have access to simple improved sanitation facilities (69%) compared to other town councils whose access to these this type is notably lower Aduku(11%), Apac (17%) and Kamdini (11%).
- About half the latrines were observed to be dirty in Aduku (54%), Oyam (45%), Apac (41%) compared to Kamdini (29%).
- Access to hand washing facilities is low. Only one third of the households surveyed in Apac town council and less than one quarter in Oyam, Aduku and Kamdini had hand washing facilities available at the sanitation facility.
- Open defecation practices among children under five years old were reported in all town councils at varying rates from over half in Kamdini (59%) and Oyam (54%) to 34% in Aduku and 11% in Apac.

Existing knowledge and perceptions about sanitation and hygiene

- Majority of the household heads know that open defecation can lead to disease.
- About three quarters of the household heads in Oyam and Kamdini, reported that they plan to build a better toilet while slightly more than half have similar plans in Aduku and Apac TCs
- About one third of the household heads in Kamdini, Apac and Oyam TCs believe that keeping the latrine clean is difficult compared to 19% in Aduku TC.
- Majority of the households surveyed in Aduku (81%) and Kamdini (78%) TCs are committed to keeping latrines clean compared to only 58% in Oyam and 42% in Apac.
- Majority of the male and female household heads in all the town councils know that someone should wash hands ' after using the toilet' and 'before eating food', however there is lower knowledge about washing hands before cooking food, before breast feeding and after cleaning a child's bottom.

○ Hand washing after using the toilet is not a common behavior in the communities (social norm). Household heads reporting that 'all household members wash hands with soap after defecation' varied from 77% in Kamdini, Apac (54%), Oyam 43% and was lowest in Aduku (12%).



- In Oyam, Aduku and Kamdini TCs over seventy percent of household heads reported that they are fully committed to having hand washing facilities compared to 26% in Apac TC.

A PROFILE OF HOUSEHOLD HEADS WITH POOR SANITATION AND HYGIENE BEHAVIORS

Archetype

My name is Mary, I engage in informal business as a market vender in the main market, I sell small items; tomatoes, vegetables, flour, cabbages, beans and all other small things. I am 28 years and married I have 5 kids with two who are below 5 years old.

Fears / worries

I worry about my business since it is currently affected by poor weather and increasing prices which makes it difficult for me to sustain my family. I worry about being able to pay for my children's education and health which means the children will have a difficult life if I cannot support them

Aspirations / plans

My plans are to buy land and build a permanent house with iron sheets. I also plan to educate my children to ensure that they can take care of themselves in future and support me in my old age.

Key possessions / values

I value the property I have accumulated such as land and some livestock since I can sale them and get money when I have an emergency.

Openings

I belong to a savings group which meets and save money weekly. I get my information from friends, church and local leaders. I also listens to radio in the evening from about 8-10pm. I get information from radio announcements& news.

I admire a successful businessman in town who is comfortably supportting his family

Beliefs to change / barriers to practice or behavior

Latrine ownership

I currently do not have enough money to construct a latrine. This area is also difficult to dig a deep pit due to; lots of stones in the ground / high water table and there are no skilled persons to dig. I believe that sharing a toilet with other households is okay and latrine ownership not a priority – compared to education. I believe that failure for a home to have a latrine is the weakness of the household head who does plan and prioritize appropriately.

Open defecation

I do not think that children's feaces are dangerous. I have also heard a few people say that defecating in the gardens provides manure but I don't believe it

Hand washing

In my area, there is limited availability of water for hand washing

Beliefs to reinforce / drivers of practices or behaviors

Latrine ownership

- I see that my friend who have latrines in the home is a point of pride / respect from the community and it is shameful not to one. A latrine in the home gives you pride and respect especially when visitors are around.
- Having a latrine encourages health living and household hygiene, it also enables quick disposal of children's excreta and reduces spread of disease
- A toilet that is distant from the home is a problem for example when it rains.
- An improved toilet (VIP) does not smell a lot, it has a slab that is long lasting and durable. Health regulations require all homes to have a toilet and we all want one

Open defecation

- Open defecation makes living in an area unpleasant since it smells, attracts flies which lead to disease.
- I think that someone who is defecating in the bushes is senseless, backward, is bad hearted or has a mental problem and that is why they do it at night or while hiding. This person should be abused and scorned. Open defecation is mostly done by drunkards and children

Hand washing

- I believe that hand washing after the toilet prevents the spread of germs and it is important to keep some water at home for hand washing

Hygiene / cleanliness

- A clean home and latrine gives pride and privilege to the home. It does not embarrass the home and does not discourage visitors from coming to the home. If the home is not clean, there is a risk of disease

Brand / behavior attributes i.e. personification

I believe that households that have latrines reflect members who are: Knowledgeable, clever, and wise, well raised and can afford. Households with no latrine represent people who are poor planners, weak in thinking and not educated. Household with clean latrines are: knowledgeable about health and educated while those with dirty ones are not. Those who practice open defecation are of poor character

Integrated messaging for sustainable communication on sanitation



3.

THE BEHAVIOR CHANGE PROCESS

OVERVIEW

In this section we introduce SBCC and the behavior change process. Participants will appreciate the role of SBCC and various models of behavior change that can be used to design BCC campaigns.

3.1 What is Social Behavior Change Communication (SBCC)

SBCC for hygiene and sanitation is a systematic application of interactive, theory-based, and research-driven communication processes and strategies aimed at addressing tipping points for change at individual, community, and social levels. It purposes to enable people to take action to prevent or mitigate water, sanitation, and hygiene related diseases but uses a multiplicity of approaches that leverage drivers of sanitation behavior, some of which might not be health related.

3.2 The role of SBCC in improving community sanitation

SBCC is effective at increasing knowledge through garnering the basic facts about hygiene and sanitation in a language or visual medium (or any other medium that they can understand and relate to). In the process it encourages community discussions on hygiene and sanitation. This discussion facilitates essential positive attitude change and adoption of positive hygiene behavior.

3.3 Models of communication

Models help SBCC practitioners to better understand how people change behavior, where the majority of the target audience might be in the change process and what the different actors might do to move people from one stage to another as a small step in changing behavior. In this toolkit we discuss the most common models/theories of change applicable to WASH.

Although people don't move through the stages in a linear way they will appreciate that sometimes individuals move forward while other times they may skip step(s) or move backward by reverting to old behaviors.

1. AIDA Communications in Advertising Model

KEY TERMS

- Attention
- Interest
- Desire
- Action

Used mostly in advertising, this model helps practitioners to design effective communication materials. Its premise is that people move through stages from Awareness of the behavior, to gaining Interest, then Trial, where they try the behavior and once they find it worthwhile move to Adoption where they consistently perform the behavior; after which they become Advocates of that behavior.

The acronym AIDA stands for Attention, Interest, Desire and Action. These are the four stages that a person goes through when watching or viewing an advertisement. When practitioners are designing communication materials, they must consider the AIDA process. For example, in a poster, once an ad grabs attention, it has to invoke interest towards the behavior in the minds of the target audience. After creating an interest, the poster has to bring desire in the audience's mind to adopt the behavior and finally the person targeted has to take a favorable action towards the behavior by ultimately acting on what has been suggested in the poster.

How to use AIDA

Attention:

Attention is usually grabbed by the use of image, color, layout, typography, size, celebrity, model etc

Interest:

Once attention is grabbed, it's necessary to create interest in the viewers mind so that they will get curious about the behavior being advertised. By the use of an attractive sub headline, interest can be invoked

Desire:

The element of desire is usually created by the use of body copy where you write in detail about the necessity performing the behavior, thereby explaining the features and benefits in performing the behavior

Action:

Towards the end, the action to be taken is explicitly specified so that people can take action immediately. A contact number is provided in case the person wants more information

An advertisement's success depends up on the viewer's ability to notice and understand its message. The AIDA model helps WASH practitioners to present the elements of say a poster: Headline, Subhead, Body copy, slogan and contact information in a format that makes the viewers read in a flow and understand about the product easily.

2. Stages of behavior change

KEY TERMS

- Awareness
- Interest
- Trial
- Adoption
- Advocacy

According to the 'stages of behavior change' model, the following six steps make up the complex process a person uses to change their habits and behaviors and integrate changes into their lives.

1. Unaware /Pre-contemplative

In this stage, people are not interested in change, can't see the need to change and have no intention of doing anything differently. They defend their current behavior and are not aware that their life could be better. This group tends to avoid information, discussion or even thought about change and the need for it. Some observers would characterize this group as 'resistant', 'unmotivated', or 'in denial' and not focused on the need to change or the actual change itself. This category might include people such as those who say, "we have lived a long and productive life all these years without ever washing hands with soap, how come diarrhea never killed us?" or "Our grandfathers had no modern latrines, why would we need them".

2. Aware/Contemplative stage

People start to think about sanitation and the possible need to make some changes. They recognize that there is a problem and that they can and should do something to make their lives better. There may have been a trigger event like an older person who is a friend or neighbor having been embarrassed for not having a latrine or there may be some other form of prompt that starts the process of considering change. For example, people could be motivated to build their own tippy taps when there is a pending inspection by local leaders or after a community mobilization drive led by local authorities such as the Keep Apac Clean sanitation day event that was conducted by local leaders in partnership with scout, youth

and sports teams.

In this stage, people are now beginning to see that their behavior needs changing. People in this group are often seen as procrastinators and ambivalent, however what they are actually doing is weighing up the pro's and con's (including the costs and benefits) of any possible behavior change. After years of open defecation, a person might feel a sense of loss of convenience despite the perceived gain of using a latrine. At this stage, people are very open to information.

3. Interest/Preparing for change

The person concerned has realized how serious their situation is, has made a decision or a commitment to change and is currently completing any 'pre-change' steps with a view to making the required change within the next month. An example would be a head of household who starts saving money to construct a latrine. This stage is typified by determination, making plans, introspection about the decision to change as well as a reaffirmation of the need and desire to change. This is typically a period of transition. It is not seen as a stable time and is usually quite short.

4. Trial/Action

This stage applies to those people who have made real changes or modifications to their behavior. While the chances of relapse and temptation are very strong, there is also openness to receiving help and support. For example, a person who is accustomed to open defecation will attempt using a latrine. He may get the temptation to defecate in the open or falter once in a while but will most times wait until he has access to a latrine. Usually, after about six months, the person moves from the action stage to the maintenance stage.

5. Adoption/Maintaining

By this stage, people are working to consolidate any changes in their behavior, to maintain the 'new' status quo and to prevent relapse or temptation. For example, if a person used to wash hands with soap after visiting a latrine, once in a while, in this stage they are firmly committed to doing it every time. The former behavior is now seen as no longer desirable and a number of coping strategies have been put in place and are working. For example, they might get ash ready to use for a time when

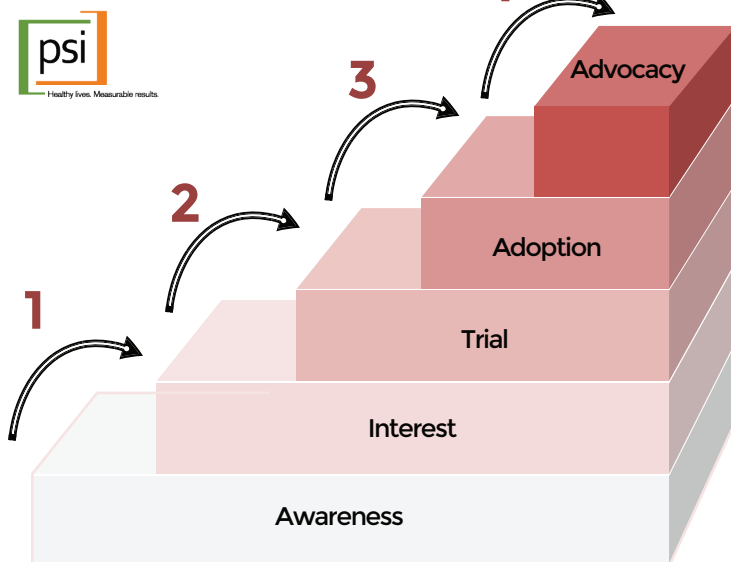
soap is not available or affordable. There is a need for this group to be reminded of the progress that has been made already and to stay on the course of change. The risk of lapsing is substantially less than in earlier stages.

6. Termination/advocacy/transcendence

This stage is the continuing part of any behavior change and includes the understanding that going back to old habits or behaviors would 'feel weird' and that former problem behaviors are no longer perceived as desirable. In this stage people start

promoting the sanitation gospel, advocating for the new behavior as testimony to how beneficial the change has been for them. They advocate for hand washing, latrine construction, proper defecation and other sanitation behaviors being promoted by spreading the word to their neighbors, family members or the public at large. This sort of advocacy plays an important part in helping move other people along the behavior change path and needs to be encouraged and supported. During this stage, relapse can occur, but it is not seen as a failure but rather as a learning opportunity to help strengthen coping strategies and support mechanisms.

