

SANITATION ADVOCACY RESEARCH PROJECT

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SECTION I: EXECUTIVE SUMMARY

*Let's wash our hands
Let's wash our hands
For the children to stay healthy
For the uncles to stay healthy
For the mothers to stay healthy
We build latrines*

- Translation of song lyrics performed by Feliciano dos Santos, director of ESTAMOS (Mozambican Non-governmental Organization) and his band, Massukos. Dos Santos is the winner of the 2008 Goldman Environmental Prize.

Executive Summary

Data Harvest has researched and evaluated views on advocacy for sanitation/hygiene from the start of 2007. We have spoken to 110 donors, advocates, national government staff, non-profits of all kinds and private sector representatives in six African, four Asian and a variety of Western countries.

The research consisted of background research on water/sanitation/hygiene and advocacy as well as identifying 103 high-level informants for telephone survey. Based on our review of their answers and professional positions, we estimate that around two thirds of our respondents were 'champions' and the rest were potential converts. Another part of the research entailed identifying and interviewing seven key informants about a variety of advocacy campaigns including the histories of HIV/AIDS and Climate Change. "Good Advocacy Criteria"¹ were defined and used as an evaluation tool.

Strategic Objectives

Our findings were structured to answer four strategic objectives that the Foundation outlined. These were:

1. Better understand what has/has not worked in sanitation-specific advocacy efforts to-date
2. Develop strategic recommendations about an approach for sanitation-specific advocacy and communications efforts that would more effectively motivate high-level decision makers at the international and national levels to take action towards improving sanitation/hygiene for the poor in developing countries
3. Determine whether water/sanitation/hygiene-inclusive advocacy and communications approaches have hindered or furthered sanitation-related advocacy objectives
4. Assess the extent to which sanitation is understood as a critical concern for social and economic development and what could make it more so

Main Findings From Advocacy Evaluation

The overall view is that advocacy in these sectors has been effective in raising and sustaining general awareness about sanitation/hygiene across the development sector, especially through the International Year of Sanitation (IYS), Global WASH Campaign (WSSCC), Global Handwashing Day (UNICEF), eThekweni Declaration/ AfricaSan Action Plan of 2008, German Toilet Organization's 'Where Would You Hide Campaign?' and much work by WaterAid. Respondents said UNICEF and WaterAid were the most effective advocacy organizations.

As a relatively nascent undertaking compared to the water and health sectors, advocacy around sanitation/hygiene may be informed by the successes and lessons learned from the advocacy histories of other sectors. DH selected HIV/AIDS and Climate Change as examples of

¹ See page 84.

successfully moving an issue from low to high awareness, research, funding and action on a global scale.

Main Findings From Telephone Survey

Analysis of the telephone survey questionnaires was illuminating. More than 85 percent felt that sanitation/hygiene were important development sectors. There were clear advocacy lessons by different target audiences as well as a few by region. Many were around what factors would most influence decision-makers to prioritize sanitation/hygiene for the poor. The following eight questions illustrate the most striking findings both in absolute terms and compared to other groups.

- 100 percent of national government respondents felt that Sanitation/Hygiene Campaigns were important in raising awareness and 90 percent of advocates agreed, compared to 76 percent of donors.
- All advocates interviewed felt that more financial support was needed for Sanitation/Hygiene. Just 62.5 percent of national government interviewees shared this view.

MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total ²
1. AGREE that Public Sanitation/Hygiene Campaigns Are Important in Raising Awareness	Count	25	19	16	20	8	88
	%	75.8%	90.5%	100.0%	87.0%	80.0%	84.5%
2. AGREE that Financial Support from Government or Donors Needs More Attention	Count	28	21	10	18	7	84
	%	84.8%	100.0%	62.5%	78.3%	70.0%	81.6%

² Note: Total percentages cannot be a simple average of individual percentages as they each are comprised of their own 'universe' thus they will differ slightly from the simple average.

- Between 90-100 percent of all national government, donor and advocate respondents felt that more information is needed.
- More than 95 percent of PVO/NGO/CBO, donor and advocates felt that public demand is the driving force.

MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
3. AGREE that Better Information to Decision Makers About Sanitation/Hygiene Benefits Needs More Attention	Count	30	20	16	19	7	92
	%	90.9%	95.2%	100.0%	82.6%	70.0%	89.3%
4. AGREE that More Public Awareness That Leads to More Public Demand Needs More Attention	Count	32	20	13	23	8	96
	%	97.0%	95.2%	81.2%	100.0%	80.0%	93.2%

- 90 percent of private sector and 86 percent of our advocates felt that economic growth is the best argument to make with decision-makers compared to only 53 percent of all national government respondents.
- Similarly striking is the difference between 87 percent of national government respondents who believe health is the best argument to make, compared to just over half of all donors who agree that is the best argument.

MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
5. AGREE that Extent of impact of "S/H Improves economic growth/reduces poverty" on decision makers is high	Count	27	18	8	15	9	77
	%	81.8%	85.7%	53.3%	71.4%	90.0%	81.8%
6. AGREE that Extent of impact of "Sanitation and Hygiene Improve public health" on decision makers is high	Count	17	15	13	16	6	67
	%	51.5%	71.4%	86.7%	76.2%	60.0%	65.0%

Finally, there were some regional disparities on financial assistance and whether health information would influence decision makers.

- While over 89 percent all African and Global respondents felt that more financial support is needed, only 58 percent of Asians shared this view.
- On the other hand, 79 percent of all Asian respondents felt that health would be the main argument to make. That view was shared by a lower percentage - 59-64 percent of global- and Africa-based respondents.

MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE					
		Region of Respondent			
		Africa	Asia	Global	Total
7. AGREE that Financial Support from Government or Donors Needs More Attention	Count	42	18	24	84
	%	93.3%	58.1%	88.9%	81.5%
8. AGREE that Extent of impact of "S/H Improves public health" on decision makers	Count	28	23	16	67
	%	63.6%	79.3%	59.3%	65.0%

Major Findings and Recommendations

Finally, there are ten major lessons learned from the research. These are also our recommendations.

1. Establish Tangible Goals

It is possible to **evaluate advocacy**, however this has been done qualitatively, and in a 'slice in time' manner. The greatest difficulty of the evaluation has been the absence of a straightforward call to action or baselines. This has been compounded by the absence of tangible measures of impact that are tied to the objectives and tactics of sanitation/hygiene advocacy initiatives.

Advocacy criteria need to be applied uniformly and partners must be convinced to invest in monitoring and evaluation activities for strategic communications efforts. A senior WSP informant supported this view. "In most of the programs you need to have a keen understanding of all your stakeholders," the informant said. "You need specific advocacy programs targeting the high-level decision makers and you need an advocacy program to reach out to the individual beneficiaries. You need multiple campaigns targeting multiple stakeholders at different levels simultaneously. Finally you need greater financial support for advocacy programs."

2. Be Sustainable – Advocacy Is A Process

There are successes to report, e.g. IYS, Global Handwashing, the eThekweni process, GTO and WaterAid's advocacy. All of these add to the drumbeat of good advocacy for the poor. However, **advocacy is a process** that must be sustained over time and include multiple tracks of activities and messages directed toward target audiences at all levels. Behavior change and a better understanding of target audience motivations also take time. Global sanitation/hygiene advocacy could be described as relatively nascent, but because of activities in recent years, it is off to a good start.

Kees Konspapel of the Government of the Netherlands affirms this point of view. "There needs to be a sustained advocacy effort, and kicking in of a few donors, especially the ones that are concentrating mostly on water and not sanitation," Konspapel said.

A senior representative of the World Bank shared a very long-term view when he commented that the minimum period for sanitation advocacy to take effect is 10 years (and DH is just examining the last two). The same respondent noted that results of the 2002 advocacy effort that linked Sanitation to the MDGs are only beginning to emerge today—some seven years later.

3. **Support the “Push” For Political Will**

Political will is the key missing ingredient, according to our respondents. Many said it was more a matter of governments setting better priorities for sanitation/hygiene and following that up with better planning and management of available funds because investment in sanitation/hygiene would support vital activities in other sectors such as health, environment, trade promotion, etc.

“Optimal advocacy” would combine a national campaign with visible support from the highest government levels, intra-governmental coordination/mobilization, and highly customized, contextualized local advocacy.

Legislation alone is not enough, and politicians need to play an active role. Politicians can benefit, as well, by being identified as advocates for sanitation/hygiene such as the Presidents of India and Mali, the Prime Minister of Bangladesh and many local politicians in India.

4. **The Growing Hunger For Information**

Effective advocacy communications around an international development issue rests squarely on the quality and quantity of the information available to share with target audiences. For an advocacy process to perform at its best and be sustained, it must be regularly “fed” with information that provides insights and spurs debate. It has a voracious appetite for questions and answers that reveal hard truths, inspire action and explore solutions.

Data of every variety is needed, from baselines on advocacy campaigns to accurate sustainability information for CLTS and potential options for urban programming. The ‘push’ of advocacy has had some notable successes, especially with the AfricaSan Action Plan that set funding levels for sanitation (0.5 percent of GDP), made sanitation/hygiene in programming a priority for the 60 percent of Africans without these services and established a system for regularly monitoring implementation. The ‘pull’ of programming advocacy also has achieved some success in utilizing the CLTS approach. More research about the effectiveness of individual hardware and software approaches is necessary to better inform and ultimately win the support of decision makers at all levels of society—government and household alike.

Meantime, advocacy efforts might better utilize existing data to underline the urgency of improving sanitation/hygiene for the poor. Sering Jallow, Manager of Water and Sanitation for the African Development Bank, spoke of all the existing data that could be immediately tapped to educate and raise awareness. “There are staggering numbers that can be used more effectively,” Jallow said. “For example, in the Human Development Report of 2006, there was a figure of how much GDP Africa loses each year because of poor water and sanitation. It was something like \$26 million or three percent of GDP lost each year. If decision makers understand this, they may put more into the sector.”

A respondent from UNICEF Vietnam makes a similar point by painting a stark picture of the challenges to improving sanitation/hygiene. “We can say we have a problem of quality. Although the (Vietnamese) government finds that 60 percent of the rural people now have latrines, when UNICEF assesses hygienic latrines it finds coverage to be 18

percent. The government had one special water and sanitation program for eight or nine years. It spent more than 90 percent of the budget on water supply. In Phase II, 2006-2010, the budget share is up to 30 percent for sanitation. But the rural needs are great and need even more investment.” Many countries do not have even this level of information or the political will to act on it. More data-based advocacy about the benefits of sanitation/hygiene should be carried out .