Moving up the Adoption Stairway



4.	Moving from ADOPTION to ADVOCACY	
	Common Barriers: <ul style="list-style-type: none"> ▪ Feels opinion isn't influential ▪ Feels isn't knowledgeable enough 	Ways to Address Them: <ul style="list-style-type: none"> ▪ Coach people to feel comfortable addressing others
3.	Moving from TRIAL to ADOPTION	
	Common Barriers: <ul style="list-style-type: none"> ▪ Low confidence in ability to build latrine ▪ Believes there are "better" options 	Ways to Address Them: <ul style="list-style-type: none"> ▪ Increase personal motivation (use detail aid) ▪ Use testimonials
2.	Moving from INTEREST to TRIAL	
	Common Barriers: <ul style="list-style-type: none"> ▪ Access to latrine ▪ Proper training and ▪ Understanding the impact of not behaving 	Ways to Address Them: <ul style="list-style-type: none"> ▪ Provide resources (equipment sources, contacts, training) ▪ Focus on drivers of behavior
1.	Moving from AWARENESS to INTEREST	
	Common Barriers: <ul style="list-style-type: none"> ▪ Myths about effectiveness ▪ Myths about cost ▪ Lack of understanding 	Ways to Address them: <ul style="list-style-type: none"> ▪ Offer educational materials ▪ Define precise costs ▪ Develop knowledge

Example

The desk review revealed that family size influences a couple's decision to use contraceptive methods:

Couples with two or less children are more likely to remind their children to regularly wash their hands before eating

Couples with more than two children are less likely to remind their children to wash their hand before meals.

The campaign would have to provide different messages and materials to couples with more than two children. The criteria for segmentation would be family size.

3. HICDARM

HICDARM is a communications planning model developed by WHO to enable practitioners to develop communications campaigns that can quickly get behavior impact even with entrenched behaviors. It's a tool used in Communications for Behavioral Impact in Health and Social Development (COMBI)

HICDARM is an acronym that outlines how people change from the time they hear information about new or promoted behaviors.

Hear – First we hear about the promoted behavior. At this stage an individual is unaware and is not very well informed. This individual will be targeted with repetitive sanitation specific messages.

Informed – Then we get informed about the specifics of what the behavior being promoted involves. For example, how to design a tippy tap or what it takes to build a latrine or the dangers of open defecation. At this stage the individuals will seek more information from trained staff such as village health teams, doctors, teachers, peer educators, local leaders, peers etc.

Convinced – By strengthening community support and marketing drives individuals are convinced that sanitation improvement are good for them, that poor sanitation is affecting them and that behavior change would prevent sanitation diseases and loss of reputation among peers. More vigorous and conventional advertising drives will be used that will grab an individual's Attention, passing messages that are Interesting, moving people to make prompt Decisions and generate Actions (AIDA). Individuals can be consistently assured and reminded of the benefits of sustaining behavior.

Decision(Making Prompt Decision) – There is repeated flooding of messages supported by interpersonal contacts to influence decision making for individuals to adopt new positive sanitation behavior. With support of political and community utterances and a conducive environment, people will make informed decisions to change. In this stage the campaign practitioners must produce, in surround sound fashion multimedia integration of messages to the targeted individuals that appeal to their emotions.

Action – Effort is made to reach audiences by multimedia so that they are motivated to take positive behavioral actions. The flighting of the media messages and interpersonal contacts are strategic and target oriented.

Reconfirm – A cadre of interpersonal agents such as VHTs and members of the religious infrastructure are trained to deal with person to person communication to reconfirm positive behavior. More third party endorsers such as sanitation testimonials and champions can also be recruited.

Maintain – The strategy will utilize interventions that will ensure that once behavior change is adopted, it is maintained. This can be achieved through repeated reconfirmation, public utterances and public testimonies, giveaways and awards. This way the whole community is motivated to adopt the new sanitation behavior.



4.

APPROACHES TO ACHIEVING HYGIENE AND SANITATION BEHAVIOR GOALS

OVERVIEW

This section of the toolkit will enable practitioners to appreciate that SBCC is effective at increasing knowledge through garnering the basic facts about hygiene and sanitation in a language or visual medium (or any other medium that they can understand and relate to).

Practitioners will learn that there are various step by step approaches that can be used to achieve positive hygiene and sanitation such as Participatory Hygiene and Sanitation Transformation (PHAST), Children to Children (C2C), Community Led Total Sanitation (CLST), Sanitation marketing, interpersonal communication, mass media advertising and promotion, Social marketing and experiential marketing.

KEY TERMS

- PHAST
- C2C
- CLST
- Sanitation marketing
- Interpersonal communication
- Mass media advertising and promotion
- Social and experiential marketing

Participatory Hygiene and Sanitation Transformation PHAST

PHAST is an innovative approach to promoting hygiene, sanitation and community management of water and sanitation facilities. It builds on people's innate ability to address and resolve their

own problems. It aims to empower communities to manage their water and to control sanitation-related diseases, and it does so by promoting health awareness and understanding which, in turn, lead to environmental and behavioral improvements. PHAST uses methods and materials that stimulate the participation of women, men and children in the development process. It relies heavily both on the training of extension workers and on the development of graphic materials that are modified and adapted to reflect the actual cultural and physical characteristics of communities in a particular area. The production of PHAST materials therefore requires trained artists as well as trained extension workers.

Health-related community development principles of PHAST

The main underlying health-related community development principles of PHAST are as follows:

- Communities can and should determine their own priorities for disease prevention.
- People within a community collectively possess an enormous depth and breadth of health-related experience and knowledge. For example the people of Apac town council are best suited to identify what their sanitation priorities are; therefore community mobilization efforts must put them at the centre of determining these.
- Communities are capable of arriving at a consensus regarding the hygiene behaviors and sanitation systems most appropriate to their specific ecological and cultural environment. When people understand why improved sanitation is to their advantage, they will act.
- All people, regardless of their educational backgrounds, are capable of understanding that feces carry disease, can be harmful, and that it is detestable not to dispose off fecal material in a proper manner.

Community Led Total Sanitation (CLTS)

Community Led Total Sanitation (CLTS) is an innovative methodology for mobilizing communities to completely eliminate open defecation (OD). Under the approach, communities are facilitated to conduct their own appraisal and analysis of open defecation (OD). They are empowered to take their own action to become ODF (open defecation free). At the heart of CLTS lies the recognition that merely providing toilets does not guarantee their use. CLTS is guided by a set of principles:

- | | |
|---|--|
| <ul style="list-style-type: none"> ● Focuses on the behavioral change needed to ensure real and sustainable improvements ● It invests in community mobilization instead of hardware ● Shifts focus from toilet construction for individual households to the creation of open defecation-free villages. ● Emphasizes that as long as even a minority continues to defecate in the open everyone is at risk of disease ● It triggers the community's desire for | <ul style="list-style-type: none"> collective change ● Propels people into action ● Encourages innovation ● Enlists mutual support of community members ● Generates appropriate local solutions ● Leads to greater ownership and sustainability. ● It mobilizes community members towards collective action and empowers them to take further action in the future. |
|---|--|

Both PHAST and CLTS require that practitioners mobilize the entire community and engage them to come up with their own unique solutions. This might be difficult to execute in urban areas such as town councils but the principles are critically important and can be applied during sanitation drives in neighborhoods and wards within the town councils

5.

SANITATION HYGIENE COMMUNICATION PLANNING

OVERVIEW

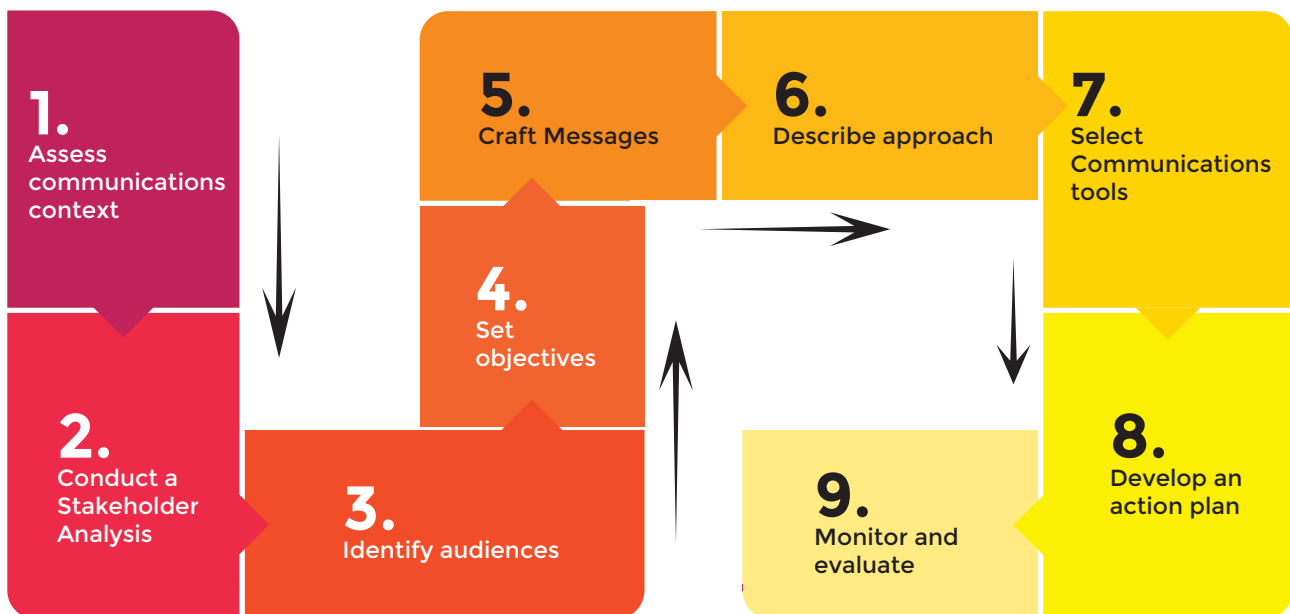
In this section you will learn that a situation analysis or environmental analysis is the fundamental first step in the social and behavior change communication change (SBCC) process. That it involves a systematic collection and study of health and demographic data, study findings and other contextual information in order to identify and understand the specific sanitation issue to be addressed. That it guides the identification of priorities for an SBCC intervention and informs all the proceeding steps in the SBCC process.

A situation analysis when well conducted enables practitioners to:

- a) Understand the current situation (extent and severity) of the sanitation issue.
- b) Understand the broad context in which the sanitation issue exists

Below is the P-Process highlighting the nine steps in communications planning. We will address each step in turn.

9 steps of communication planning



5.1 Assessing the communications context (Situation Analysis)

The situational market analysis for communication keys uses participatory research techniques adapted from marketing, communications, anthropology, and sociology to identify behavioural issues amenable to communication solutions. The situational market analysis involves listening to people and learning about their perceptions and grasp of the promoted behaviour(s) through

tools such as TOMA (Top of the Mind Analysis), and DILO (Day in the Life Of) Analysis. The target audience's sense of the costs (time, effort, money) in relation to their perception of value of the promoted behaviour to their lives is explored through a Cost vs. Value calculation. Other tools such as the Force Field Analysis helps community members, field staff, local experts, and the SBCC practitioners to analyse the social, political, ecological, moral, legal, and cultural factors that could constrain or facilitate adoption of the behaviour. The situational market analysis also examines where and from whom people seek information and advice WASH related issues and why they use these information sources. The concept of positioning the behaviour (used extensively in the advertising world), also helps the development of appropriate messages and communication approaches. As such, the situational analysis helps practitioners to determine emotional clues that could drive behaviour. Areas that require further investigation are also highlighted during this process and research commissioned where necessary. Finally, issues not substantially amenable to communication solutions, such as the ready availability of services, are documented so that appropriate organizational change or political action can be taken. For example, in Oyam, when it was observed that though some schools have drainable toilets, there are no service providers in the district to provide that service, the sanitation taskforce decided to lobby Water For People, a WASH NGO to enlist private sector providers in Oyam.

Formative research is the foundation of any evidence-based social behavior change communication strategy. It is used to collect evidence on current practices, the factors that influence them, and the current types of sanitation behaviors, barriers to adoption of desired behaviors, existing sanitation facilities and services needed. Formative research also informs the intervention continuously, from design to implementation and monitoring. This research therefore enables you to gain insights into people's sanitation social habits, attitudes, behaviors and underlying vulnerabilities of families and communities. Broadly speaking, formative research to help answer questions such as those listed below will help you conduct good a situational analysis.

- ▷ What is the current sanitation situation?
- ▷ Who (and how many) does what, where, how, and why?
- ▷ What are the consequences of the current situation and what will the consequences be if nothing changes or if changes are made?
- ▷ What is the sanitation goal for change?
- ▷ How can the sanitation goal be reached?
- ▷ How well is the intervention being implemented or delivered?
- ▷ What needs to be done differently?
- ▷ What is the target population's prior experience with sanitation facilities?
- ▷ Which sanitation facility features/benefits do households most desire?
- ▷ How much are households willing to pay for sanitation features/benefits?
- ▷ What products/services are currently available to the household and at what price?
- ▷ What socio cultural issues are relevant
- ▷ Who/what is the main competition to the behaviors promoted? Direct competition? Indirect competition?
- ▷ What are the barriers to the target audience partaking in the behavior or the perceived benefits of the behavior?
- ▷ What has profiling your target audience told you?
- ▷ What are the recognizable characteristics of a typical behaving person? What makes them different from other community members?
- ▷ What success have you had so far in promoting the desired sanitation behaviors? What caused the success?
- ▷ What media channels have you tested? Which do people trust/use/respond to?
- ▷ What communications activity has delivered a better return-on-investment?
- ▷ Which segments of the population should be the primary/secondary target audiences for this year's BCC campaigns?

Answering these questions requires data to assess both the supply (availability of sanitation products and services from the local private sector) and household demand (current practices and the sanitation products and services desired). This data might already be available in existing sources such as research reports or other documents. Information mined from existing sources is referred to as secondary research data. Possible sources for secondary data include:

- ❑ Demographic and Health Surveys (DHS)
- ❑ Multiple Indicator Cluster Surveys (MICS)
- ❑ Joint Monitoring Program (JMP) reports issued by the World Health Organization (WHO)/UNICEF
- ❑ Reports from WASH NGOs and other practitioners
- ❑ District reports
- ❑ Knowledge, Attitude and Practice (KAP) reports

Situation analysis methods

There are various methods that can be used to conduct a situation analysis. The statistics and facts you learn through the process tell a story which can be powerful and give clues to what needs to be done.

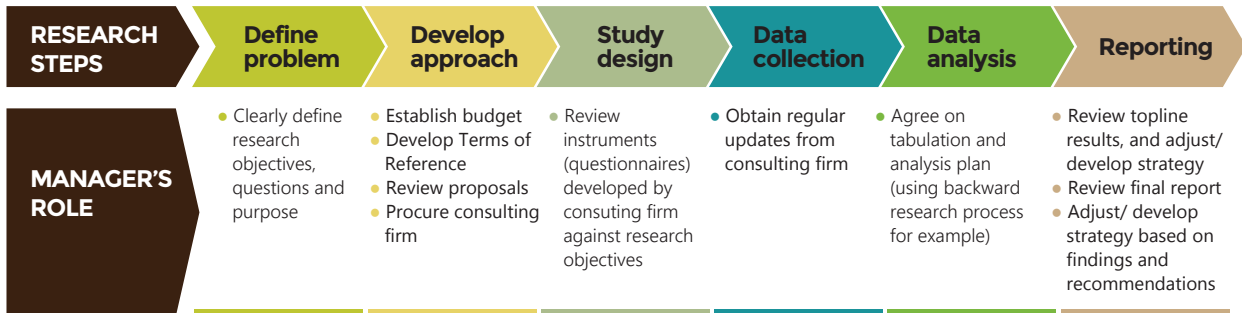
- Exploratory or transect walks to observe what is happening in the town council community. Here the practitioner takes a walk from one end of the community to the other observing and asking questions among people he or she meets. The practitioner could also be guided through the community by a resident. Asking questions is the most important skill needed for transect walks.
- Key Informant Interviews: Discussions with key informants and opinion leaders such as religious and ward heads, community leaders – usually the elders and local leaders - service providers, and others.
- Community mapping: Practitioners help the community to gather information about sanitation in the community. The first step is to gather information like what people earn, levels of education, what community members do, access to sanitation services, levels of ownership of sanitation facilities, areas where open defecation is practiced, etc. The second step is to use this information to make decisions about what the community can do to improve the sanitation situation.
- Focus group discussions: Practitioners can put together a small group of community members for a guided discussion about sanitation issues in the community. The group, usually composed of 8-12 people is modulated by an experienced moderator or facilitator who gathers information on a diversity of opinions about sanitation in the community.

Where possible, it is critical that whichever method you choose, you involve members of the community that the campaign targets. They too gain collective insights about themselves and their own communities. You can perform these rapid situation analysis techniques easily and quickly in the community.

CAUTION: Avoid the tendency to proceed with your communication strategy without the benefit of evidence-based planning.

Figure 2 below summarizes the steps required to conduct formative research and the role that you can play. One needs to determine which decisions must be made and what information he or she needs to make those decisions.

Research steps and manager's role



SUMMARY

This chapter has introduced the participants to the sanitation problem, its severity and its causes.

- The people affected by the problem (potential audiences).
- The broad context in which the problem exists.
- Factors inhibiting or facilitating behavior change

The participants have also learned to let the numbers and facts you learn tell a story. The story can be powerful and give clues to what needs to be done.

5.2 Stakeholder Analysis

What Is Stakeholder Mapping?

Stakeholder mapping is a collaborative process of research, debate, and discussion that draws from multiple perspectives to determine a key list of stakeholders across the entire stakeholder spectrum. Mapping can be broken down into four phases:

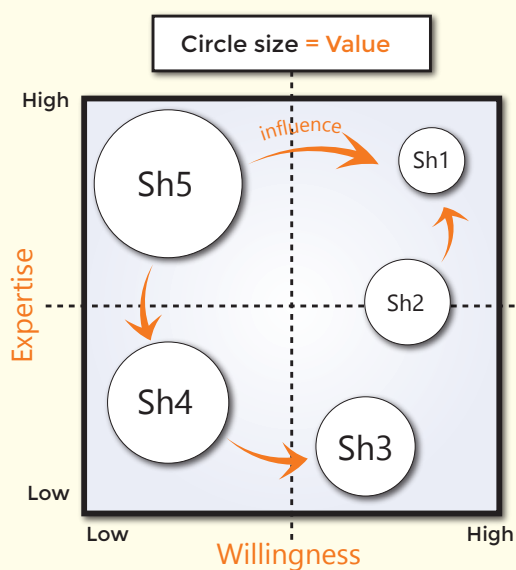
- ❖ **Identifying:** Listing relevant groups, organizations, and people.
- ❖ **Analyzing:** Understanding stakeholder perspectives and relevance.
- ❖ **Mapping:** Visualizing relationships to objectives and other stakeholders.
- ❖ **Prioritizing:** Ranking stakeholder relevance and identifying issues.

The process of stakeholder mapping is as important as the result, and the quality of the process depends heavily on the knowledge of the people participating.

Mapping stakeholders is a visual exercise and analysis tool that you can use to further determine which stakeholders are most useful to engage with. Mapping allows you to see where stakeholders stand when evaluated by the same key criteria and compared to each other and helps you visualize the often complex interplay of issues and relationships created in the criteria chart.

Action: Draw a mapping as follows to identify key stakeholders.

- ① Draw a quadrant using two axes labeled "Low" to "High."
- ② Add "Expertise", "Willingness" and "Value" to the criteria chart as above.
- ③ Assign "Expertise" to the Y-axis and "Willingness" to the X-axis.
- ④ Discuss and debate within your group where each stakeholder falls.
- ⑤ Plot the stakeholders on the grid.
- ⑥ Use small, medium, and large circle sizes to denote their "Value."
- ⑦ To illustrate relationships, use arrows to depict "Influence."



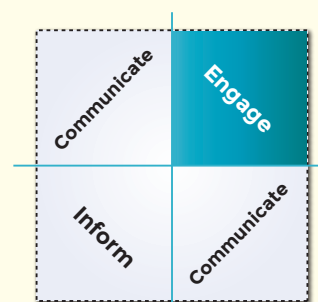
Prioritizing stakeholders and identifying issues

It is not practical and usually not necessary to engage with all stakeholder groups with the same level of intensity all of the time. Being strategic and clear about whom you are engaging with and why, before jumping in, can help save both time and money.

Action: Look closely at stakeholder issues and decide whether they are material to your engagement objectives, asking yourself the following questions:

- ❖ What are the issues for these priority stakeholders?
- ❖ Which issues do all stakeholders most frequently express?
- ❖ Are the real issues apparent and relevant to our engagement objectives?

Quadrant tactics



Use the mapping to rank your stakeholders into a prioritized engagement list. You should now have captured the most relevant issues and the most relevant stakeholders to engage.

Tactics	Format
Engage (high priority)	Joint venture
	Partnership
	Research collaboration
	Summit
Communicate (medium priority)	Sponsorship
	Survey
	Mass email or newsletter
	Social media
Inform (low priority)	Conference
	Marketing campaign
	Sustainability report
	Publication
	News coverage

Closing the Feedback Loop

Engagement is ultimately about building ongoing communication with those most valuable to your SBCC initiative. Even after you have finished a set of engagement activities, you should continue your communication with your stakeholders as part of your long-term strategy.

Try to avoid these typical pitfalls when wrapping up your engagement activities:

1. **Inconsistency in communication:** If you say you are going to keep your stakeholders updated, do so. Go one step further and agree with them upfront how often they will be updated, and through what channels. This will help mitigate misunderstandings and build co-ownership for future engagements.
2. **Pretending feedback:** This happens when updates are treated as checking a box rather than fielding real feedback or engaging stakeholders in ongoing conversations. Always keep the lines of communication open for feedback, and do not place the engagement activities so late in a timeline that stakeholders have no opportunity to contribute in a real way. Do not pretend to want feedback and then do nothing with it. And most importantly, let your stakeholders know how their feedback is used. Close that feedback loop, and include the resulting value in future engagement plans.

Once you have completed your engagement activities and developed a robust feedback mechanism, it is time to take your lessons learned and start all over again.

5.3 Identify Audiences

KEY TERMS

- Audience segment
- Impact
- Accessibility
- Campaign priorities

OVERVIEW

In this section you will learn how to segment audiences based on the situation analysis. You will be equipped with skills to refine audiences of interest for a sanitation campaign as clearly as possible. You will also be better able to select an appropriate audience segment for the intervention.

Audience segmentation is the process of dividing a large audience into smaller groups of people - or segments - who have similar needs, values or characteristics. Segmentation recognizes that different groups will respond differently to social and behavior change communication (SBCC) messages and interventions.

How to Identify Audiences

Segmenting audiences enables a sanitation SBCC campaign to focus on those audience members who are most critical to reach and also to design the most effective and efficient strategy for helping each audience adopt the new sanitation behaviors. Audience segmentation enables programs to match audiences, messages, media, products and services based on the specific needs and preferences of the audience. Tailoring a SBCC strategy to the characteristics, needs and values of important audience segments improves the chances for desired behavior change.

EXAMPLE

In Kamdini, whereas the campaign will target a wide range of people not practicing good sanitation, the taskforce prioritized market vendors as the primary audience. The sanitation situation is poorest in the market area as many traders lack latrine facilities and have no homes; many women have makeshift homes at the market. In Oyam, school children were targeted due to the vulnerability to sanitation related illness. Additionally, the taskforce targeted health centers and household heads

Deciding which segments to target and how to approach them

If the program team identified more audience segments than it can or needs to reach, narrow the list. Here are some suggestions on how to narrow the list:

- ❖ **Impact:** Look at the size of the segment and ask whether sanitation behavior change in this segment will have a significant impact on the problem.
- ❖ **Accessibility:** Determine whether the program team is able to reach the particular segment with the resources available. For example, does the campaign team have connections with the rural audience? Can it work with rural leaders to ensure its message is delivered?
- ❖ **Campaign priorities:** Campaigns often need to show impact early and quickly. In such cases, it may be necessary to choose audience segments whose behavior will be relatively easy to change.

Using the suggestions above, finalize which segments the program will target. The number of segments will be based largely on the resources available and program goals.

5.4 Set objectives

OVERVIEW

This section looks at how to set communication and behavior change objectives. Practitioners will learn how to set behavior change communication goals in the context of overall campaign specific behavior change goals. The participants will gain skills in analyzing what changes in behavior they intend to achieve and develop SMART communication objectives..

Learning objectives: By the end of this session the participants will be able to:-

Develop SMART communication and behavior change objectives

SUMMARY

- Describe a change (e.g., uses words like increase)
- Relate to an important program objective that is appropriately addressed by communications
- Identify a specific audience
- Be specific, measurable, attainable, realistic, time-bound

How to develop a behavior objective

To formulate objectives, consider the changes that might be needed in the target groups' knowledge, attitudes, or practices. Answer the following questions to help you develop behavior objectives/results. To do so, you and your team need to work with the affected community. Whose behavior needs to change to bring about a significant improvement in the sanitation situation in the town council? (mothers'; primary caregivers'; fathers'; neighbors'; volunteers'; health workers'; religious leaders', teachers'; politicians'). Revisit the insights you gathered during the situational analysis to answer the following questions.

- ❖ Why are people currently doing it all the time; doing it sometimes, or not doing it at all? What factors account for the difference?
- ❖ If they are not doing it now, why not?
- ❖ Are they practicing a similar desired behavior?
- ❖ How can you best influence and support that behavior?
- ❖ What are the barriers to change?
- ❖ What factors — social, cultural, economic, environmental, psychological, physiological, etc. — and who, what, where are the most influential channels that can motivate changing or maintaining the behavior?
- ❖ What skills and resources are needed for the affected groups to practice the desired sanitation behaviors?

Identifying the Behavioural Objectives

1. **State the overall goal:** The first step is to develop a statement of the overall programme goal that the BCC campaign will help achieve. For example... “To contribute to the elimination of open defecation in Aduku Town Council by Dec year 2017.

2. **Specify the behavioural objective/s:** A statement of specific, measurable, appropriate, realistic and time bound behavioural objectives. For example: “To prompt approximately 1,000 household heads in Oyam Town Council to build tippy taps and to talk to their children about hand washing with soap at least once a week”

EXAMPLE

Some of Aduku's overall program goals:

- ⇒ To increase access to private latrines from 61% to 70% by December, 2016
- ⇒ To increase access to hand washing facilities from 24% to 40% by December

What is a SMART behavior objective/result?

Behavioral objectives are best stated in terms of the intended behavior change or the maintenance of an existing desired behavior. A behavioral result usually has at least three features, which makes it a SMART result:

- Clear identification of the audience of interest.
- Detailed description of the promoted behavior (appropriate and realistic); and how

many times the behavior should take place.

- The measurable result you hope to observe over a specific time period.

EXAMPLE

Behavior Objective: To increase from 30 percent to 60 percent the number of caregivers who wash hands with soap and water after going to the toilet by 2017.

SMART is an abbreviation for **Specific, Measurable, Appropriate, Realistic, Time-bound**.

Be wary of one's "social development conscience"; aim for a limited number of behavioral outcomes, one to three at the most. One's "social development conscience" tempts one to tackle all or many of them. But this would be an operational error. While we feel obliged to take on every behavioural objective to get to the overall goal, we need to curtail this urge and restrict ourselves to a limited few at a time.

In tackling too many desired behavioural outcomes, we may very well end up, like butterflies, flitting from one flower to the next, but not accomplishing very much by the end of a year. We would have worked hard and have been well intentioned but in attempting to do too much, we achieve little.