5. **Continuously Re-evaluate Communication Vehicles**

In spite of some very good awareness-building campaigns led by prominent and respected organizations, the majority of respondents said **media is not particularly effective in engaging high-level decision makers**. Many of our respondents viewed media as primarily effective for engaging members of local communities in need of sanitation/hygiene services. There were differing effective channels for advocacy (e.g. radio in Africa and Television in Asia) and country-specific aberrations that should be explored. For example, most respondents from India felt that messages about gender/dignity would move decision-makers, unlike the majority respondents from other countries surveyed.

DH analysis of the key messages of advocacy campaigns found that they rarely communicated a clear call to action appropriate to the audiences targeted. There was also a lack of retention of sanitation/hygiene messages, except in vague or confusing terms. Some respondents remembered international campaign messages, e.g., “2.6 billion people lack sanitation,” some remembered local messages, such as Ghana’s “Cleanliness is Godliness,” but most did not. Also interestingly, private meetings and site visits seemed the most effective form of advocacy to convince high-level decision-makers.

6. **Supply, Demand and the Role of the Private Sector**

Many informants highlighted the fledgling success of demand-creation via CLTS that now must be balanced by an equal effort to establish **supply-creation** for sanitation/hygiene. Our respondents felt that the most important factor after political will was grassroots demand. Yet, demand for what? Customized hardware solutions must be created taking into account that quality standards often vary. Consumers need to be informed about what along the “sanitation ladder” is effective. Finally, sanitation/hygiene information must respond to the privacy, dignity and health needs of women and girls of all ages.

The private sector has a role to play, but it is still emerging, and will be nationally-specific.

The dearth of private sector informants DH found to interview was illuminating. Local masons and merchants play a vital role in grassroots sanitation/hygiene services. Multi-national businesses also can benefit by serving as champions and funders of sanitation/hygiene advocacy efforts as evidenced by the public-private partnership of Global Handwashing Day 2008. Such opportunities, however, may be limited and highly strategic.

UNICEF’s Therese Dooley shared that the overriding attraction for corporate interests to invest in Global Handwashing Day 2008 was the opportunity it provided to launch and establish awareness about a new product brand. There may be much greater opportunities for public-private partnership at the local and national levels. Entrepreneurial initiatives, such as the rollout of the “iko” toilet by David Kuria in Kenya, are an excellent example. The Bill and Melinda Gates Foundation, WSP and others are doing research on social marketing and documenting impacts.

7. Differentiate

Sanitation/Hygiene should be separated out from the water sector. Many respondents told DH that sanitation/hygiene were orphan issues lost within the Ministries of Public Works, Rural Development, Water or Health. Braimah Apambire of the Hilton Foundation expressed the majority respondent view about the “need to elevate sanitation to [the] same level as water. This will be accomplished through awareness creation and information sharing.”

8. Build Upon Cross-Sectoral Opportunities

Water quality and ecological sanitation offer useful opportunities for advocacy and innovative water management. Key issues include: methods for reducing clean water shortages, better wastewater treatment and new economic opportunities arising from ecological sanitation practices.

Effluent as a resource was understood best by innovators within the sanitation/hygiene sector such as David Kuria of Ecotact in Kenya, Felicianos dos Santos of Estamos in Mozambique and Dick van Ginhoven of the Government of the Netherlands. Much more needs to be done to spread the word among high-level decision makers about effluent as a resource. Since hygiene relies on water, the ability to meet hygiene goals is necessarily linked to water programming.

Urban dwellers (often renters) need special assistance, with government commitment to public toilets and wastewater treatment, as well as customized solutions beyond rural latrines that are individually owned and movable.

Both rural and urban dwellers can quickly benefit from excellent handwashing information (a low cost health benefit) but much more progress needs to be achieved in water quality before advocacy communications initiatives to promote handwashing can fully succeed. Finally, the enforcement of existing legislation to support sanitation/hygiene must be stepped up in many instances.

9. Gender – The Hidden Factor

Untapped gender, dignity and girls’ education may offer new advocacy communications opportunities. Many of our respondents described these issues as vitally important to the poor, but as weak motivators for action by high-level decision makers. In this instance, the contrast between deep concern and perceived influence leads DH to believe gender, dignity and girls’ education issues may offer advocacy communications opportunities. More opinion research may enable advocates to bring this important issue to the fore.

The unaddressed concerns of an important target audience may be evidence of a great, untapped opportunity for change. In this instance, it might serve as an opportunity to widen support for sanitation/hygiene across other development sectors such as women’s rights, human rights and girls’ education.

10. **Keep The Drumbeat Going – Patience and Sustainability are Key**

All of this takes time, and **the development community can be quite impatient.**

Respondent Khairul Islam of WaterAid Bangladesh said that sanitation/hygiene education should be sustained for 15 to 20 years. In the realm of advocacy communications, building awareness and action on an issue also takes time—and consistency.

SECTION II: RESEARCH FINDINGS AND ANALYSIS

Strategic Objectives #1 and #3

Better understand what has/has not worked in sanitation/hygiene-specific advocacy efforts to date. Determine whether water, sanitation/hygiene approaches have hindered or furthered sanitation objectives.

Introduction:

The 'Push' Of Advocacy and The 'Pull' Of Good Programming (With Advocacy)

In answering strategic objectives #1 and #3, DH began by examining the **'PUSH' to inform and raise awareness** about the urgent need for sanitation/hygiene services for the poor by evaluating selected advocacy initiatives of the past two years.

DH completed the answer to strategic objective #1 by focusing on the 'WHAT?' or proposed solutions and 'call to action' for improving sanitation/hygiene services that were most frequently mentioned and praised by respondents. When solutions and calls to action are integrated into sanitation/hygiene advocacy efforts, they become the **'PULL' of good programming** as a motivator for effecting change.

Approximately three-quarters of the project's time was focused on evaluating the **'push'** and the remainder looked at the **'pull'**.

Evaluations Of Selected Sanitation/Hygiene Advocacy Initiatives

Despite the absence of clear solutions and programs for achieving sanitation/hygiene for the poor, awareness of the issue and policy change has been boosted during the past two years by a variety of advocacy efforts. DH evaluated several of those initiatives utilizing the previously noted "DH Good Advocacy Criteria" as an overall framework.

The objective was to:

- Reveal what has and has not worked in sanitation/hygiene advocacy
- Observe if in any cases, advocacy communications approaches hindered or furthered objectives
- Highlight lessons-learned that may help expand the success of future advocacy efforts

Selection Factors:

The initiatives and campaigns were selected based upon one or more of the following factors:

1. Considered to be the most successful as a result of outcomes (recorded activities around the world), the ease in scaling-up and frequency of positive references within open-ended answers by our interview research informants
2. Represented the widest geographic scope/outreach (e.g., global, continental region, major cities) of sanitation advocacy efforts during the past two years
3. Were among the most frequently mentioned advocacy efforts – one way or another – by respondents
4. Reflected the variety of advocacy approaches utilized by sanitation advocacy efforts during the past two years (e.g., global awareness and coalition building, policy change, public-private partnerships, innovative/controversial images and messages)

The advocacy initiatives selected were:

1. **International Year of Sanitation (IYS)**³: Considered to be one of the biggest international advocacy initiatives in sanitation/hygiene over the last two years, it demonstrated significant outcomes, as evidenced by the IYS Country Activity Reports 2007 & 2008 (see “APPENDIX, 6. Matrix: Impact of UNICEF/UNDP/WSSCC IYS Activities”).
2. **Global WASH Campaign**⁴: Another major international initiative (and closely coordinated with IYS) was the WASH Campaign. It helped to build national coalitions around the world, boosted the success of IYS by creating complimentary campaign materials (posters, postcards, e-postcards, etc.) and added to a growing, consistent drumbeat of messages and activities that continue to throw a spotlight on sanitation/hygiene before the eyes of high-level decision makers.
3. **Global Handwashing Day 2008**: In addition to showcasing a successful public-private partnership in support of improved sanitation, Global Handwashing Day 2008 also provides an excellent example of a campaign effort that became positively “viral” in nature, as it’s popularity and ease of use enabled sanitation advocates around the world (well beyond the initial countries targeted for implementation) to implement the Campaign.
4. **eThekwini Declaration and AfricaSan Action Plan**: Perhaps the most important example to date of advocacy efforts to affect sanitation/hygiene policy change.
5. **Where Would You Hide?** A distinctive, blunt and theatrical advocacy initiative with a key message that was correctly recalled by nine respondents (out of the approximately 50 informants who could accurately recall a slogan or key message).

³ International Year of Sanitation (IYS) website: <http://esa.un.org/iys/>

⁴ Global WASH Campaign website: <http://www.wsscc.org/en/what-we-do/advocacy-communications/global-wash-campaign/index.htm>

CASE STUDY #1: INTERNATIONAL YEAR OF SANITATION EVALUATION

Summary

DH concludes from a combination of the interviews and the IYS country results matrix that IYS was successful in raising overall awareness of sanitation/hygiene among key decision makers at the national and international levels. Respondents indicated that IYS helped keep sanitation high on the agenda at water-related conferences at the national and international levels. DH research interviews suggest that IYS succeeded in positioning the issue of sanitation for the poor more prominently on the global agenda by raising its profile with high-level decision makers at the global, national government, international NGOs, local PVOs and the news media. Additionally, widespread global participation in the event recently documented by UNICEF, UNDP and WSSCC serve as another indicator of the advocacy program's success in raising awareness.

IYS also took into account that sanitation is under-appreciated as a significant issue impacting a variety of health, social and environmental issues, and sought to create linkages to those issues at the global, national and community levels. By broadening the message about the impacts and linkages inherent in sanitation, IYS strategy engaged a broader audience in first recognizing, and then encouraging others to take action towards improved sanitation/hygiene.

From the perspective of advocacy alone, launching and maintaining an ongoing drumbeat of sanitation advocacy is an important first step in increasing support and action on an international development issue of concern. IYS was successful in this regard, as it increased positive momentum on sanitation/hygiene. The challenge now is zeroing in on the most important opportunities created by IYS (and other recent efforts) and continuing to push forward via sustained, long term advocacy actions and campaigns. This will help spur broader behavior change that leads to improved sanitation – particularly in those countries where stronger enabling environments have been created, in part by IYS, via improved sanitation policies, funding and national prioritization.

Background

The International Year of Sanitation (IYS) was developed to help focus global attention and action on improving sanitation for the world's poorest communities. The over-arching goal was to increase the ability to meet the United Nations Millennium Development Goal #7, target 10 (i.e., *"Halve, by 2015, the proportion of urban and rural people without access to basic sanitation."*), and to do so by creating an internationally coordinated campaign.

The IYS Campaign recognized that to meet the MDG sanitation target would require coordinated action at all levels of government and the formation of partnerships between private companies, bilateral donors, development agencies, financial institutions NGOs, civil society and local communities. IYS pulled together key organizations at the international level led by the UN and its agencies, along with the United Nations Children's Fund (UNICEF), Food and Agriculture Organization of the United Nations (FAO), United Nations Development Program (UNDP), United Nations Environment Program (UNEP), UN-Habitat, United Nations University (UNU), World Health Organization (WHO), Water and Sanitation Program (WSP)/World Bank, Water Supply and Sanitation Collaborative Council (WSSCC), United Nation's Secretary-General's Advisory Board on Water and Sanitation (UNSGAB).

Goals

The stated advocacy goals of IYS were:

- **Increase awareness and commitment** from actors at all levels, both inside and outside the sector, on the importance of reaching the sanitation MDG, including health, gender equity, education, sustainable development, economic and environmental issues, via compelling and frank communication, robust monitoring data, and sound evidence.

- **Mobilize Governments** (from national to local) existing alliances, financial institutions, sanitation and service providers, major groups, the private sector and UN Agencies via rapid collaborative agreements on how and who will undertake needed steps now.
- **Secure real commitments** to review, develop and implement effective action to scale up sanitation programs and strengthen sanitation policies via the assignment of clear responsibilities for getting this done at the national and international levels.
- **Encourage demand driven, sustainable & traditional solutions**, and informed choices by recognizing the importance of working from the bottom up with practitioners and communities.
- **Secure increased financing** to jump-start and sustain progress via commitments from national budgets and development partner allocations.
- **Develop and strengthen institutional and human capacity** via recognition at all levels that progress in sanitation toward the MDGs involves interlinked programs in hygiene, household and school facilities (such as toilets and washing facilities), and the collection, treatment and safe reuse or disposal of wastewater and human excreta. Community mobilization, the recognition of women's key role and stake, along with an appropriate mix of "software" and "hardware" interventions are essential.
- **Enhance the sustainability** and therefore the effectiveness of available sanitation solutions to enhance health impacts, social and cultural acceptance, technological and institutional appropriateness, and the protection of the environment and natural resources.
- **Promote and capture learning** to enhance the evidence base and knowledge on sanitation, which will greatly contribute to the advocacy and increase investments in the sector.

Goal Analysis

- Comprehensive, reflecting policy, programmatic, financial, capacity and research needs to improve access to sanitation.
- Focused on outcomes, impact and solutions, but do not include specific target goals that are measurable.
- Provide a solid foundation upon which to continue to build and expand efforts: IYS was thoughtful about balancing one-time events and awareness efforts with sustained focus on key actions requiring on-going development such as policy, behavior change, infrastructure, and financing.
- Reflect the urgency and immediacy of action needed to turn the tide on sanitation.
- Lacks evaluation measure: One of the most significant elements lacking in these goals are measures/targets that allow IYS implementer to measure their success in more than an anecdotal manner. Specificity might have included: funding goals by national governments funding goals by the international donor community, type of funding and number of commitments.

Target Audiences

The target audiences of IYS Campaign overall were:

- General public
- National and local politicians
- Financial institutions
- Sanitation and service providers
- Business leaders
- Religious leaders/organizations
- NGOs
- UN Agencies
- Teachers and school children
- Community and women's groups
- Households
- Academics
- Celebrities
- Media

Target Audience Analysis:

Although the target audiences were comprehensive in their scope, a clear order of priority was lacking from campaign support materials.

Key Messages

IYS integrated various behavior and impact studies from around the world on opportunities and barriers relating to sanitation. These led to the development of the five key messages:

1. Sanitation is vital for human health.
2. Sanitation generates economic benefits.
3. Sanitation contributes to dignity and social development.
4. Sanitation protects the environment.
5. Improving sanitation is achievable.

In turn, these messages supported collective actions to improve sanitation such as:

- Promotion of latrine construction in households, schools, institutions and public places.
- Handwashing campaigns.
- Policy development, institutional strengthening, and other enabling environments to expand sustainable sanitation programs.

Message Analysis:

IYS messages lacked a specific strategy for refining its five core key messages into subsets of messages specific to a more narrow selection of target audiences and appropriate for the context in which the message might be used. Additionally, the Campaign would have benefited from identifying key spokespersons and assigning them, as appropriate, to top priority target audiences. The outcome would be that organizers would determine the messages, messengers, and means or vehicles to effectively reach a subset target audience such as families, religious leaders, national government representatives, etc.

- **Collaboration, Consistency and Brand:** The messages for IYS were developed through a collaborative, thoughtful process by partner organizations with WSSCC in the lead. This effort in and of itself brought together major players on sanitation and resulted in agreement and consistent utilization of five core messages. This is a significant accomplishment, as it enabled many organizations to speak with the same voice on sanitation to many different audiences. This important consistency of message is at the center of a strong IYS brand, making it much easier and effective to penetrate and maintain a level of awareness with target audiences.
- **Cross-Sectoral:** The cross-sectoral nature of the messages enabled IYS to address other key linkages to the issue of sanitation/hygiene (health, gender, environment), thus enabling the Campaign to speak to and engage a broader range of interests.
- **Simplicity:** The straightforward, simplicity of the core messages – lacking any scientific or political jargon – most assuredly made it easier for people to more easily understand them and connect to the issue of sanitation as something impacting their lives in a variety of ways. However, the messages were not very memorable. Fewer than five respondents remembered any IYS messages.
- **Lacking Audience Customization:** As mentioned above, there was not enough message customization done according to key target audiences. The Campaign would have benefited by a deeper analysis and development of specific “spin-off” messages for religious leaders, schools, local communities, etc., based on the five core messages. This would have required some level of market research to ascertain what messages would resonate with those audiences.

Messengers/Dissemination Channels

IYS utilized multiple international spokespersons from the UN and UNICEF, including most prominently Prince Willem-Alexander/UNSGAB. At the national and community levels, campaign organizers were tasked with identifying and enlisting appropriate spokespersons appropriate to the list of target audiences.

In terms of dissemination channels, there was frequent mention of the use of media in the country matrix of implementation efforts and outcomes. (See “Appendix, SUMMARY – TABLES OF FINDINGS, News and Advertizing”).

Messengers/Dissemination Channels Analysis:

- Champions are key to the success of advocacy and IYS benefited by identifying and enlisting spokespersons at the national and local levels.
- Publicity efforts seemed to have had varying degrees of success. Since there were no before and after measures of awareness taken during the course of the Campaign, it is impossible to indicate how media coverage of IYS-related events may have impacted awareness or broader public action.

Tactics

The advocacy communications plan, in coordination with partner organizations, aimed to advance implementation of sanitation-related actions and decisions through:

- Media outreach
- Private sector partnerships (Canon photo competition)
- Postage stamps
- Contests
- Exhibits (Sanitation is Dignity)
- School engagement (WASH Schools campaigns)
- Media Awards sponsored by WSSCC

Key was the ability to allow for customized campaigns at the national, regional and local levels. IYS provided a basic package that contained global activities and suggestions for national activities. The major partners of the campaign distributed the package worldwide.

Tactics Analysis:

- **Providing Information Package/Tool Kit:** An IYS Information Package was developed to provide guidance to organizations and advocates interested in engaging in campaign activities. It was designed to help in the development and implementation of events and activities during IYS that would help raise awareness and action on sanitation.

The strongest elements of this kit were the provision of the five core messages, along with supporting messages for each one, and the list of 50 ways to celebrate World Water Day-WWD (see below for more detailed analysis of the WWD Campaign as a sub-activity of IYS). The kit offered creative ideas for local organizers to develop their own activities. The rest of the IYS Information Package offered more substance and support for the development of customized advocacy campaigns by local organizations that supported the overarching activities of IYS. Relatively low cost examples might be customizable tools and support on creating contests, awards programs, etc., that carried the IYS messages and brand. Finally, more support and guidance on the implementation of advocacy activities might have strengthened the ability of local organizers to carry out activities that better supported IYS goals.

- **World Water Day 2008: Example of IYS event:** World Water Day 2008 – with the theme “Sanitation Matters!” – was celebrated by the United Nations on 20 March 2008. The official celebrations in Geneva featured high-level dignitaries, including His Royal Highness Prince Willem-Alexander of the Netherlands. Approximately 90 events took place around the world in conjunction with WWD, one-third of which were in developing countries. The events that took place in North America were characterized as focusing on hiking, walking, and talking about local water issues. Eleven global events took place.

There was no documentation of outcomes from WWD events, or any written/shared summary of the various events themselves. Therefore, DH cannot draw any solid conclusions about the efficacy of WWD. However, based on the theory that a sustained “drumbeat” of visible events that engage new and broader audiences in a cause is essential to effective advocacy, events such as WWD can only help to further raise awareness and spur some level of action and interest in sanitation.

It is worth noting that the WHO Advocacy Guide for Water for Life prepared by WHO in cooperation with UNICEF and WSSCC for WWD was very well done. It provided helpful guidelines on collecting and analyzing information to develop an advocacy campaign; key message guidance; direction on mobilizing and planning events; help with working with media; and basic guidelines on how to assess the impacts of a campaign.

- **Diversity of Tactics:** The inclusion of a variety of advocacy tactics constituted a good mix of potential activities, ranging from big events to corporate partnerships, awards, contests, media outreach and high-level meetings featuring prominent spokespersons. This mix enables action and visibility at all levels, global, national and local.

The absence of before/after measures of awareness and action among a sample target audiences exposed to events makes it impossible to provide an in-depth assessment of success.

IYS was very successful in employing a simultaneous top-down, bottom-up approach on a very broad scale.

Measures of Impact:

As stated previously, clear outcome measures were not part of the strategy from the start. However, UNICEF and WSSCC compiled a matrix of post-IYS results from 58 countries and three regions. Eight of the nations included in the matrix represent countries targeted for research by DH. (See “APPENDIX, 6. Matrix: Impact of UNICEF/UNDP/WSSCC IYS Activities”).