How to develop a behavior objective

In any sanitation improvement project, behavioral objectives cannot be achieved by communications actions alone. By itself SBCC is insufficient to cause change because there are factors that affect behavior that are not amenable to communications. For example, for people to consistently wash hands at all critical times, it is important that they have access to sufficient quantities of water. This might require advocacy and lobbying but it might be a function outside the control of SBCC practitioners. The Water and Sanitation Program of the World Bank developed FOAM as a framework to help practitioners in resource-poor communities to identify the behavioral determinants to see which determinants, when mediated in a particular setting with a specific target group, are most likely to have the greatest impact on hand washing behavior.

EXAMPLE

Communications Objective: Increase the proportion of target audience who agree that it is shameful not to use a latrine (attitude) from 56% to 70%.

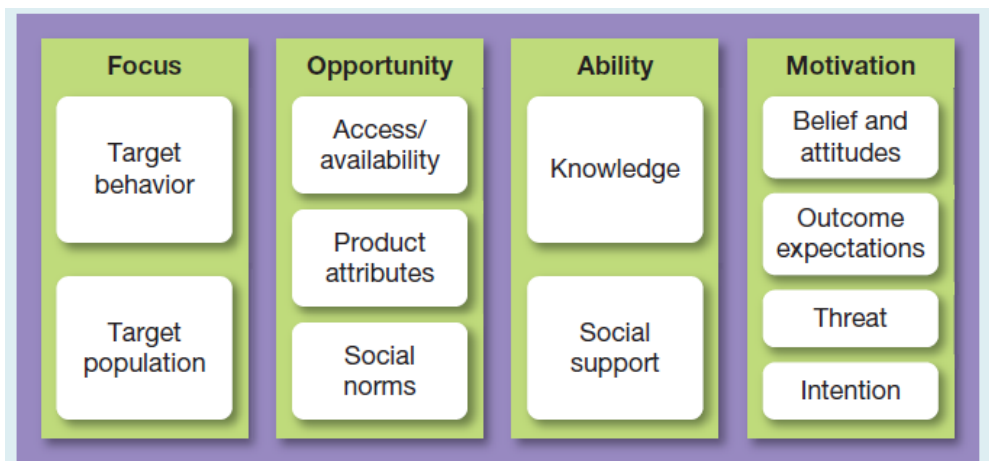
FOAM—which stands for Focus on Opportunity, Ability, and Motivation—is based on behavioral determinants that either promote or constrain behavior change.

- ❖ Focus is about clarifying the target audience; it reminds the practitioners to define the target audience and desired behavior
- ❖ Opportunity is about determining that the individuals we are addressing have the resources to perform the promoted behavior. Here we address institutional or structural factors that influence an individual's chance to perform a behavior. Determinants within Opportunity

include: access/availability, product attributes, and social norms.

- ❖ Ability is about ensuring the individual has the skills and proficiency to perform the desired behavior. Determinants within Ability include: knowledge and social support
- ❖ Motivation has to do with influencing the individual to want and desire to perform the promoted behavior. Here we address the drives, wishes, urges, or desires that influence an individual to perform a behavior. Determinants within Motivation include: attitudes and beliefs, expectations, threat, and intention.

FOAM Framework



Communications actions can certainly address all aspects of FOAM but are most relevant with motivation and ability. SBCC practitioners might be able to demonstrate how to wash hands with soap and teach people the skills and perhaps communicate where to buy soap from but if the soap is not available, individuals will not have the opportunity to act on their understanding.

EXAMPLE: Communications Objective:

- ⇒ Increase the proportion of target audience who agree that it is shameful not to use a latrine (attitude) from 56% to 70%
- ⇒ Increase the proportion of target audience who believe that it is shameful not to wash hands after using the toilet) from 40% to 70%
- ⇒ Increase the proportion of target audience who agree that it is shameful for a household not to own a latrine (attitude)) from 46% to 60%
- ⇒ Decrease the proportion of target audience who agree that it is normal behavior for someone not to wash hands after using the toilet) from 65% to 35%
- ⇒ Increase the proportion of households who agree that it is not acceptable for household not to have a latrine in this community (social norm)) from 36% to 70%
- ⇒ Increase the proportion of target audience who believe that they can save to construct a latrine (affordability)) from 35% to 60%

Communications objectives are therefore related to the anticipated changes in perceptions, beliefs and attitudes that the SBCC program might desire to have. For example, in Apac, the sanitation taskforce planned to increase the proportion of the target audience who agree that it is shameful not to use a latrine.

5.4 Craft messages

Under this section practitioners will learn that taking each target population's sanitation needs and situation into consideration, along with the initiatives that answer those needs, a theme and key messages must be developed to provide a framework around which focused communication activities can be planned. You will learn how to select the most appropriate channels i.e. mass media, interpersonal communication, traditional media, community-based activities and advocacy for a given message. You will in addition learn how to flight these channels in such a manner that they reinforce each other.

Communication concepts represent broad directions for a given campaign and provide guidance for how each element will be executed. Concepts should build on insights from the formative research and serve as a platform or umbrella for all campaign elements.

Positioning

For the campaign to be effective, it needs to have a central foundation upon which all messages are derived. This foundation is a positioning statement which specifies the unique selling point(s) or points of differentiation for the promoted behavior. Positioning helps you to design the campaign to meet an emotional need of your target group. And then 'managing' your campaign communication to always represent that benefit for your target. There are three parts to a positioning statement. For example, in Tanzania, a sanitation marketing campaign found that empowering households to change their sanitation status and propel them into taking action would depend on promoting the pride and status symbolism of owning a latrine and less about the fear of diarrhea..

The 3 parts of a positioning statement?

1. **Target**
2. **Frame of Reference (F.o.R.)** — the category of behavior you are talking about
3. **Points of Differentiation (P.o.D.)** — what makes performing the behavior unique
 - Functional
 - Emotional

A positioning statement therefore has the format: For (target) (behavior) is the (Frame of Reference) that (Point of Differentiation).

**FOR MARY,
WASHING HANDS
WITH SOAP
AFTER VISITING
A TOILET IS THE
CONSISTENT
PRACTICE THAT
MAKES HER
RESPECTED BY
HER PEERS**

The POD has two aspects. The functional POD and the emotional POD

Functional — the direct benefits that the audience gets after performing the behavior — such as not getting a disease, saving time and money, getting clean

Emotional — the indirect benefits the target audience gets from performing the behavior or by being associated with people who perform the behavior--such as enhanced pride, respect and status.

Developing a Key Messages

Once the positioning statement is developed, you can then develop key messages.

A key message is a short, concise statement of what you want the audience to understand from your communications. A summary of your communication objective. The core on which your ad agency or VHTs should build their concepts/discussion.

Key messages are the core of your communication activities. Key messages open the door to meaningful communications with your audience, because they bridge what your audience already knows and where you are trying to take them. Depending on the messages and target audience, it's important to identify which behavioural factors or communications objectives require promotional activities. Messages should then be developed that will impact the factors. There are generally two approaches to messaging; theme creation (or giving a set message to everyone) or personalizing the messages by segment. It is important to develop different key messages for different segments even with an overarching theme because different groups have different needs and see things differently.

Based on what research has identified as a critical influencer of behavior, a key message uses insight to craft a statement that brings together two parts:

1. Call to Action
2. A benefit for performing that action

Best Practices in Developing Key Messages

- ❖ Messages address most significant behavioural factors as determined by your SBCC plan.
- ❖ If addressing a new behaviour, use theme-based messaging (i.e., just get out there and do it!). If people have heard the behaviour before, however and are in the latter stages of change, highly tailored messages are critical for each segment of the audience
- ❖ Limit the number of messages delivered in one IPC session to maximum of two
- ❖ Pretest all messages and revise messages according to feedback
- ❖ Make sure they are clear, concise, and consistent.
 - Clear** — Free of jargon, devoid of technical language, and relevant;
 - Concise** — Deliver key messages in 7-8 seconds. That might be all the attention you get;
 - Consistent** — Messages must be repeated if they are to sink in
- ❖ Appeal to emotions. If you don't stir the emotions in your audience your messaging won't work. People will remember the way they felt long after they have forgotten the

EXAMPLE OF HOW TO MOVE FROM FACT TO INSIGHT TO MESSAGING

FACT: Hand washing with soap reduces diarrhea incidence by 40%.

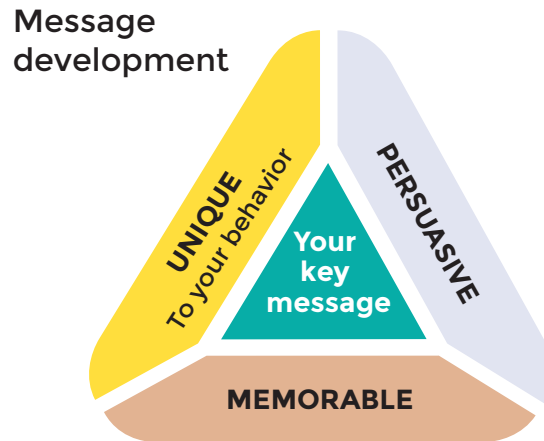
INSIGHT: Caretakers in Aduku perceive use of soap for hand washing as wastage of soap.

PERCEIVED BENEFIT OF BEHAVIOR: Pride of cleanliness vs Disgust of dirtiness.

KEY MESSAGE: You are as clean as your last activity. When you don't wash your hands with soap after visiting a toilet, you are a moving toilet.

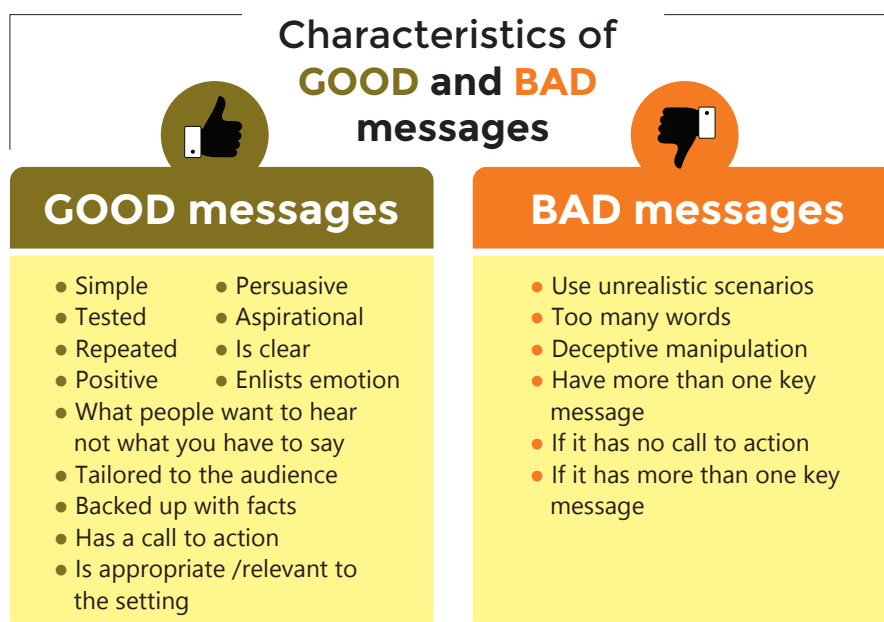
facts.

- ❖ Be careful with numbers. If numbers help you tell the story better, use them. But it is better to say "more than half" instead of 54%, about 2000 people sticks better than 1,898 people
- ❖ Leverage the magic triad--the rule of three. Things in threes are more aesthetically pleasing and easier to remember
- ❖ It should be unique to your behaviour and target audience
- ❖ It should be memorable and persuasive



Issues to consider when developing messages;

- How do you best communicate the issue?
- What is in it for them?
- What in the end, do you want people to feel or think?
- What do you say to evoke that feeling or thinking?
- What are the barriers and benefits to your audience thinking, feeling, or action on your project's issue?
- What is the most motivating, persuasive, attention-grabbing, and exclusive message?



Examples Key Messages Developed at the Co-Creation Workshop

Town Council	Key Messages
Aduku	<p><u>Accessing public latrine;</u></p> <ul style="list-style-type: none"> Consistently access and use a latrine, not some of the time. Even a little open defecation causes disease outbreaks to the community A person who accesses and uses a latrine is one the pride of his/her family. Everyone loves a clean hero. <p><u>Hand washing with soap;</u></p> <ul style="list-style-type: none"> Hands washed with soap after visiting a latrine are hands to be proud of Hands not washed with soap after toilet use are moving faeces Partners/ spouses who wash their hands with soap after latrine use maintain life-long intimate relationship. <p><u>Stopping open defecation;</u></p> <ul style="list-style-type: none"> Open defecation is a doggish behavior, shameful and lowers human dignity
Kamdini	<p><u>Open defecation</u></p> <ul style="list-style-type: none"> People who defecate in the bush are backward Open defecation is a shame to the entire family <p><u>Construction of pit latrine</u></p> <ul style="list-style-type: none"> Having a pit latrine is a pride to the family/home A home without a latrine is a sick home; a healthy home is a home with a latrine Having a latrine saves money that would have been spent on hospital bills and increases economic development of the family <p><u>Hand washing after the use of toilet/pit latrine</u></p> <ul style="list-style-type: none"> Not washing your hands after visiting the toilet is as good as you walking with the toilet Hand washing reduces the spread of diseases A home with a hand washing facility is seen as a model home and an agent of good sanitation practice
Apac	<p><u>Pit latrine ownership</u></p> <ul style="list-style-type: none"> A home with a pit latrine is a pride to the owner. Construct a pit latrine and use it. Real men own a pit latrine. They don't allow dog like behavior in their homes Open defecation is a shame to the family. Children without latrines at home face ridicule at school A pit latrine can be constructed using the locally available materials. Apac town council does not allow anymore open defecation in the community <p><u>Hand washing facility</u></p> <ul style="list-style-type: none"> Hands washed with soap is a pride Hands washed with soap remains clean, smooth and soft The entire Apac town council is united behind hand washing, don't be left

	<p>out</p> <ul style="list-style-type: none"> • Hand washing with soap is not a waste of time. If you don't wash with soap, it's like you haven't washed. • Provide a hand washing facility with clean water and soap for your family to use • Ash can be used as an alternative for soap. Washing hands with water only doesn't make one fully clean. To be fully clean, wash with soap or ash <p><u>Cleanliness of pit latrine</u></p> <ul style="list-style-type: none"> • No flies, no smell. Always keep your latrine clean • Have a clean a pit latrine to have a beautiful home. • You are as clean as your pit latrine • Always keep your pit latrine in a clean state. Cleaning a pit latrine is not a punishment but a sign of cleanliness and responsibility • Set aside a specific time to clean your latrine everyday
Oyam	<p>Household Heads</p> <p><u>Behavior: Construct a pit latrine for your home</u></p> <ul style="list-style-type: none"> • Construct a pit latrine in your home in order to prevent diarrhea to make your family healthy and rich • Heads of households that have pit latrine in their homes have healthy family and are respected • Constructing a pit latrine at home makes the family healthy and modern <p>Mothers of children under five years of age</p> <p><u>Behavior: Use Pit latrine and not open defecation</u></p> <ul style="list-style-type: none"> • Mothers that use a pit latrine have healthy babies • Dispose off all feces including that of children in a pit latrine for a healthy and productive family • Breast feeding mother who use a pit latrine keep their babies free from diarrhea and are respected by their peer <p>Head Teachers</p> <p><u>Behavior: Have enough pupil stance ratio</u></p> <ul style="list-style-type: none"> • Head teachers who have clean and enough pupils' stance ratio in school keep their pupils free from diarrhea, healthy and better performance. <p><u>Behavior: hand washing</u></p> <ul style="list-style-type: none"> • Head teachers who have hand washing facilities at school have healthy and better performing pupils • Head teachers who encourage their pupils to wash hands after visiting the latrine have healthy and better performing pupils • Washing hands with soap after visiting the latrine keeps you clean, healthy, and respected

Developing a Creative Brief

The most critical early step in developing materials is to develop a creative brief (also referred to as an ad agency brief, communication brief). The brief lays the foundation for the communication campaign's design and will serve as the main reference document for both the campaign manager and the advertising agency.

A good creative brief contains:

Agency objective: This summarizes the overall purpose (such as to develop or broadcast a campaign).

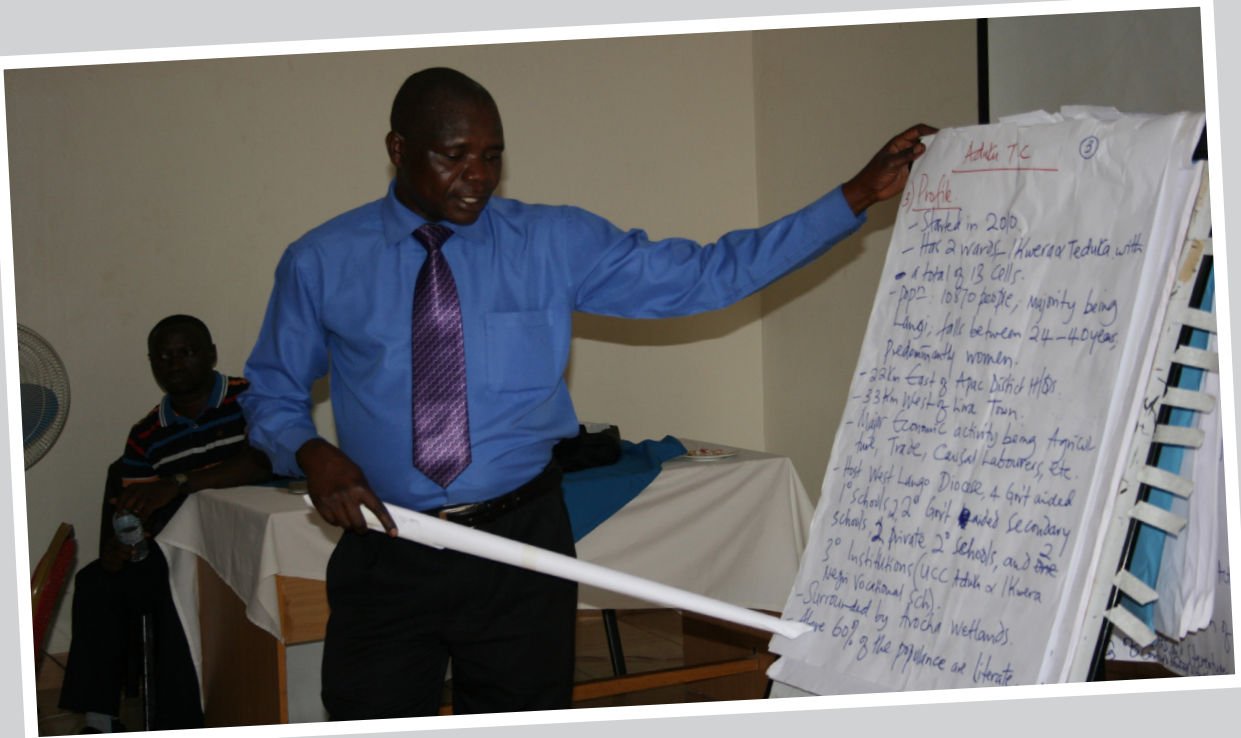
Context and description of problem: Relevant statistics/data (for instance, open defecation rates) and key insights from the formative research (when available) should be highlighted in this section as well as extracts of any government communication strategy.

Behavioral objectives supported by the communication campaign: These should be consistent with goals identified earlier (for example, improve sanitation facility).

Target audiences: Who is being targeted by this campaign and what are their main characteristics. Demographics and psychographic information should be included.

Communication objectives: Informed by the formative research, these objectives represent how the target audiences will feel and what they will know or believe as a result of being exposed to this campaign. For example, if the formative research revealed that low awareness of toilet options is associated with unimproved sanitation, a communication objective could be to bolster awareness of particular options.

The brief should also specify considerations such as tone (dramatic, humorous, and so on), approach (such as entertainment-education), and collaboration with stakeholders.



6.

SBCC APPROACHES THAT WORK

OVERVIEW

In this section you are introduced to the various SBCC approaches that work. You will learn that unique approach characteristics and inherent strength and will appreciate when to use which approach for maximum effectiveness and how to combine the various approaches to maximize impact. You will be better able to select appropriate approaches to deliver the message in the most effective manner to the intended audience.

SBCC Strategic Approaches

The strategic approaches describe how the objectives will be achieved. They will guide the development and implementation of activities and will determine the vehicles, tools and media mix that your team will use. Within each approach, you will have multiple vehicles, use various tools and rely on a mix of activities to communicate to your audience(s). The approaches will convey your messages, be mutually reinforcing and be the routes of message delivery. Some of the approaches include the following;

6.1 Social Marketing

Social marketing is a process for creating, communicating, and delivering benefits that a target population desires in exchange for adopting a behavior that profits society. It can also be described as the application of commercial marketing techniques to change behaviors to improve health. In any social marketing intervention, a specific behavior is targeted for modification

or adoption for the benefit of society as a whole. For example, to improve rural sanitation, individuals and the community as a whole must stop the practice of open defecation, acquire and use a hygienic sanitation facility, properly maintain sanitation facilities, and properly dispose of children’s excreta. A complementary hygiene behavior is handwashing with soap after defecating or handling feces.

Key Features of social marketing

- ❖ Consumer oriented--the customer/target audience is at the centre of planning
- ❖ Behavior focused
- ❖ Mutual and beneficial exchange. The cost of doing the behavior is explored and explained relative to the value of the benefits obtained
- ❖ Market segmentation--the campaign tackles one segment at a time
- ❖ Marketing mix--the campaign uses a multiplicity of avenues to reach the audience
- ❖ Research--it is grounded in research

6.2 Sanitation Marketing?

There is yet no broad consensus on what sanitation marketing is. Some practitioners define sanitation marketing as strengthening supply by building capacity of the local private sector; others discuss it in terms of “selling sanitation” by using commercial marketing techniques to motivate households to build toilets.

Who can be involved in sanitation business?

- Local entrepreneur / manufacturer
- Shop owners
- Sanitarian
- Village cadres
- Artisan
- Village / users
- Local banks



Mass media:

Mass media means technology that is intended to reach a mass audience. It is the primary means of communication used to reach the vast majority of the general public. The most common platforms for mass media are newspapers, magazines, radio, television, and the Internet. The general public typically relies on the mass media to provide information regarding political issues, social issues, entertainment, and news.

It can raise awareness at the institutional, community, and individual levels and is particularly appropriate if the campaign is aimed at improving knowledge around a particular issue. In addition to developing traditional spots, you can insert key messages into existing or planned programming such as dramas, soap operas, or talk shows. Newspapers can reach policymakers. .

6.3 Social Mobilization

Social mobilization brings relevant sectors such as organizations, policy makers, networks and communities together to raise awareness, empower individuals and groups for action, and work towards creating an enabling environment and effecting positive behavior and/or social change..

6.4 Interpersonal communication (IPC)

Interpersonal Communication (IPC) is any face-to-face interaction with a target audience with the objective of changing their behavior. IPC generally refers to face-to-face interactions with a given community, end users or health care providers. IPC formats can include small group interactions, one-on-one and larger forums. It is often done by trained IPC agents such as village health teams (VHT).

When to use IPC?

IPC is a resource intensive medium that often has limited reach and coverage. Doing it at scale is expensive and demands complex supervision and administration. For those reasons, it should only be used strategically.

Good reasons to use IPC

- ❖ To reach populations that are not exposed to other media
- ❖ To move people from interest to trial (like sampling efforts)
- ❖ To reach specific audiences (i.e. men who have no toilets)
- ❖ When the remaining barriers to behavior adoption are inherently personal and require personalization
- ❖ To conduct demonstrations — this could include skill building such as building tippy taps or proper hand washing
- ❖ To create networks of immediate social support (e.g. women's group)

IPC is often carried out by Village health teams (VHTs). It is one of the few channels that allows for two-way communication with the household, in small group settings, or face-to-face, with opportunities to clarify and ask questions, and is suitable for building skills, and for joint problem-solving. Other media channels should be used to confirm and support information provided through IPC efforts.

6.5 Direct Consumer Contact (DCC)

This involves community events that communicate key behavior change messages using experiential marketing drives.

Choosing the appropriate approach

Within each channel there are a range of options to consider. Print materials are often appropriate for health workers, trained volunteers, and policymakers. Low literary materials relying heavily on illustrations can provide useful reminders and reinforce messages conveyed through interpersonal communication or DCC. For example, counseling cards have pictures on the front to illustrate recommendations and questions on the back to facilitate discussions between the counselor and the families. These can also include suggestions for how to negotiate small improvements in sanitation practices.

Refer to findings from formative research and information to help determine the most appropriate approaches. The context of the situation can help determine opportunities for possible approaches as well as limitations to what can or cannot be used. Based on this determine which approaches will best reach intended audience(s). Additionally, consider the types of messages which will be used; which approaches are the most appropriate for conveying these messages?

Key questions to ask before choosing an approach

- What would the intended audience find most appealing?
- What will best influence the intended audience?
- What would be most effective in motivating change? Who does the intended audience trust?
- What would be most credible?
- What will best reach the intended audience?
- What will achieve the greatest impact?
- What times are best for the audience?
- If mass media will be used, when is the audience most likely to tune in? (listening to the radio, accessing the internet, logging into on-line social networks)
- If community-based approaches will be used, when is the intended audience available? Are there already established community-events on which you can piggy-back activities?



7.

DEVELOPING ACTIVITIES

In this section, you will learn how to state actionable activities. These will cover both inter personal and mass media channel activities. Activities such as television or radio spots material in brochures, posters, flip charts, picture codes or comics—or in-person, by health workers, peer educators, counselors, or other trained personnel, musical or dramatic performances and community events. Mass media, interpersonal communication (IPC), and direct consumer contact (DCC) are three channels that are typically used to reach target audiences.

EXAMPLES OF ACTIVITIES TO COMMUNICATE SANITATION MESSAGING

- Developing posters
- Conducting road shows
- Holding community dialogues
- Conducting drama shows
- Holding media interviews
- Holding advocacy meeting
- Holding market day promotions
- One on one sessions
- Holding small and large meetings
- Hold town council cleaning initiatives
- Developing radio messages (spots, serial dramas, presenter mentions, sponsorships)
- Holding radio talk shows
- Organizing events such as sanitation days

7.1 Developing IEC materials

7.1.1 Concept testing

Concept testing ensures that themes, messages and activities reach the intended audiences. You will learn about this critical step in the campaign development process and appreciate that it is important to pre-test at every stage with all audiences for whom the communication is intended.

Social and behavior change communication (SBCC) materials need to be tested before they are finalized. This is an essential step, particularly for materials and activities that aim to reach lower literacy audiences. Testing SBCC materials and activities helps to confirm that they are effective, appropriate, understandable, attractive, and culturally relevant. It involves getting input from members of the intended audience on proposed formats of new materials and on “big ideas” or concepts. Testing allows SBCC practitioners to gather feedback from intended audiences, who may suggest alternative formats and identify confusing or unclear content. Revisions can then be made that make it more likely that SBCC materials and activities will be effective. It is much easier and more cost effective to revise materials or activities at this point, than after they are finalized and disseminated.