One of the shortcomings of the matrix of post-IYS results is that it primarily presents outputs (e.g., sanitation awards, IYS launch events, etc.) rather than tangible outcomes, with a few exceptions. For example, the matrix reveals: Indonesia enacted solid waste regulations; Tanzania created a “One Year Plan” to accelerate achieving the sanitation MDGs; and both Uganda and Vietnam showed progress is being made toward increasing budgets for sanitation/hygiene.

Activities Noted In The Matrix Of Post-IYS Events Within Our Target Countries

Kenya:

- Discussions conducted at policy level with the Ministry of Public Health and Sanitation on scaling up sanitation and providing a budget line for it figured prominently as a key outcome of IYS, in the view of several Kenyan respondents (see research findings section, below).
- One outcome mentioned was that Kenya has set up the Ministry of Public Health and Sanitation and is currently gathering money for the budget. DH recommends that this could be a very good future case study for the Foundation to start monitoring now, to gauge the success of separating out these two sectors (sanitation/hygiene).

Indonesia:

- Parliament approved Solid Waste Regulation and signed it into law in 2008.
- Ministry of Public Works extended the Policy and Strategy on Domestic Waste Water.
- Ministry of Health extended National Strategy on Community Action for Total Sanitation. This includes the indigenization of CLTS (to CBTS). (See the “Push” of programming section, below.)

Vietnam:

- UNICEF budget for sanitation/hygiene increased from \$660,000 to \$800,000.
- Sanitation budget increased between 10-30 percent in six provinces.
- A National Rural Sanitation Working Group was established.

Tanzania:

- Closer collaboration between key sanitation partners at the national level
- Developed a one-year plan to accelerate achievement of MDGs (not indicated who developed/led this).
- Increased momentum to develop a sanitation/hygiene policy in one year's time (accelerated timeline).
- Draft MOU between four ministries developed and awaiting final approval.

Uganda

- Increased probability of creating a specific budget line item at the national level for sanitation.

Outcomes/Evaluation Analysis:

The lack of clearly stated outcomes from the beginning of the IYS Campaign was a significant weakness. By not establishing benchmarks at the start or a process for measurement, it is difficult to measure the true positive impact of the campaign.

Anecdotal reporting does substantiate positive movement and accomplishments in support of the IYS goals at the national policy levels in many of countries around the world. This leads to the conclusion that IYS' greatest impact was generating interest, engagement, and forward movement on sanitation on the part of national government entities.

During DH research interviews, five people mentioned IYS as an example of great sanitation/hygiene programming. Dr. Akica Bahri, Africa Director of the International Water Management Institute, stated: “It (IYS) cast a spotlight on the previously taboo topic of sanitation. It brought attention to sanitation globally, for all organizations. Because of this attention, everyone had to start thinking about sanitation and making efforts and being creative and expanding their ideas and thinking outside the box on sanitation.”

CASE STUDY #2: GLOBAL WASH CAMPAIGN

Summary

It is the view of DH that the Global WASH Campaign, like IYS, helped to launch and sustain a continuous drumbeat of messages and activities. The numerous activities listed within the “Global WASH Campaign Country Activity Report” of 2007 and 2008 reveals a many positive outcomes. They include: establishing coalitions, building partnerships with sector actors, carrying out WASH advocacy, successfully lobbying national governments and communities, improving communication with news media, monitoring sector progress and supporting policy and strategy development in a growing number of developing countries around the world.

During the current early phase of sanitation/hygiene advocacy, broad advocacy efforts like the Global WASH Campaign (and IYS) are vital for distinguishing sanitation/hygiene from other development issues, including water.

Background

The Global WASH Campaign is a high-profile global advocacy initiative aimed at raising public and political awareness of safe water supply, adequate sanitation/hygiene services. The Campaign originally was launched in response to the failure of world leaders to recognize sanitation as a goal at the UN Millennium Summit in 2000. The initial objective of the Campaign was to bring sanitation/hygiene to the global agenda with a strong focus on adding sanitation to the Millennium Development Goals (MDG) at the World Summit for Sustainable Development in 2002. That was achieved with the ratification of the MDG 7 target 10, i.e., *“Halve, by 2015, the proportion of people without sustainable access to safe drinking water and sanitation.”*

Over the years, the Campaign has evolved into a worldwide movement with the support of many governments, NGOs and partners. Individual and local WASH Campaign activities have been set up in more than 30 countries. The term “WASH” now embodying a global concept understood and promoted by many stakeholders within the water/sanitation/hygiene sector.

The Global WASH Campaign is led by the Water Supply and Sanitation Collaborative Council (WSSCC), an international multi-stakeholder organization that works to improve the lives of poor people. WSSCC describes the campaign as “the centerpiece” of the organization’s advocacy activities.

WSSCC is a unique partnership organization. It exists under a mandate from the United Nations (UN) and is governed by a multi-stakeholder steering committee elected by the organization’s members. Today, WSSCC members are central to the activities of the organization and are comprised of some 1,400 organizations and individuals from a variety of stakeholders including: academia, nongovernment organizations (NGOs), Community Based Organizations (CBOs), international organizations, national governments and the private sector. Thus, WSSCC combines the authority of the UN with the flexibility of an NGO and the legitimacy of a membership organization.

Goals

- **Raise public and political awareness** of the importance of a safe water supply and adequate sanitation/hygiene services as well as the impacts of the absence of sanitation/hygiene – including health, social and economic development and gender equality.
- **Advocate** for the International Community to take action to achieve the Millennium Development Goal for sanitation. Mobilize political support and action around the world for the implementation of more equitable and affordable sanitation/hygiene services for the poor, with priority given to women and children in developing countries.

- **Promote** a genuine transformation of attitudes, policies and practices and persuade the international and donor communities to allocate high priority to those countries with poor sanitation facilities

Goals Analysis:

Typically, clearly defined and tangible goals are the most important component of a good advocacy effort. If goals are too broad, they may become vague and make it difficult to specify target audiences, strategies and tactics, and later, evaluate campaign results. However, it is often appropriate for the goals of a global advocacy effort like the Global WASH Campaign to be broad so that it can successfully encompass different cultures, national policy gaps, education and behavior-change requirements. The Global WASH Campaign objectives were broad and lacked specific outcomes that could be achieved as initial steps toward realizing broad goals. They reflected the broad and vague goals of the sanitation/hygiene development sector – i.e., raise awareness, press for the achievement of the MDG water and sanitation target and mobilize support and action for sanitation/hygiene services for the poor.

Target Audiences

The target audiences for the Campaign were:

Global:

- National governments in developing countries (Ministers, political advisers and policy makers)
- Donor community
- Political and social leaders around the world
- Journalist networks and individual journalists in developed and developing countries
- Private sector

National:

- National and district decision makers
- Community leaders
- Religious leaders
- Business leaders
- School administrators

Target Audience Analysis:

The Global WASH Campaign target audiences also are broad and reflective of the wide scope of Campaign goals and activities. In fact, the targets represent large groups from which more specific target audiences should be identified (e.g., policy makers would include national government ministers) to receive selected Campaign messages, attend selected forums and special events, and more.

Strategies/Approaches

- Publicize the appalling consequences to poor people in developing countries who lack safe drinking water and are deprived of defecating in dignity, and communicate possible solutions.
- Collect science-based information to support the advocacy messages (about the health, economic, quality of life and other negative impacts to communities without sanitation/hygiene services).
- Forge partnerships with the news media.
- Mobilize communities and promote people-centered approaches via the National Coalitions who are running in-country WASH Campaigns.
- Allow for the customization of WASH Campaigns at the national, regional and local levels. During 2008, IYS distributed a basic package that featured planned global activities and suggestions for national activities designed to leverage the global effort.

Tactics

- Creation of an Advocacy Kit for the International Year of Sanitation 2008.
- Creation of “Sanitation Matters” advocacy materials for World Water Day 2008.
- Creation of Hurry up! WASH Campaign series of materials.
- Organizing 2007-2008 WASH Media Awards.
- Organizing and attending meetings at global and regional level to promulgate the advocacy messages.
- Attendance and participation in key forums and debates at World Water Week in Stockholm.
- The four regional sanitation conferences in 2007 and 2008: LatinoSan, East Asia San, AfricaSan +5, SACOSAN III.
- Participating and influencing global sector advocacy initiatives such as the International Year of Sanitation, World Water Day, and the UN-Water Task Force on Sanitation.
- Working with the news media:
 - Organizing press events and release reports, facts, research, individual stories, policy action and other “newsworthy” information about the need for sanitation/hygiene to the news media around the world.
 - Running the WASH Media Awards initiative to promote high quality news reports about the arguments for providing water, sanitation/hygiene for all.
 - Launching of the WASH Radio Campaign.

Strategies and Tactics Analysis

- The Campaign tactics were in line with Campaign objectives and reflected the strategic approach.
- The WASH Media Awards successfully promoted high quality news reports about water, sanitation/hygiene and established strong relationships with a cross-section of journalists.
- The Global WASH Campaign materials were widely utilized by WSSCC members to raise awareness, promote special events, engage the news media, encourage public actions, and more.
- The Campaign tactics also were purposefully (and well) designed to be flexible enough to be carried out within a variety of settings and cultures while maintaining the overall Global WASH Campaign brand.

Key Messages

The Global WASH Campaign disseminated a mix of “Key Themes” and “Key Messages.”

Thematic messages were:

- Water, sanitation/hygiene can save lives.
- Without water and sanitation there can be no sustainable development in health, education and livelihoods, locking people into a cycle of poverty and diseases.
- Water, hygiene and sanitation for people: women and children come first.
- Reforms are critical to improving water and sanitation services for the poor.
- Water, hygiene and sanitation are entry points for poverty alleviation.

Overt key messages (those reflected in the Global WASH Campaign materials) were:

- Water, sanitation/hygiene for all.
- Sadly, if 2.4 billion people lacked access to adequate sanitation yesterday, they count 2.6 billion today.
- Hurry up! 2.6 billion people lack access to adequate sanitation!
- Millions of women have to do it with an audience.
- 1.2 billion people drink dirty water every day.
- Diarrhea kills babies every day.
- Dirty water kills.
- In some countries women risk rape by collecting water.
- Cause of death: dirty toilet.

Key Messages Analysis:

Human nature and universal moral and ethical concerns about the quality of life of all individuals strongly support the conclusion that the strategies of the Global WASH Campaign connect with the values of its target audiences. The images and key messages of the Campaign draw attention, but opinion research and focus group testing are necessary to determine if they engage target audiences just as WSSCC intended. The striking imagery of the Campaign materials also leaves open the possibility that they repel some portion of target audiences and do not promote the Campaign call to action to improve sanitation/hygiene services for the poor.

The Global WASH Campaign's overt key messages frame a value and vision about the dire consequences of the absence of sanitation/hygiene services, but the call to action communicated is unspecific and in some instances, non-existent. It does not present a clear next step the recipient should take to alleviate the problem, such as endorse a specific policy or donate funds to a group successfully implementing sanitation/hygiene services for the poor in developing nations, or other actions. The thematic messages are more positive and actionable than the more overt messages. Actionable references include: "reforms are critical..." "...women and children come first." Positive references include: "can save lives" plus the implication that water and sanitation improve "health, education and livelihoods."

Opinion research and focus group testing are required to determine the success of the key messages in engaging target audiences and motivating them to take actions – that can be linked to the Campaign – that help to achieve the Campaign goals.

Messenger/Dissemination Channels Analysis:

The tactics successfully disseminated key messages via appropriate channels (conferences, forums, news media outlets, websites, press events, poster displays, postcards, e-cards/e-mail, etc.) that connected to the target audiences.

Jon Lane represented The Global WASH Campaign as its primary spokesperson and his expertise and skill in that role is of the highest quality. The Campaign also utilized multiple other spokespersons from WSSCC such as members of the Secretariat, individuals that comprise WSSCC's regional and national coordinators and partners (e.g., Anders Berntell, executive director of the Stockholm International Water Institute), its governing body and members around the world. It disseminated those messages via channels that have the potential to connect with the intended audiences and included: the news media, WSSCC website and the websites of partners, special events, posters displayed at events and conferences, postcards, e-postcards and more.

Measures of Impact and Outcomes/Analysis:

The Global WASH Campaign suffers from the absence of tangible measures of success integrated into all parts of the Campaign activities. Positive assumptions may be made about the success of the Campaign as evidenced by the many events around the world, large news media coverage of Campaign events and materials and the frequent mentions of the Campaign during international meetings. For example, according to the 2007 and 2008 Global WASH Campaign Country Activity Reports, a total of more than 30 countries around the world engaged in building partnerships with sector actors, carried out WASH advocacy and pressed for government action to improve water and sanitation services for the poor. Otherwise, these reports have provided updates most significantly on tactical activities, such as message development and distribution and media outreach at significant international events.

Without tangible measures, lessons may have been lost that could improve the Campaign going forward. Which individual campaign activities achieved the greatest success? Which activities achieved weaker results and need improvement? Which activities achieved the most positive impact in proportion to the resources required? Such questions remain unanswered.

CASE STUDY #3: GLOBAL HANDWASHING DAY

Summary

It is clear that Global Handwashing Day (GHD) 2008 was a distinct success, particularly in light of the fact that this was the first year of implementation. It was designed to target 20 countries around the world and ultimately succeeded in being implemented by a factor of four of the original goal – in some 82 nations, as stated above.

These factors were key to the program's overwhelming success:

- **Clear Goals:**
GHD was, and continues to be, focused on a specific behavior change that can have significant impact on health and mortality. The Campaign did an excellent job of keeping this goal/behavior at the center of all activities, messages and outreach.
- **Market Research-based Approach:**
Market research was conducted in five target countries prior to the Campaign to design and develop the GHD brand and ensure, therefore, its efficacy. In addition, participating countries were strongly encouraged, via the Planners Guide, to formulate their own messages and outreach based on their own data and understanding of local/national values and culture, with the central focus remaining consistent on the core behavior change goal.
- **Partnership Effort:**
Involved UNICEF, WSP, Hygiene Improvement Project (an NGO funded by USAID) and two multi-national private industry groups: Procter and Gamble and Unilever, as well as extensive in-country governmental representation and participation.
- **Private Industry Involvement:**
The initiative's key objective to raise awareness, especially among children in developing countries, about handwashing with soap (as opposed to just handwashing) was very attractive to multi-national private industry involvement. That led to the funding of sophisticated market/audience research, the development of well-received creative materials and at high quality evaluation (An independent research group for Procter and Gamble surveyed 100 respondents exposed to the initiative from private, public sector and governments. It showed the Campaign was considered to be "fun, easy to connect with and innovative").
- **High Quality Planning Material:**
It bears mentioning that this Guide is an outstanding example of how to provide information, guidance and tools to national/local organizations as part of a social marketing/behavior change initiative. The Guide struck the right balance between the creation and implementation of an internationally branded and directed campaign that allowed for a significant level of national and local customization to help ensure greater success, as demonstrated by the fact that groups in countries outside of the initiative's 20 original targets were able to readily implement the program as well.

Background

Global Handwashing Day (GHD) was initiated in 2008 as one of the major international advocacy efforts during IYS. Recognizing that handwashing with soap is one of the most effective ways to combat diarrheal diseases and pneumonia (that combined are responsible for the majority of child deaths, GHD is aimed at changing behaviors – specifically handwashing with soap – to improve health. The specific focus for GHD 2008 was handwashing in schools.

GHD is implemented by the Public Private Partnership for Handwashing with Soap (PPPHW), a coalition of international handwashing stakeholders established in 2001, and includes the Water and Sanitation Program, UNICEF, USAID, the World Bank, the Academy for Educational Development, the Centers for Disease Control and Prevention, the London School of Hygiene and Tropical Medicine, Johns Hopkins University School of Public Health, the International Centre for Diarrheal Disease Research, Colgate-Palmolive, Procter & Gamble, Unilever, the USAID/Hygiene Improvement Project, and the Water Supply and Sanitation Collaborative Council.

The model of GHD is an international effort in scope that utilizes lead agencies in each participating country to take primary responsibility for implementation and coordination. Tie-ins with IYS and other appropriate holidays and events were (and continue to be) encouraged.

Goals

The guiding vision of GHD: a local and global culture of handwashing with soap in order to reduce illness and death of children under five years of age.

The stated primary goals of GHD were/are:

- **Foster and support** a global and local culture of handwashing with soap.
- **Raise awareness** about the benefits of handwashing with soap.
- **Shine a spotlight** on the state of handwashing in each (participating) country.

GHD also stated in their Planners Guide “In the long term, GHD can become a powerful platform for advocacy aimed at policy makers and key stakeholders and an occasion for concrete public commitment to actions that will spur behavior change.”

Additionally: “During GHD – and the surrounding week – playgrounds, classrooms, community centers and the public spaces of towns and cities will be awash with educational and awareness-raising activity as countries unite to change handwashing behavior on a scale never seen before.”

Goal Analysis:

- **Based on behavior change:** The primary goal of GHD is to change behaviors, specifically to increase the frequency of handwashing with soap. This goal is clear, the linkages to improved health impacts provided and underscored, and because this is a specific behavior change, more easily measured in terms of change/adoption.
- **Raising awareness:** GHD recognized that in order to create and sustain behavior change over time, there must be a foundation of increased awareness of the need for it. Therefore the concept of designating a special “day” to highlight the need for this behavior was strategic and on target with the Campaign’s vision.
- **International:** Country linkages: the goal of creating high-level international visibility for handwashing with soap as a powerful way to prevent death and disease, particularly amongst children, and linking it to country-specific initiatives and programs, was very strategic. This allowed for an overarching brand and approach at the international level while allowing for country-level ownership, customization and implementation. This also recognized the need for sharing experiences and approaches (lessons learned) amongst countries to enhance the impact of GHD moving forward.

Target Audiences

The target audiences for the Campaign were:

Primary:

- Media
- Political decision makers
- Education officials and teachers
- Children

Secondary:

- General public
- Community and women's groups
- Business people
- Religious leaders
- Academics
- Celebrities
- NGOs

Target Audience Analysis:

GHD primarily targeted children, because they recognized that children are “ideally situated at the intersection of the home, school, and community, children can be powerful agents of behavior change,” according to the Planners Guide. This approach of targeting children, particularly in behavior change campaigns, can prove to be highly strategic due to their “lynchpin” status in society as influencers with peers and parents. They were also eminently suited for photo opportunities with a variety of high-level ministers such as Ugandan First Lady and Member of Parliament Janet Museveni.

This approach to audience engagement, with children at the center, can be effective if the opportunities for the secondary audiences to engage in the Campaign are clear and abundant, which was the case with GHD (see Tactics).

GHD made it clear for participating countries and organizations that reaching policy makers and key stakeholders was an important part of this effort. It is not clear how policy makers and stakeholders were engaged in GHD, but DH presumes that politicians will be interested in being part of local, highly visible, positive public events, particularly when they are part of an international effort backed by a high-quality public-private partnership.

Media was targeted in order to generate coverage on the positive impacts of handwashing. The engaging, fun nature of events – and the focus on children – lent itself to widespread media coverage, particularly at the local levels. According to sources at UNICEF, GHD/2008 generated a high volume of media coverage.

The secondary audiences represent a broader, systems-based approach to behavior change and policy advocacy. Engaging key sectors of society that can influence behavior change and policy development was a highly strategic method for creating more grassroots awareness and demand.

Key Messages

Key messages for GHD 2008 in general terms included the following:

- Handwashing with soap reduces disease and saves lives.
- Handwashing with soap is the single most cost-effective health intervention.
- Handwashing with water is not enough.

The bulk of key message development was directed towards the local/national implementing organizations, which were strongly encouraged to customize messages according to their target audiences.

Key Message Analysis:

Although GHD provided basic overarching messages in their Planners Guide, the emphasis was on the development of customized messages by the participating organizations that would incorporate local data/information on what messages might resonate most strongly according to local values and beliefs.

Therefore, the emphasis was on targeting specific audiences and then gathering, to the extent possible, information about those audiences to create messages for them. The GHD Planning Guide provided guidance on how to do this, and provided some guiding examples of the difference talking to a teacher versus a politician, for example, about the benefits and importance of handwashing with soap can make.

This approach is the basis of good social marketing: listening to and researching your audiences first to understand what messages will resonate most strongly in order to change a particular behavior(s). For example, one respondent remarked on the concept of “washing your hands is cool” when targeting children, stating how this type of message works well with children.