Criteria on which to test concepts

Comprehension

- ▶ Do target audiences understand what is being shown or heard?
- ▶ What do they not understand?
- ▶ What changes would make materials more comprehensible?

Attractiveness

- ▶ Are materials appealing from a visual or auditory viewpoint?
- ▶ What would make them more attractive?

Acceptability

- ▶ What do audiences like or dislike about the materials and why?

Identification

- ▶ Do the target audiences personally feel concerned by the materials? If not, why and what changes would make them relate more to the materials?

Persuasion

- ▶ How convincing are the materials and why?

What to do when Pretesting

When concept and pretesting materials and activities with lower literacy audiences follow these best practices:

- Assure participants that they are not being tested, but instead that the material is being tested for its effectiveness.
- Encourage participants to be open and eliminate their fears about being criticized if they provide negative feedback.
- Show only one material at a time, preferably visuals first and then words.
- Use interactive activities when possible, and change the pace of testing to keep participants engaged and interested.
- Use a trained facilitator who speaks the local language, is culturally sensitive, and especially, who knows how to put slower readers at ease.
- Use a trained note-taker who speaks the local language.

Sample Concept Testing Questions

Step 1: Audience perceptions of their lives and key motivators

- ⇒ What do you like in your life?
- ⇒ How do you see the future?
- ⇒ What influences people like you to make changes in the way you live your life?

Step 2: Audience opinions of the concepts presented

- ⇒ What's your general reaction to this draft?
- ⇒ Can you describe what you see in this picture?
- ⇒ For whom do you think this material or activity is meant?

Step 3: Audience rating of the best concept

- ⇒ Which of the concepts do you find most attractive?
- ⇒ Which one do you think is easiest to understand?
- ⇒ Which one do you think shows a situation closest to your life?
- ⇒ Which one presents the most believable message?

Sample Pretesting Questions

- What is the main idea of this brochure, radio spot, or other type of material?
- Is this material for people like you or for other people?
- Is there anything about the material or product that might confuse, offend, or

embarrass some people? What, in particular?

- Is there anything in the material that you really like? Which part? Why?
- Is there anything in the material that you do not like? Which part? Why?
- Is the information/scenario/story believable? Why or why not?
- Do you think the material is attractive or appealing? Why or why not?
- What do you think can be done to make the material better?
- Do you think this material will help people? How

What to do with the pretest results

1 Review findings within the team and decide what needs to be addressed. Keep in mind that pretesting is not a democratic voting process.

2 Meet with the ad agency or the development team to discuss ways to address these changes and remain involved in identifying possible solutions.

3 Consider a new round of pretesting if significant changes are made. However, the scope of research questions can be diminished (for example, perhaps attractiveness has been sufficiently covered).

7.1.2 Production and Dissemination

Production represents the final stages of getting the materials ready to use. For example, for audio-visual productions, this can be done by reviewing and signing off final copy and viewing rough edits. For printed materials, quality control can include proofreading as well as verifying that visual guidelines (such as brand or logo colors) are being followed.

Unless a full-service agency is taking care of this step, an affordable but high-quality print or duplication company needs to be identified and asked to estimate what it will charge for making the required number of print or audio copies of the adapted material. It is often a good idea to get estimates from more than one company.

The number of copies to be produced needs to be calculated and a distribution plan devised, along with a system that tracks distribution. At a minimum, the plan should detail distribution points, how many copies of the material or product will be sent to each, and who will be responsible for distribution. Implementing partners and community mobilizers can be trained on how to disseminate and use the material

BASIC DESIGN PRINCIPLES

Many of these guidelines were originally developed for print material; however, they can translate to other media as well.

General design principles:

- Make an emotional appeal before you convey facts. Research indicates that people often feel before they think when presented with something new; they have an emotional reaction to something first, and this shapes how they think about it later.
- Stories are easier to remember than facts; personalize numbers or statistics to make them memorable.
- Use a headline or an opening statement that encourages the audience to keep paying attention. Some of the ways you can do this are: appealing to the reader's self-interest; arousing curiosity; using breaking news. Keep the headline short and use questions whenever you can.
- Showcase the product/behavior. Be sure that the product/behavior is visible and that packaging is highlighted in a way that supports perceptions of quality.
- Reflect the brand personality.
- Highlight the benefit through both spoken words (or text) and visuals.
- Engage the audience: Pose questions directly to the audience; use a "narrator" and engage the audience in a personal story

SEVEN CS FOR MATERIAL DEVELOPMENT

- ① Command attention
- ② Clarify the message
- ③ Communicate the key benefit clearly
- ④ Cater to heart more than head
- ⑤ Consistency counts
- ⑥ Create trust
- ⑦ Call to action

Text/Copy:

- Text should be in consistent (or complementary) font.
- Font should be appropriate to the audience (e.g. no Comic Sans for adults).
- Avoid excessive text.
- Placing a headline over a photo (or colored background) can make it difficult to read. This is especially true if the photo is different colors.
- Highlight key text using colored banners, text boxes, bolding, etc.

Illustrations and graphic design:

- Provide a clear path for the eye to follow. It should be clear where you want the viewer to look first. This can be a headline or a photo, but should never be both.
- After looking at a photo, most people look down. For this reason, placing a headline below a photo rather than next to it is usually preferable.

- Placing a headline over a photo can make it difficult to read. This is especially true if the photo is different colors.
- Dividing a material into different section stops the eye from flowing over the page.
- Ideally, the eye will stop at some kind of response mechanism: a web address, information on where to buy a product, etc.

Photos:

- Black and white photos suggest deeper meaning
- Color photos excite the eye
- Monochromatic photos are the least attractive to the eye
- A model making eye contact makes a stronger impression than one gazing off center
- People generally prefer images in which they can see the entire model, so it is best that the image is not cut off.
- Babies are strong attention-getters

Additional guidelines:

- Try to avoid mixing photographs and illustrations. If you do so, be sure that there's a clear stylistic linkage between the two.
- All drawings in a given material should be by the same artist or in a very similar style. If they look different, the reader will notice, and register the material as unpolished.
- Make photos or drawings stand out by adding a contrasting border.
- Be sure that your background contrasts with your central image and is dynamic. One way that this is often done is using shading.
- Use primary colors when possible, especially in formats that the viewer will process quickly
- Limit your visuals to a few high impact colors.

CHECKLIST FOR CRITIQUING RADIO ADS

Item	Yes	No	Comments/Suggestions for Revision
General			
Are messages short and simple – one or two key points?			
Is language and style appropriate for key audience?			
Has the main message been repeated enough times?			
Does the ad recommend a specific action?			
Is the main benefit to the target audience clearly stated?			
Does ad provide new, accurate, straightforward information?			
Are language and style considered relevant by target audience?			
Is the message presenter a credible source of information – celebrity, authority, role model?			
Is the message presenter appropriate in appearance, level of education, gender, etc for target audience and message?			
Development			
Is the approach selected appropriate and unique? (testimonial, slice of life...)			

Does every word work?			
Are the slogan, theme, music and sound effects memorable and likely to aid recall?			
Are messages consistent with other campaign messages and formats?			
Appeal			
Is the opening attention grabbing?			
Is there an emotional appeal?			
Is the solution as well as the problem emphasized?			
If using a light, humorous approach, is it considered appropriate by target audience?			
Audio			
Is the audio clear and consistent?			
Is the volume of sound effects and music appropriate?			
Timing			
Is the main issue identified in the first 10 seconds in an attention getting way?			
Is the ad 45 seconds or less?			
If there is a call, service center mentioned is the number/location clearly mentioned?			
Is the main point/message summarized at the close?			

STORY TELLING GUIDE

Practitioners in the field may find an interesting story that they can use to promote the campaign or to showcase as a case study for others to learn from. The following questions can be used as a guide to help you develop your story idea.

You may want to video your conversation with the subject--person giving you a testimony, or whose story you are telling. If so, allow the subject to speak without interrupting or without adding commentary (so that video is usable and can be properly edited). Also get shots of the subject in their daily life.

1. Who is/are the main character(s) in your story?
 - a. What is his or her name?
 - b. Age?
 - c. Where do they live? (describe their living condition)
 - d. Do they have a family, if so, please describe? (names, ages, characteristics)
 - e. Are they employed, if so what do they do? (what do they earn if it's relevant to the story)
 - f. What makes this person compelling?
2. What is the sanitation challenge that the characters in your story are dealing with?
3. How are you/your organization helping them?
4. Is there something unexpected or surprising about the story?

(e.g., Is this the first time you've launched a campaign in this area/has the person overcome a significant obstacle and is now helping others through the same struggle?)
5. What is the emotional aspect? What inspires you about this story and the characters in it?
6. How can you prove that the story is a real success? (e.g., statistics/studies/health impact reports)
7. What do you think is the overall message or lesson learned in the story?
8. How do we contact this person again (for possible media enquiries, further story development, etc)
9. Please have the person(s) sign a release form consenting to sharing their story.
10. Please include 3-5 photos of the person (minimum 300 dpi)
11. Who are the stakeholders who have contributed to this success?



8.

CAMPAIGN EXECUTION

In this section, practitioners will learn that during implementation all elements of the strategy go into operation in a coordinated manner. You will learn that timing and coordination are key to managing a sanitation SBCC campaign effectively.

8.1 Developing a workplan

A work plan is a tool to help you plan, manage implementation of, report on, and evaluate your sanitation campaign. An SBCC plan will determine the specific interventions that need to be developed.

The Project Workplan will help you

- To plan
- To manage implementation of your project by enabling you to track implementation against expectations.
- To report on your progress in implementing the project
- To evaluate outcomes by identifying the indicators you will use to assess whether outcomes are achieved,
- To formulate campaign grant budget.

Components of a workplan

- Activities to be accomplished
- Expected output
- Inputs needed
- Timeframes
- Responsible person
- Source of support

8.2 Recruitment of interpersonal communication agents

Interpersonal communication agents are people who are likely to have the skills required to be Hygiene Promoters include individuals with training and experience in healthcare, health promotion, community development, social work, education, extension work etc. They require strong people management skills and an ability to relate effectively to the affected community. Such people may have key roles in the public, commercial, and non-governmental sectors in normal times and care should be taken to avoid undermining the capacity of these sectors when recruiting Hygiene Promoters. It may be possible to negotiate secondment arrangements with long-term employers for the duration of the emergency, whereby staff return to their normal posts after an agreed period. Hygiene Promoter posts may be advertised by word of mouth or by written advertisements on flyers or in local newspapers. Advertisements should specify exactly how applications should be made and what documents should be produced in support of the application. Whatever method is chosen, there are often a very large number of applicants, and arrangements should be made to inform unsuccessful applicants. Short-listed candidates should be interviewed by a panel of at least two people, including the Hygiene Promotion Coordinator and another staff member who knows the context well..

Community Mobilisers Community

Mobilisers should be recruited from among the affected community if possible. However, it may be necessary, for speed or other reasons, to recruit Mobilisers from outside the affected community. Suitable candidates include people with experience in community health, education, or development. Again, care should be taken not to take essential staff and volunteers away from other essential activities. This particularly concerns community health workers and teachers. Reasonable efforts should be made to have a gender balance and representative mix of people from different social and ethnic groups in diverse populations. Community Mobiliser positions may be advertised by word of mouth or by posting information at public places such as healthcare facilities, distribution points etc. Again, many applications should be expected and a system should be in place to short-list promising applicants and inform unsuccessful ones. Short interviews should be carried out by the Hygiene Promotion Coordinator and at least one Hygiene Promoter. During the interview the candidates should be given clear information about the reward/incentive system that will be used, to avoid disappointment and loss of motivation later on.

8.3 Management of interpersonal communication agents

Job descriptions should be developed and or reviewed early in the work period to ensure they are fully understood and that they provide adequate guidance for hygiene promoters. The VHTS/ Hygiene Promoters should be assigned specific geographic area of responsibility. The most

practical arrangement is for them to work in the ward in which they live, but this may not always be possible.

The VHTS/Hygiene Promoters should be given intensive training at the start of the campaign. Once deployed in the field the VHTS/Hygiene Promoters should be given intense day-to-day supervision and on-the-job training by the supervisors. This will commonly involve a daily meeting at community level and accompanying them occasionally as they do their work. From time to time VHTS/Hygiene Promoters should be brought together for modular training (for instance, a half-day session on demonstrating hygiene behaviors or adult learning), review of activities, and experience or planning. These meetings are important for developing and maintaining team cohesion and a common understanding of the campaign.

Compensation of interpersonal communication agents

In most cases VHTS/Hygiene Promoters have volunteer status, without a formal remuneration plan. They thus need to be rewarded, compensated and encouraged for their work in many ways, including the following: – payment of a days allowances to cover costs incurred during their work, provision of a meal on working days, provision of materials and equipment that can be used outside the programme (e.g. a bicycle or wet-weather clothing); – training courses with refreshments and certificates, particularly if training courses fit into a recognized national or organizational system of qualifications; – the opportunity to learn and progress within an organization, potentially to secure paid employment in a more formal role. All staff and volunteers must be provided with a written agreement that lays out the expectation and obligations of the implementing agency and the person concerned.

Roles of interpersonal communication agents

VHTS/Sanitation Promoters carry out the day-to-day hygiene promotion activities. They work by establishing a relationship with community members.

Must Dos for successful IPC

- Each IPC agent receives some time at least once a month where their supervisor accompanies their activities in the field (observes at least one session) and gives them feedback on their technical accuracy, communication skills, communication effectiveness and adherence to strategy.
- IPC Supervisors have no responsibilities other than supervising IPCs and related activities such as paperwork, strategy sessions and trainings for themselves.
- Supervisors regularly access field reports and closely follow how their teams and individual IPCs are performing.
- Supervisors have demonstrated technical competence in sanitation and communication skills; understand what makes communication effective and how to give feedback.
- IPC Supervisors receive feedback at least quarterly on how to improve on their own supervisory skills.
- IPC teams and supervisors meet regularly to improve activities and learn from one another.
- After new skills or strategies are introduced, IPC agents receive increased feedback (each IPC agent benefits from at least 3 feedback sessions on the new skills in the 2 months following the training).