Tactics

Core tactics:

- High-level public private partnership to support international, national, and local-level engagement in GHD, initially targeting 20 countries for “leader” roles
- A focus on handwashing in schools and, therefore, a concentration on the development of fun, engaging activities that involved school children, teachers and other core audiences

Tactics Analysis:

The public-private partnership engaged to implement and support GHD was highly effective at developing a strategic approach that motivated key audiences to engage in activities and carry the core messages to their own constituencies. The engagement of the private sector also demonstrated the existence of a profit element and market-based approach to confronting a major health issue, providing a model of sorts for national and local level engagement of a variety of partner organizations appropriate to the particular country/region.

With the focus on children and school-based activities, a means of engaging the media and political stakeholders was enhanced. The Planners Guide provided a list of suggested events and activities to engage in at the national and local levels, along with templates for materials such as posters and press releases, thus striking a good balance between allowing for local customization of campaigns while still carrying the core GHD brand, goals and messages.

Measures of Impact/Evaluation Analysis:

DH is not aware of any data tracking changes in handwashing behaviors as a result of GHD, which is recommended long term to truly understand the level of efficacy of GHD. However, the following interim indicators provide some insight into the initial success of the Campaign:

- The initial target of engaging 20 countries in GHD was greatly surpassed, with some 82 countries documented as having participated to some extent. The GHD provides short summaries of many of these campaigns on their web site, including in some cases the number of people reached through a combination of events, distribution of materials, and media coverage.
- GHD encouraged participating organizations to track outcomes in whatever ways possible, thus sending the message that the measurement of impacts and the gathering of lessons learned is key to sustained success and outreach for ongoing efforts to change behavior.

- According to Therese Dooley of UNICEF, following GHD Proctor and Gamble commissioned a survey of the public, private and government audiences targeted by the campaign. It revealed they thought the campaign as easy, innovative, and demand-driven.

CASE STUDY #4: eTHEKWINI DECLARATION AND AFRICASAN ACTION PLAN

“(AfricaSan and the eThekwini Declaration) have been the biggest impetuses for change on the continent.”

- Abdul-Nashiru Mohammed, Regional Advocacy and Policy Advisory, Water and Sanitation, WaterAid

Summary

Our research confirmed that the eThekwini Declaration and AfricaSan Action Plan are highly notable examples of successful sanitation policy advocacy. An important part of advocating for sanitation/hygiene is tapping the opportunity provided by continental regional meetings (e.g., AfricaSan in this case or SacoSan) to help convince government ministers to focus on sanitation/hygiene.

The power of a private high-level meeting led by the South African Minister is the key advocacy lesson here. Ministers signed a document prepared by the African Council of Ministers, WHO, WSP, and RSA, which led to Prime Ministers and Presidents endorsing it during the African Union Summit. The resulting eThikwene Agreement and Action Plan set specific targets, e.g., 0.5 percent of budgets to sanitation, as well as made sanitation a part of an African Ministry on Water meeting in East Africa. Special monitoring mechanisms were established to meet the agreement and set up a separate unit.

The success of the policy advocated was founded upon a collaborative effort of key organizations involved with promoting sanitation for the poor in Africa (such as UNICEF, WHO, The World Bank, WSSCC, WSP and others). Working together, the group was able to formulate and execute effective strategic approaches for influencing national sanitation policies within the AfricaSan member nations. They included leveraging a natural competitive spirit and national pride amongst ministers about meeting their national commitments and the influence of “group think” that occurs when ministers work together in identifying the scope of the problem and potential solutions. The results include confidence building, unity of key messages and a common desire for tangible action.

As a result of AfricaSan, Kenyan and Ugandan appointed Ministers of Sanitation, a very important development according to David Kuria, of Ecotact: “Sanitation policy development on a national level has been important. The appointment of a Minister of Sanitation to the Kenyan Cabinet has also been critical...the policy provides a roadmap for intervention that has been lacking. It gives the country a focus on sanitation. It also stimulated the development of a national group with many different actors involved to advise the government on implementation of the policy.”

Caroline Toroitich of the Netherlands Development Organization (SNV) also commented on the positive impact from the establishment of a Ministry of Public Health and Sanitation by the Government of Kenya. “Previously sanitation had no Ministerial anchor,” Toroitich said. “Reform, international pressure and new awareness led to people looking at prevention rather than cure. Recognition that many of Kenya’s health problems are preventable and sanitation related...so more linkages to Ministry of Health. Now sanitation is gaining space in health, education and water sectors. Today, in any government office that is developing something in water, they have to develop something on sanitation before they do something in water.”

Background

AfricaSan+5, which convened in 2008, following up on the first AfricaSan conference held in 2002, helped to create the Millennium Development Goal for Sanitation. In 2008, AfricaSan was the climax of a continent-wide process to assess progress, challenges, and lessons towards achieving the sanitation MDG. AfricaSan also marked the official launch of the International Year of Sanitation (IYS).

The AfricaSan conference was organized under the auspices of AMCOW and its partners: the African Development Bank (AfDB), the United Nation's Children's Fund (UNICEF), United Nations Secretary General's Advisory Board on Water (UNSGAB), the Water and Sanitation Program Africa (WSP-Africa), the Water Supply and Sanitation Collaborative Council (WSSCC) and World Health Organizations (WHO). The conference brought more than 600 delegates together, including 32 African government ministers responsible for sanitation.

Goals

The stated primary advocacy goals of the AfricaSan meeting were:

- Assess the status of sanitation/hygiene in African to meet the MDG by 2015 and goals of the IYS in Africa.
- Review actions taken, share lessons learned.
- Develop an action plan to improve sanitation.
- Generate political commitment/political will.
- Raise the profile of sanitation.

This resulted in the eThekwini Declaration, which contained a number of commitments to advocacy actions and goals, including:

- Raising the profile of sanitation in Africa in general and among high-level decision makers within key policy-related documents (e.g. strategies for reducing poverty reduction).
- Developing sanitation information and monitoring tools to report on in two years.
- Building capacity to implement sustainable sanitation programs.
- Developing national sanitation/hygiene policies within twelve months of AfricaSan and creating one national plan for meeting the sanitation MDG.
- Developing public sector budget allocations.

Goal Analysis

- The eThekwini Declaration, which resulted from AfricaSan, was a substantive agreement – signed by numerous African leaders representing several countries – that focused on key aspects of meeting the sanitation MDG. Through the deliberative process of bringing several African countries together to create a mutually agreed upon plan of action, this created a document with specific commitments and monitoring requirements.
- These goals were quite comprehensive, including most, if not all, of the critical aspects of reaching the MDG, from raising the profile of sanitation to creating separate government budgets for it and developing monitoring systems.
- These goals were *commitments* by the participating countries, thus making them more “binding” in nature and, therefore, more likely to be adhered to.
- Real outcomes were expressed in these goals, such as the development of country-specific action plans (and the commitment to report on these in one year's time).
- Monitoring and evaluation was embedded in several of the goals, making it clear from their inception that the intent was to follow and report on progress – or lack thereof.

Target Audiences

Target Audiences of AfricaSan included:

Primary

- Government decision makers of African countries
- Major NGOs involved in sanitation
- United Nations and its agencies

Secondary

- Development banks

- Donor agencies
- Private sector
- African Union
- “Regional and national actors” able to scale up sanitation efforts, particularly during IYS

Target Audience Analysis:

The target audiences of this public policy advocacy effort reflect the strategic choice to focus on national government decision makers who have the power to take action. AfricaSan also closely engaged the key NGOs and UN organizations in the process of creating a viable level of actions and commitments for African governments to take on in relation to improving progress towards meeting the MDG on sanitation. Finally, the eThekwini Declaration identified other key entities (the secondary audiences, above) who had important “supporting” roles to play towards progress on sanitation.

Key Messages

Key messages, as presented by the eThekwini Declaration, to the high-level target audiences focused on the following themes:

- Integrated all five of the IYS core messages
- Leadership on this issue of sanitation
- Accountability for actions and outcomes
- Collaboration
- Action and awareness
- Pragmatic steps for progress, and reporting on same

Key Message Analysis:

AfricaSan linked efforts and messages closely with IYS, resulting in a more sustained, strategic approach to elevating the issue of sanitation, particularly among high-level audiences.

The tone of the eThekwini Declaration balanced leadership and accountability with inclusion, support, and collaboration. This leadership in turn spurred other country-level organizations to take action that aligned with the eThekwini Declaration, as it was seen as the premiere standard for African engagement to lead and improve sanitation at the continental and national levels. It was integrated into other sanitation advocacy efforts such as IYS.

Detailed information on message dissemination and channels was not available.

Tactics

Specifics on advocacy tactics to promote AfricaSan were not available. However, DH offers the following observations about some general tactics on how AfricaSan more broadly promoted and elevated the issue of sanitation:

- By tying in directly with IYS and other key high-level (and in most cases high visibility) meetings in Africa following the conference, AfricaSan was instrumental in keeping the “drumbeat” of visibility and sustained awareness and calls to action on sanitation going.
- Through the publication (and presumably broad distribution) of the eThekwini Declaration, AfricaSan put forth a significant expression of concern, action, commitment and accountability – and the call for others to do the same across Africa.

Tactics Analysis:

According to Therese Dooley, Senior Advisor, Water, Environment and Sanitation Section, Program Division of UNICEF: “The eThekwini Declaration and AfricaSan Action Plan were very important in raising awareness, political will and expertise on sanitation across the continent...An important part of advocating for sanitation/hygiene is tapping the opportunity provided by the AfricaSan meetings to help convince government ministers to focus on sanitation/hygiene by agreeing to activities such as

the eThekweni Declaration and Action Plan. By establishing such an agreement within that forum, UNICEF and partners could take advantage of the natural motivations (national pride in meeting commitments), confidence building, unity of key messages and desire for action on sanitation and hygiene.”

The AfricaSan approach of targeting high-level government decision makers to create specific actions and commitments region-wide, and by so doing co-opting other key partners such as NGOs, donor organizations and the private sector in the effort as well, was a highly successful approach with demonstrable measures of progress and impact.

Measures of Impact

The Action Plan developed at AfricaSan contained a list of eight priority areas of focus, with corresponding actions, designated leadership, positive examples, and indicators for each. These priority areas range from policy development to demand-led sanitation efforts, along with measurement of impacts.

The Plan also called for the development of country-level action plans on sanitation, and the designation of .05 percent of GNP towards sanitation by all participating countries (no evaluative data available on this indicator).

Outcomes/Evaluation Analysis

There has been some interim progress visible on stated impacts. For example, at least 16 countries have developed sanitation action plans following AfricaSan. The commitment was to monitor progress and report on it at the next AfricaSan meeting in 2010.

The Action Plan developed by AfricaSan 2008 provides a high level of specificity on what impacts will be measured and, therefore, how progress will be tracked towards the MDG at both the continental and country-specific levels.

CASE STUDY #5: WHERE WOULD YOU HIDE?

Summary

The theatrical nature of the travelling exhibition entitled, “Where Would You Hide?” and its key message, “Sanitation is Dignity” (“Sanitation = Dignity”), reflects an unconventional presentation of the topic in a manner designed to encourage public discussion and break the taboo associated with defecation.

The blunt, visual representation of businessmen (reminiscent of professionally dressed high-level decision makers themselves) openly defecating in an urban setting in a developed nation with sanitation was a tendentious and attention-getting approach. It mirrors similar advocacy efforts carried out by other water and sanitation groups, (e.g., WaterAid UK’s “Lucy Loo” reporting on “How much do you love your loo?” and World Toilet Day jogging marathons in which participants ran dressed as toilets).

Background

The German Toilet Organization (GTO), founded in 2005, is an offshoot of the World Toilet Organization (WTO) based in Singapore, which strives to unite various toilet organizations and claims 195 members in 56 countries around the world. Starting in 2006, GTO created a traveling exhibit entitled “Sanitation is Dignity,” depicting everyday citizens attempting to defecate in public. This exhibit toured numerous cities in developed countries in '08 and had a presence at some key IYS events throughout the year.

Goals

There were no stated goals for the “Where Would You Hide” traveling exhibit, although it is the general mandate of the WTO and the GTO to raise awareness about sanitation. Jack Sim, the founder of both the WTO and the GTO, generally states his organization’s aims as follows:

- Break the taboo on defecation and the need for sanitation/hygiene for the poor in developing countries in order to make it more of a mainstream issue of focus and concern.
- Increase grassroots demand for improved sanitation.
- Employ a market-based approach to address the dysfunctional sanitation market for the poor, based on a belief that dependence on donations and government programs is not enough to adequately address the problem.
- Emotionally connect with the poor by branding toilets as status symbols.
- Accelerate accomplishment of the MDG7 sanitation goal.

Goal Analysis:

The “Where Would You Hide” traveling exhibit successfully addresses a number of these organizational goals by:

- Helping to raise awareness with the general public and targeted decision makers in developed nations for the need for improved sanitation for the poor using an untraditional approach.
- Breaking the taboo of sanitation by presenting a visually engaging, thought-provoking means of spurring more top-of-mind awareness.

There was no evaluation done in the cities where the exhibit appeared to analyze pre/post levels of awareness of sanitation issues. Thus, DH cannot conclude to what extent the exhibit impacted public awareness in those cities.

Target Audiences

- General public in the cities of developed nations where the exhibit had a presence
- Key meetings of government decision makers in developed nations focusing on sanitation
- News Media

Target Audience Analysis:

- Public: By targeting the public with an exhibit, this effort attempts to instigate interest and “light” awareness. The exhibit itself did not contain a particular call to action.
- By having a presence at key meetings at the United Nations and other notable organizations during important sanitation meetings, the exhibit helped to support increased focus on sanitation and underscore the dignity message.
- Media attention was definitely generated by this unusual, provocative exhibit, thus generating coverage on the overall issue of sanitation for the poor. This was, by far, the most important target audience for this initiative.

Key Messages

The core campaign messages were “Where would you hide?”; “Sanitation = Dignity”; and “Why Sanitation?” Secondary campaign messages included: health, social development (in terms of gender equality, education access and dignity), wealth (poverty reduction, economic growth) and environmental protection (healthy living conditions, protection of water and ecosystems).

Key Message Analysis:

The core campaign messages and visual displays tapped the sentiments of shame, embarrassment and a desire for privacy – messages campaign organizers believed most resonated with high-level decision makers and would capture the attention of news reporters.

The core message (“Why Sanitation?”) prompted observers to understand why the issue is important.

The Campaign’s supporting messages about the health, social, economic and environmental impacts of sanitation were closely tied to the IYS key messages and provided an element of consistency across both advocacy initiatives.

Interestingly, research interview informants most often stated “Sanitation is Dignity” when asked to recall what sanitation/hygiene slogans and key messages they recalled. However, in their remarks, the majority of respondents shared negative views about the message for missing the mark because it wasn’t easy for individuals to relate to it and it did not incite a call to action. However, the fact remains that it was the most often and correctly recalled message among those informants who could recall any message or slogan at all. Responses also indicated that the Campaign images were the sanitation advocacy images most often recalled by respondents.

Tactics

The inherent tactic in this initiative was the exhibit itself: a visible, public display that aimed to garner public and press attention and also engage and provoke high-level decision makers (especially during international conferences).

Measures of Impact

There were no formal measures of impact as part of this initiative.

SUMMARY INSIGHTS FROM ADVOCACY CAMPAIGN EVALUATIONS

Goals:

- Define goals so they are tangible and measurable.
- Make them easily understood.

Target Audiences:

- Segment target audiences beyond broad groups, even when conducting global advocacy efforts.
- Clarify target audiences' priorities.
- Analyze the values, communication channels, interests and concerns of target audiences to inform strategies, messages, dissemination channels and calls to action.

Key Messages:

- Tailor messages based on data about target audiences' beliefs, values, perceived barriers to and opportunities for positive action.
- Use language that is easy to understand (not technical or jargon-based).
- Always include a call to action.
- Consistently use key messages (repetition and clarity are critical for building awareness over time).

Tactics:

- Relate tactics directly to goals and strategies.
- Tailor tactics to each target audience.
- Integrate measures of success into each tactic.

Measures of Impact/Evaluation:

- Tie measures of impact and results to the overarching goal.
- Define what is being measured, who is doing the measurement, and how it will be carried out.
- Adopt a methodology that supports information sharing, learning and identification of best practices.

The 'Pull' of Good Programming (With Advocacy)

To start, it should be noted that around two-thirds of our research interview respondents appeared to be knowledgeable about sanitation/hygiene. To try to determine how much each of our informants knew about the sector, our survey asked: "Over the past two years, can you describe one highly successful program that specifically targeted sanitation/hygiene?" Two-thirds of our respondents could answer the question with specifics about the sector. The remaining one-third of our respondents had no clear answer to the question or responded with examples outside of the sanitation/hygiene sector.

DH documentary and interview research found that much of the best sanitation/hygiene programming is fragmented, diverse and so numerous as to be overwhelming. One look at the Water Aid website or the IYS online library shows a long list of programming approaches. As Ravi Narayanan, vice chair of the Asia Pacific Water Forum, noted, "At the level of individual projects, they are more fragmented – each country has several organizations that have taken this forward."

Thus our mandate as part of this research – to see what program-level advocacy existed to draw investments to, is incomplete. DH findings underscore the need for more research to be done, for data to inform the high-level decision makers about the best programming solutions and calls to action promoted via sanitation/hygiene advocacy.

THEORY OF CHANGE

Is a coherent Theory of Change reflected in sanitation advocacy and communications materials, messages and activities? (Is the sector's Theory of Change being clearly articulated and understood? Has it resonated with target audiences?)

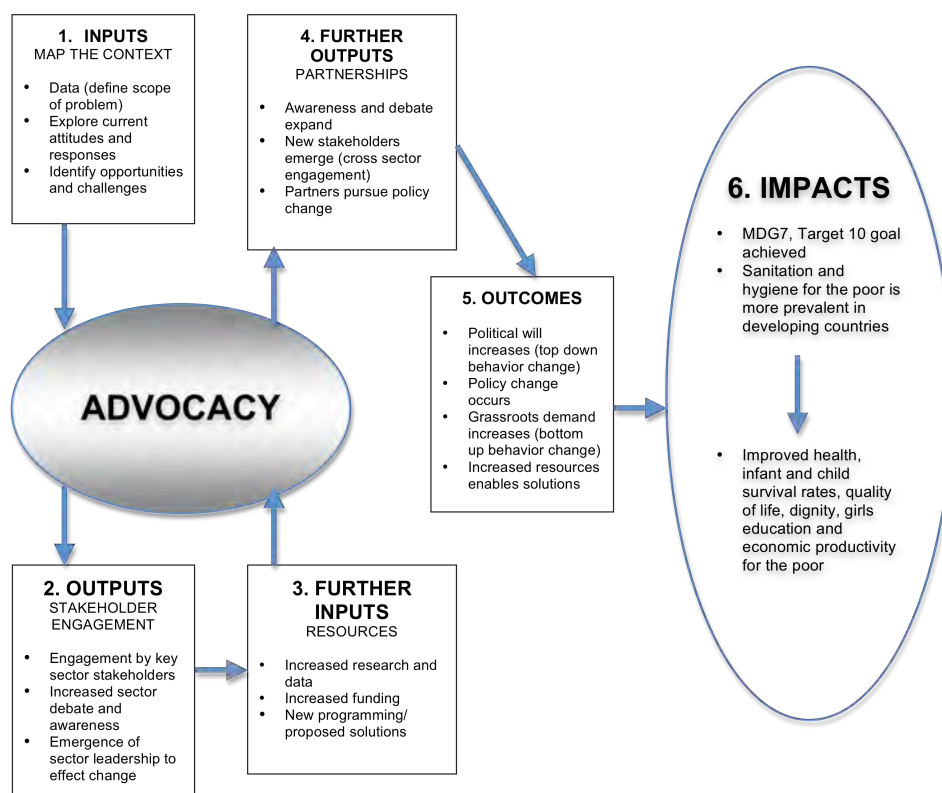
In order to develop an updated Theory of Change for the sanitation/hygiene sector that provides greater understanding on the role of advocacy, DH drew from a number of sources. These included the data in this study (particularly interviews with sanitation/hygiene advocates), along with the DH teams' collective international advocacy experience on a variety of social and environmental issues.

In addition, DH wanted to provide the Foundation with a broader perspective on advocacy from outside the sanitation/hygiene sector in order to enrich our recommendations – and Theory of Change – with key lessons learned from other international development issues that have utilized advocacy to increase their impact dramatically over the long term.