8.4 Mass Media

When buying media it is important that you evaluate media reach, station formats and pricing rates, plus demographics and psychographics relating to the campaign objectives.

What to consider when buying media

1. Consider the media type you're considering (radio, digital, etc.) and understand what "currency" is used to buy that particular medium (e.g., rating points, impressions, views, clicks, spots, # of locations, etc. — each medium is different).
2. What demographics does the media you want to buy reach? You'll need to have a thorough understand of your target audience first, in order to know whether they are likely to use that particular medium.
3. Next up would be the costs - comparing each vehicle to every other vehicle on your plan in terms of their CPM (the cost to reach 1000 members of your intended audience). This will enable you to be cost efficient.
4. You'll also want to consider added value — what is the vehicle offering you as extra free/bonus things for making a buy with them (additional spots, a custom ad unit, more impressions, etc.).
5. Engagement and attention levels are other things you should consider for your media buys. Are they giving you a favorable timing when your audience is fully engaged?

Building relationships with the media

Effective mass media campaigns are a key part of because they are effective behavior change tools. Having access to the masses helps to keep your message on the mind of the audience. But you may not always have the money to buy media. Building a good relationship with radio station and TV stations for example can help you get free coverage.

Take advantage of opportunities to nurture a positive relationship with the media.

- ❖ **Periodically send them new information** or items of interest to remind them that the coalition is a good resource.
- ❖ **Stay in touch:** Compliment the media when they do an accurate, thorough story or positive editorial about a priority issue of yours.
- ❖ **Be consistent:** Develop key message points so that you always deliver consistent messages about the importance of sanitation. Update these messages regularly to remain relevant to emerging news stories.
- ❖ **Identify key stakeholders and partners** who can serve as effective spokespersons so that the group can build a uniform presence with the media.
- ❖ **Offer other contacts:** You can demonstrate your value as a media resource by recommending other reliable contacts who will add credibility, reinforce your messages and complement your campaign mission and objectives.
- ❖ **Help reporters do their job:** Keep in mind that the media rely on people like you for story

ideas, timely information and access to interview subjects, usually under tight deadlines.

- ❖ **Give the media a "heads up":** Reporters appreciate receiving tips to develop their own stories, but they need advance notice of an event in order to do so.
- ❖ **Become indispensable:** When reporters recognize you as a valuable source for sanitation stories and commentary, they are more likely to pay attention to your suggestions and views.

MEDIA TIP:

BECOME A RELIABLE, QUOTABLE SOURCE

After the initial introduction to the media, you will need to work at building and maintaining personal relationships with journalists. These relationships will help get the coalition's name in the news, spread key messages and make it more likely that events and activities gain media attention.

You should view your relationship with the media as a partnership. You want to reach decision-makers and the public, and the media provide access. The media want to report news and capture the public's attention, and you have important information.



9.

MONITORING & EVALUATION

In this section, you will learn about the importance of developing and implementing a plan for monitoring and evaluation. You will appreciate that monitoring is part of the ongoing management of communication activities and should focus on reach. It helps you to answer the question, are adequate numbers of the audience being reached over time? Is the message we are giving out being understood? Is it leading to change?

You will also learn about importance of SBCC evaluation. Through evaluation you will be able to know the changes in knowledge, attitudes and reported behaviors relative to the communication behavior change objectives..

Monitoring

Monitoring tracks and measures a campaign's activities—what it is doing, where, with whom, how much, and when. For an SBCC program, monitoring tracks and measures progress being made toward achieving communication objectives. Two elements are monitored: the program process, or the scope of activities that use resources to achieve expected results—e.g., the number of training sessions and/or focus group discussions conducted and the number of outreach activities initiated. This monitoring includes the quality of activities—e.g., whether all training objectives were met. The second element monitored is program outputs, or the results obtained through these activities—e.g., the number of participants trained, tippy taps distributed, or outreach contacts made.

Evaluation

Evaluation is data collection at discrete points in time to investigate systematically an SBCC program's effectiveness in bringing about desired change in an intended population or community. Evaluation enables an SBCC program to determine whether its theory of change was accurate and whether the communication strategy and activities were effective.

Evaluation requires a comparison of variables and the measurement of changes in them over time. It measures what has happened among intended audiences as a result of program activities and allows SBCC practitioners to answer questions such as:

- Were barriers to social and behavior change reduced by our efforts?
- Were these changes meaningful for our program?
- How good a predictor is our theory of change?
- Have we achieved our communication objectives? Some SBCC programs evaluate both outcome and impact.
- Outcome — short-term or intermediate results obtained by executing program activities
- Impact — long-term effects (e.g., change in health status) measured through special studies with wide district, regional, or national coverage

Re-planning

The practitioners will learn that as programs evolve, audiences of interest acquire new knowledge and behaviors, and communication needs may change. The needs of target populations must be periodically reassessed to understand where they stand along the behavior change continuum. They will be supported to appreciate that day-to-day monitoring will provide information for making adjustments in short-term work planning and that periodic program reviews can be designed to take a more in-depth look at program progress and larger-scale adjustments or redesign.

At this point, M&E activities have been conducted and data analyzed and interpreted. Now the task is to see if the results can be used to improve the SBCC program. This is a critical point in M&E efforts. After all this work, findings should be used! M&E data can be shared in any number of ways to benefit the current program, future programs, and the lives of program beneficiaries. Once analyzed and interpreted, the results should reach those who can make good use of them. The monitoring data can inform practitioners about how well they implemented the program and provide reasons why it may have gone off course.

These findings can be used to:

- ❖ Modify approaches to serving the intended audience(s)
- ❖ Increase access to program activities and services
- ❖ Improve program delivery and reallocation of resources

Understanding the adequacy of staffing patterns and resource allocation can provide useful information for current and future SBCC planning.

The evaluation data convey an idea of whether the program was effective and how well it addressed barriers to social and behavior change.

- If there have been no changes in any identified barriers, the wrong ones may have been chosen. The barriers identified during the situational analysis may need to be revisited.
- If no targets have been reached, Step 1 may need to be revisited. The wrong strategy (BCC, social mobilization, advocacy) have been used, the wrong barriers identified, and more research may need to be conducted with the target population.
- If there are static results (where change was achieved quickly but not maintained), a new communication strategy may need to be considered.
- If the entire target population is being reached but only one group within it is changing, there may be a need to review how well the communication material appeals to other sub-populations or groups.



10.

LEADERSHIP AND MANAGEMENT

The practitioners will learn that a useful way to plan for human resources needs for Hygiene Promotion is to start by estimating the number of Community Mobilisers required. At least two Mobilisers per 1,000 affected people should be allowed for. They will also learn people who are likely to have the skills required to be Hygiene Promoters include individuals with training and experience in healthcare, health promotion, community development, social work, education, extension work etc. and require strong people management skills and an ability to relate effectively to the affected community. In addition they will appreciate that management Hygiene Promoters should be managed according to the normal policies and procedures of the implementing organization.

10.1 Stakeholder Engagement

Leaders and influencers from government, civil society, and the private sector play an important role in the success of a sanitation campaign. As their influence evolves, campaigns must take a strategic and structured approach to stakeholder relations.

Five-Step stakeholder engagement

- Set vision and level of ambition of future engagement and review past actions
- Define criteria for identifying and prioritizing stakeholders and select an engagement mechanism

- Focus on short and long term goals, determine logistics for the engagement and set the rules
- Conduct the engagement itself, ensuring equitable stakeholder contribution and mitigating tension while remaining focused on the issues
- Identify opportunities from feedback and determine actions, revisit goals and plan next steps for follow-up and future engagement

10.2 Advocacy and Lobbying

Advocacy is very important to the success of a sanitation campaign. Practitioners need to reach out to and collaborate with decision makers so as to change the way they choose to allocate resources in order to improve sanitation policies and processes.

What is advocacy?

The word advocacy has its origins in law and is defined by most dictionaries as the process of ‘speaking on behalf of someone’. Today it has evolved to include work undertaken by development agencies, civil society groups and individuals to bring about change. One writer has defined this as ‘the process of using information strategically to change policies that affect the lives of disadvantaged people’. Another calls it ‘advocating on behalf of the voiceless’.

Advocacy in this context encompasses a range of activities, all focusing on a process of change. This change may be in policies and laws themselves, in the implementation of these policies, or even in people’s awareness of the policies and their own rights. For example, advocacy work could be undertaken to change the policy of a national government to take greater account of communities’ rights to participate in the design and management of their water supply and sanitation services. In another case, such a policy may exist but government agencies and their contractors may not be implementing it or may not adhere to standards of implementation agreed, a situation again requiring a process of change through advocacy to ensure enforcement of policies.

On the other hand, local communities may not be aware of a change in policy and therefore may not be claiming the rights that they are entitled to, in which case advocacy work could be directed at changing levels of awareness and understanding about existing policy.

This process of change which advocacy aims to bring about can occur at different levels, from the local community level to the national and international levels. Change at one level may be necessary for change at another

Who makes the decisions: Participation of civil society, representation of community?

What is decided: Legislation, policies, budgets, programs, practices and how is it decided: accountability and transparency; participation of local communities to be affected How is it enforced or implemented: accountability, awareness rising.

An important aspect of advocacy work is the involvement of communities themselves in advocating for change. This is called by some agencies as rooted advocacy or people-centered advocacy. Advocacy work can therefore be defined as not only bringing about change in policies and programs (the ‘policy dimension’), but also:

Where to start? The advocacy planning cycle

Define what activities we want to undertake; and assign responsibilities for the tasks involved.

Good planning is as essential for effective advocacy work, as it is for field work or any other activity.

Planning and implementing advocacy work involves the following steps, sometimes termed the advocacy planning cycle:

- Identifying the issues: what do we want to change? Finding out more thorough analysis: analyzing the issue; analyzing the context and key actors; understanding the time frame
- Setting objectives
- Identifying the targets: who do we want to influence?
- Identifying allies: who can we work with?
- Defining the message
- Choosing advocacy approaches and activities
- Selecting tools Assessing what resources are needed
- Planning for monitoring and evaluation
- Drawing up an action plan.

PARTNERSHIP BUILDING AND COORDINATION

Partnership building and coordination of SBCC campaigns are critical to success. You will need to coordinate with crucial stakeholders such as policymakers, opinion leaders, community leaders, religious leaders and members of target populations.

10.3 LEADING BCC TEAMS

When leading teams, you will be faced with tasks that require a hand or two from everybody. After all, the result is for the team. Leaders help the team implementing the SBCC campaigns to stay motivated, to fully understand the big picture and to get things done. The team leaders therefore require a high level of coordination skills and an ability to 'navigate' for the rest, i.e. break down the big picture into tactics for every day actions and then following people up to ensure they do the work properly.

In order to keep the strategy on track, the leader should do the following:

- ❖ [Quarterly review: Organize quarterly review](#)



meetings with the sanitation taskforce

- ⇒ Review goals, plans, and progress
- ⇒ Discuss VHT performance and training opportunities
- ⇒ Review any M&E data and field reports and adjust campaign as needed
- ❖ Strategy update: At least twice a year, hold strategy review meetings
- ⇒ Discuss with sanitation taskforce the problematic communities, wards and areas that the team needs to focus on and the opportunities to get quick wins
- ⇒ Review completed activities and recent outputs/outcomes
- ❖ “Ride-alongs” in the field: Have sanitation taskforce supervisors visit VHTs and KOL in the field monthly to give them feedback on how they are doing
- ⇒ Set visit objectives and plans
- ⇒ Observe how they are using the talking points and whether the audience is getting the message
- ⇒ Provide post-visit feedback to the person
- ❖ COACH the person in the areas of growth

Effective Planning has many benefits

It helps you...

- Save time
- Spend your time most effectively
- Focus on and achieve long term goals
- Feel prepared for IPC conversations
- Learn from past experiences

It helps the target audience...

- Get the information they need the most
- Avoid spending time on activities that really are not important to them
- Change their behavior

ROLE OF A LEADER

The leader is both a leader and coach. You play a different role depending on the circumstances. Below are the different roles leaders play.

❑ Leader

Knows the operating context and environment very well, possesses an overview of entire team and key sanitation promoters in the territories. Formulate team strategies to lead to success, inform management of needs of project and realities on the ground. The leader builds a good relationship with the people on the ground especially through listening and getting to know what concerns them. They often ask, "How can I help you?" because they are there to serve and don't get hung on a position or title.

❑ Coach

A coach helps VHTs and other sanitation promoters to fine-tune communications skills, plan, develop strategies and tactics to improve field performance and increase effectiveness in reaching goals.

The Coach Asks

- What do you think went well during that discussion?
- What did not go well?
- Have you met the objectives you wanted to achieve in this visit/meeting/session? Why or why not?
- Were there any unexpected barriers that emerged today? How do you think you handled these?
- If you could repeat that visit, what would you do differently?
- Have you learned anything new about the people you were talking to today? If so, how does that change your plan for the next visit/meeting/session?

FIVE THINGS GOOD TEAM LEADERS DO

1. They define roles for everyone involved

Take a look at this scenario of everybody's job.

This is a little story about four people named Everybody, Somebody, Anybody, and Nobody.

There was an important job to be done and Everybody was sure that Somebody would do it.

Anybody could have done it, but Nobody did it.

Somebody got angry about that because it was Everybody's job.

Everybody thought that Anybody could do it, but Nobody realized that Everybody wouldn't do it.

It ended up that Everybody blamed Somebody when Nobody did what Anybody could have done

As a leader, make sure you define what everybody on the team is supposed to do.

2. They Address The Four Reasons Why People Don't Perform What Is Expected

When people don't do what is expected, they will say one of the following:

1. "I don't know that I am the one supposed to do it" This is goal setting issue. Spend time in a meeting outlining who is responsible for each activity.
2. "I know I am supposed to do it, but I don't know how". This is a skills issue. Plan to give training to your team
3. "I know I'm responsible, I even know how, but I don't want to." This is an attitude issue. Try explaining why the activity is important to the team and to that person.
4. "I know I am responsible, I know how, and I want to, but I have genuine obstacles." This is a problem solving issue. Help the person to navigate problems. Leaders have a higher problem solving muscle by virtue of their experience, authority and power. As a leader when you

3. They build strong relationships

If you can learn to understand people — how they think, what inspires them, how they're likely to act in a given situation — then you can motivate and influence them. Everybody wants to be somebody special, and everyone needs encouragement. By shedding self-importance and learning to listen to others, you can decipher their dreams and find ways to add value to them. Get to know your people deeply. Explore their dreams and aspiration. Explore their values. To be an encourager, believe the best about people and affirm them in what they do well. Thank them when they do a great job and be honest. Most people can sense when praise is phony, so be sincere and specific with your compliments. People will go the extra mile to affirm the confidence you place in them.

They want to prove that your faith in them is well founded

4. They are good Listeners

People hate feeling anonymous or ignored; they have an innate desire to be heard. By becoming a good listener, you are able to develop stronger, deeper relationships because you are meeting a need. By listening attentively, you show that you value and respect the speaker. When conducting meetings, make sure you listen intently. Practice these four critical skills.

- a. Maintaining eye contact.
- b. Not interrupting the speaker.
- c. Picking up on the emotions behind a speaker's words.
- d. Giving the speaker your undivided attention.

5. They Lead by Example and Have an Attitude of a Servant

The leader's critical role in building a team is to help the actors subvert their egos and realize what Ken Blanchard says "none of us is as smart as all of us". But that takes the leader to give up his ego first. If people realize the sanitation project, the results, the goal, and all its successes is all about you and promoting your name, you have lost them. Leadership is not about you. It is about the people you are leading... serving. Act with and cultivate humility. Help people with life issues not just work issues only. Lead by example; don't ask people to do what you are not willing to. Servant leaders are honest, credible, and can be trusted. They have impeccable character. They don't cut corners, they develop dependability and trust on the team—something you can count on.

TIPS FOR MANAGING A STAKEHOLDER'S MEETING

Meetings truly can be valuable and productive. You just have to take the steps to make them that way. Here are Seven Steps to Running the Most Effective Meeting Possible

- 1. Make your objective clear.** A meeting must have a specific and defined purpose. Before you send that calendar invite, ask yourself: What do I seek to accomplish? Are you alerting people to a change in team or a shift in strategy? Are you seeking input from others on a problem facing the team? Are you looking to arrive at a decision on a particular matter? Standing meetings with vague purposes, such as "status updates," are rarely a good use of time.
- 2. Consider who is invited.** When you're calling a meeting, take time to think about who really needs to be there. If you're announcing a change, invite the people who are affected by the announcement. If you're trying to solve a problem, invite the people who will be good sources of information for a solution. When people feel that what's being discussed isn't relevant to them, or that they lack the skills or expertise to be of assistance, they'll view their attendance at the meeting as a waste of time.
- 3. Stick to your schedule.** Create an agenda that lays out everything you plan to cover in the meeting, along with a timeline that allots a certain number of minutes to each item, and email it to people in advance. Once you're in the meeting, put that agenda up on a flipchart for others to see. This keeps people focused.
- 4. Take no hostages.** Nothing derails a meeting faster than one person talking more than his fair share. If you notice one person monopolizing the conversation, call him out. Say, "We appreciate your contributions, but now we need input from others before making a decision." Be public about it. Establishing ground rules early on will create a framework for how your group functions.
- 5. Start on time, end on time.** If you have responsibility for running regular meetings and you have a reputation for being someone who starts and ends promptly, you will be amazed how many of your colleagues will make every effort to attend your meetings. People appreciate it when you understand that their time is valuable. Another note on time: Do not schedule any meeting to last longer than an hour. Sixty minutes is generally the longest time workers can remain truly engaged.
- 6. Ban technology.** The reality is that if people are allowed to bring iPads or smartphones into the room, they won't be focusing on the meeting or contributing to it. Instead, they'll be emailing, surfing the web, or on social media just playing around with their technology.
- 7. Follow up.** It's quite common for people to come away from the same meeting with very different interpretations of what went on. To reduce this risk, email a memo highlighting what was accomplished to all who attended within 24 hours after the meeting. Document the responsibilities given, tasks delegated, and any assigned deadlines. That way, everyone will be on the same page.

BACKGROUND

(Describe your project. Brief description about your town council, location, people, demographics, languages, culture, way of life)

Overall Project Goal(s).

(Describe the overall goals of the GIZ town council sanitation project)

Role of Communications in Relation to Project Goal(s).

Consider how communications could help achieve your project goal(s)? Which particular goals are amenable to BCC? Would a lack of communications hinder your project's goal(s)?

A. Communications Context

A1. Internal considerations

What are the communications assets and opportunities available to the sanitation task force? What is the project's capacity to carry out behavior change communications? What staff, partners, short-term technical assistance, and finances are anticipated? What non-communications related strategic priorities must be considered? How will you address these—outside this BCC strategy?

A2. External factors

What are the donor's expectations? What are the local government's expectations? What is the visibility of the project? What are the existing perceptions of the target audience, partners or the public regarding WASH?

B. Stakeholder Analysis

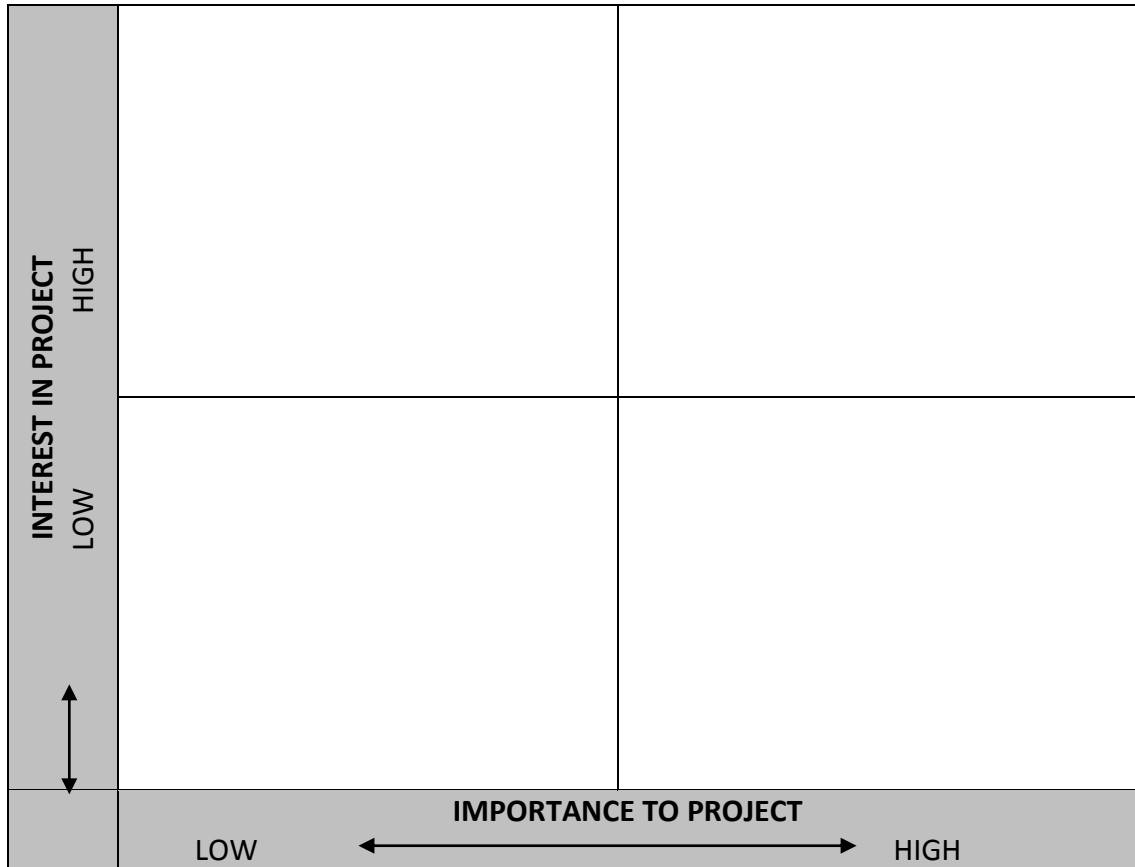
B1. List your stakeholders.

Brainstorm a list of your project stakeholders by category (NGOs, government officials, private sector, public-at-large).

B2. Stakeholder Mapping.

Based on what you already know about them, map your stakeholders in the diagram below. Consider how important the stakeholder is to project success. Interest measures how much they are already on board with the project intervention, not where we want them to be in the future.

Stakeholder Mapping Tool



C. Target Audience

Refer to your list of stakeholders. Of the target groups listed, which of these knowledge, attitudes, or behavior needs to be modified in order to meet your goal? Take one of these groups and brainstorm some answers to the following questions.

C1. Use the space below to describe some main characteristics/demographics of your priority target audiences. *(Age, income, gender, lifestyle, psychographics, habits, drivers, culture etc)*

C2. What are your target audience’s media preferences and media habits?

C3. Did your research indicate any relevant communication trends (e.g. most people are aware of the critical times when to wash hands)?

C4. Did your research give you insights into how to best reach and motivate your audience? What are the key drivers and triggers of behavior identified?

C5. What is your target audience's current mindset or behavior? What is the current behavior levels for the targeted behavior?

C6. What do you want your target audience's mindset or behavior to be?

C7. What would motivate the desired mindset change? *For the desired mindset change, visualize a member of your target audience when he or she has an "a-ha" moment – i.e. getting the issue or understanding the behavior.*

D. Communications Objectives

The communications objectives are the big “to-dos” of the BCC plan and are key to the success of your communications strategy. They need to be well aligned with your project’s goals as means to help you achieve the project’s results. To help formulate objectives, consider increases in the percentage of the target group reached (output) or changes that might be needed in target groups knowledge, attitudes, or practices (outcomes). Objectives should be clear and quantifiable (measurable); achievable within the lifetime of the project (time-bound), and one-dimensional (not a combination of objectives).

Use these guiding questions to think clearly about what you want to achieve: Do you want to make people aware of something? Do you want to provide them more information through a series of events? Do you want to them to perform some action like building a latrine?

D1. Output objective(s):

D2. Proposed measurement:

D3. Outcomes objective(s):

D4. Proposed measurement:

E. Message Development

Now that you have targeted key audiences, it's time to target the message to the audience to help you reach your desired results. Message is the communications designed to influence, inform, or motivate a particular group. What key points do you want to make with your target audience based on the desired change you want to bring about in their knowledge, attitudes, beliefs, practices, participation, or behavior? What you want them to do depends on how you structure your message. Given what you know about your audience and objectives, fill out the questions below.

E1. What are the barriers and benefits to your audience thinking, feeling, or action on your project's issue?

E2. Answer the question(s) that are applicable:

- What change in knowledge (what they know about the issue) do you want to motivate in your audience thinking, feeling, or action to meet your communications objective?
- What change in attitude (the way they feel about the issue) do you want to motivate in your audience?
- What change in behavior (or practices – day-to-day actions) of your audience is your project trying to achieve?
- What is the most motivating, persuasive, attention-grabbing, and exclusive message?

E3. Supporting messages (if needed)

E4. Messenger/spokesperson

E5. Optimal timing for your message

F. Strategic Approach

The strategic approach is where all the preceding analysis of who (audiences); what (messages); and why (objectives) culminates in the “how.” It addresses how the project will achieve its communication objectives in a way that best delivers the message and takes into account any constraints that emerged when analyzing the communication context. The approach should mention the target audience, best means of reaching them through a mix of communication tools, and any messengers or influencers that will help convey the message. Answer the following questions to help you write your strategic approach.

F1. Project X will target (whom)...

F2. To help them understand and believe (what)...

F3. By informing them (of what key message)...

F4. Through (engaging what influencers and communications channels)?

F5. This will result in (desired target behavior/ marketplace responses and business outcomes)?

F6. Overall statement:

G. Any emerging creative solutions/tactics (communications tools)?

The strategic approach will justify the right tools and tactics for conveying the project's messages. It can even provide arguments for not proceeding with certain tools, such as when the project calls for a website but the analysis shows that the target audience does not use the Internet. Communications tools are also referred to as channels, media, and vehicles for conveying a message. Examples of communication tools include face-to-face communications, public meetings, print media (newspapers, newsletters, brochures, pamphlets, direct mail), visual media (posters, signs, banners, billboards), broadcast (TV, radio), Internet (Websites, e-newsletters), folk media (theater, role-playing), edutainment (soap operas, docudramas), and much more.

F. Work Plan Gantt chart

Now summarize the tactics into a Gantt chart highlighting WHO will do WHAT, WHEN and WHERE and with what BUDGET estimates? Use the template provided in MS Excel

			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Activity	Responsible Person	Est. Budget UGX												
1. Community Mobilization														
1.1 VHT talks at women groups	CDO	1,000,000		x				x				x		