DH conducted interviews with a variety of Advocacy Specialists (see “Advocacy Specialist Informants” list within “Section II: Research Process” at the start of this document).

DH focused especially on the strategic communications histories of the HIV/AIDS and climate change sectors to provide a larger context and deeper understanding of the key advocacy strategies and approaches that have proved successful across sectors. Both of those case studies are presented below, before turning to our proposed Theory of Change.

Data Harvest Theory of Change for the Sanitation/Hygiene Sector



Based upon insights garnered from this research project, DH has developed a revised Theory of Change, shown above, for the role played by advocacy in helping to achieve the Millennium Development Sanitation Goal.

This version reflects the findings of this research project: a review of key sanitation/hygiene advocacy initiatives of the past two years, a review of the key components of successful advocacy for the HIV/AIDS and climate change sectors and our own advocacy communications and Monitoring and Evaluation expertise.

1. INPUTS: Map the Context

The first phase of our revised Theory of Change for the sanitation/hygiene sector represents the initial review of research data that defines the scope of the issue and having done so, examines key opportunities and challenges for attempting to solve the problem. This phase is shaped by the context of the examination (e.g., geographic scope – global, continental region, national or local community) and requires the mapping of opportunities and challenges.

In a national context, a major challenge to improved sanitation/hygiene for the poor might be a lack of political will and thus, insufficient government funding, guidance and policies necessary to improve the situation.

An opportunity may arise in which a nation's Ministry of Health does have the desire to improve the health and child mortality consequences of inadequate sanitation/hygiene for the poor and with donor funding and appropriate controls, remedial action can begin to be implemented.

At the community level, a lack of understanding by local citizens of the negative health and environmental impacts of open defecation presents a challenge. This offers the opportunity to implement programs that incentivize sanitation/hygiene services through an award system for good practices or by leveraging the sense of pride a family experience by installing a sanitation/hygiene system in their home.

Mapping provides clarity about the current debate, the key stakeholders involved and their roles in helping or hurting efforts to solve the problem. With that information, potential solutions supported by advocacy strategies and tactics can be devised to move the issue forward.

Advocacy

By strategically utilizing the information produced in *mapping the context*, the initial advocacy phase engages stakeholders to examine the issue.

2. OUTPUTS: Stakeholder Engagement

As stakeholders become educated about the importance of the issue, leaders emerge from stakeholder groups and take on the major challenges and opportunities involved with finding solutions.

3. FURTHER INPUTS: Resources

More aware and educated stakeholders become a more powerful voice for action and advocacy. That voice leads to a new input – resources for expanded research, new programming, the testing of proposed solutions and sector-wide learning.

Advocacy

Expanded resources support a more comprehensive phase of advocacy that reaches out to a wider set of target audiences.

4. FURTHER OUTPUTS: Partnerships

As awareness, education and debate about the issue increase, new and diverse stakeholders (potentially from multiple sectors) may join forces as partners or coalitions to achieve policy and behavior change.

5. OUTCOMES

These efforts, supported by advocacy communications, produce key outcomes necessary to achieve the desired *IMPACT* (i.e., goal). Advocacy efforts that produce critical outcomes typically reflect a more sophisticated approach with strategies that connect to target audiences, tactics that reflect strategies, key messages that reflect target audience values and measures for evaluation to inform and improve future advocacy.

6. IMPACTS

These include reaching the MDG Goals, increasing the prevalence of quality sanitation/hygiene for the poor in the developing world, saving lives, improving economic productivity and quality of life.

ADVOCACY LESSONS LEARNED FROM GOOD PROGRAMMING

Some “Pull” factors from advocacy around programming approaches helped to inform the Theory of Change. Ultimately, what emerged from the research on the ‘pull’ were three cases in which there was a clear lesson learned about how good programming ‘pulled’ investment and provided viable solutions that could inform advocacy ‘calls to action’.

Below, DH presents what emerged from the survey as best programming followed by three case studies from Indonesia, Mozambique and Kenya.

Respondents Top Program Choices

While CLTS is a drive to create demand rather than a programming approach itself, 22 respondents mentioned CLTS as a good approach, 20 mentioned a variety of government initiatives, 10 mentioned hygiene (e.g., Global Handwashing Campaign or local hygiene programming), five spoke about IYS specifically even though it is not a program, and 14 informants mentioned specific projects carried out by UNICEF, WaterAid or the World Bank/WSP.

The one-quarter of our respondents who spoke about CLTS as the best sanitation/hygiene programming pointed to its collaborative, grassroots and decentralized approach that brought together many individuals to focus on sanitation as a need. Thus, DH believes CLTS also may serve as an advocacy technique for creating grassroots demand for sanitation/hygiene because of the large number of individuals it attracts to understand the problem and develop solutions. It is also worth noting that of the one-fifth of our respondents who mentioned governmental actions, most cited examples that also utilized a decentralized approach like CLTS.

Case Studies

1. **Community Based Total Sanitation (CBTS) in Indonesia bolstered by WSP and AUS Aid who organized private “meetings” and site visits (advocacy) and link their actions as being spurred by IYS**

A clear success that has emerged from the research is the generally positive view of the behavior-change, bottom-up approach of CLTS and related advocacy activities. It is lauded for its scale-up in Bangladesh and India, due in part to successful national incentives such as Presidential awards – financial rewards for villages that are 100 percent open defecation free, etc. CLTS’s spread from India to Indonesia also offers the best example of how the ‘pull’ of good programming informed advocacy that resulted in expanded sanitation/hygiene for the poor.

Some respondents, however, expressed concern about the “real” success rates and long-term sustainability of most CLTS systems, reflecting the belief that many CLTS systems ultimately may not meet specified minimum standards for sanitation and are unsustainable beyond one to two years. Dick van Ginhoven, senior water and sanitation advisor for the Dutch Ministry of Foreign Affairs, remarked: “CLTS mobilizes large numbers of people. It inspires social responsibility that everyone follows. One caveat, though, is that research suggests it is only effective when 95 percent of the population adopts open-free defecation (OFD). If more than five percent of the community fails to adopt, then the benefits are not realized.”

Two reports by Nina Shatifan et al.⁵ about the recent ‘renaissance’ of the sanitation/hygiene sector in Indonesia showed how national-level advocacy, employing high level site visits by

⁵ CLTS – Learning from Communities in Indonesia Owin Jamasy and Nina Shatifan (May 2008) and *The CLTS Story in Indonesia: Empowering communities, transforming institutions, furthering decentralization* (2009)

ranking members of several ministries to Community-Led-Total-Sanitation (CLTS) projects, led to political consensus to implement their home-grown version of Community Based Total Sanitation (CBTS). The description below is taken from two interviews and triangulated by two donor reports.

"In September 2004, WSP-EAP first arranged for Kamal Kar...to visit Indonesia for a feasibility assessment. ...He concluded that CLTS would work very well in Indonesia, provided we were able to tailor it to local habits and preferences. He presented his findings...to the central government stakeholders including high-level officials from the Ministries of Planning (BAPPENAS), Health, Public Works and Home affairs..." Shatifan goes on to note that, "There were a few key decision makers like B. Hernowo and O. Mungkasa (Bappenas) (National Planning Ministry), D. Wartono and Suprpto (Health Ministry) and J. Kirwanto (Ministry of Public Works), who were intrigued by what they saw and heard in Kamal's presentations about Bangladesh and India, and wanted to find out more. WSP-EAP seized this opportunity to organize a study tour for Indonesian... Participants...included not only Health Ministry staff but also high level officials from the Bappenas, the Ministries of Home Affairs (Community Empowerment and Regional Development Departments) and Public Works. Local government Health Departments of two WSLIC districts also joined the visiting team..."The visiting group from Indonesia...could see the potential for CLTS and returned home as a strong group of advocates for CLTS, as borne out by their post-visit report to Bappenas and their respective ministries."

As a result of these efforts, "in September 2008, the Minister of Health, Dr. S.F. Supari, launched the National Strategy for Community-based Total Sanitation (CBTS) and a national program for 10,000 community-based total sanitation villages."

2. **Community Led Total Sanitation (CLTS) in Mozambique linking ecological sanitation/hygiene**

An entrepreneur and advocate of a different kind is Feliciano dos Santos of Mozambique⁶ – the Goldman Environmental Prizewinner 2008. He promotes sanitation/hygiene practices with music that he performs as part of his grassroots advocacy outreach to remote villages of Mozambique. He also presents low-cost, sustainable, ecological sanitation/hygiene solutions.

Dos Santos' commitment to sanitation/hygiene advocacy stems from personal experience. He grew up in rural Mozambique with no clean water or proper sanitation and is disabled from polio. He believes that sanitation and water supply issues must be solved in order for other development projects to take root.

Using his internationally-recognized band, Massukos, Santos sings about the importance of water and sanitation and the popularity of his songs among villagers leads to their repetition in the community, breaks down the taboo about discussing open defecation, increases understanding about good sanitation/hygiene and propels action via locally-determined latrines or other hardware, handwashing, and ecological sanitation, etc.

In his role as director of the Mozambique NGO, Estamos, dos Santos promotes a process that uses composting toilets, called EcoSans, to transform human waste into nutrient-rich agricultural fertilizer. Typically, a family will use an EcoSan for a number of months, adding soil and ash after each use. The pit is then buried and left for eight months, and the family moves on to another pit. During the eight months, all the harmful pathogens die off, leaving a rich fertilizer that can be dug up and used in the fields.

The compost not only provides natural fertilizer, but also enhances the soil's water-retention capacity. Families using ecological sanitation report markedly fewer diseases, a 100 percent

⁶ <http://www.goldmanprize.org/node/712>

improvement in crop production and improved soil retention. His program is now serving as a model for other sustainable development programs in East Africa.

As an insider, dos Santos and his team lead participatory workshops in which villagers come to understand their sanitation options, and, if they like, choose the option they prefer and build it themselves. Since Santos and Estamos began their work in 2000, they have helped thousands of people in hundreds of villages gain access to clean water and ecological sanitation. This is a considerable achievement given the lack of infrastructure in the remote villages served by Estamos. The organization continues to grow and is now working in three districts in northern Mozambique.

Since dos Santos began his music-based outreach, people throughout Mozambique have begun to focus more on the country's rural sanitation problems. By connecting with Mozambique's rich performance traditions, Santos and Estamos connect to villagers in a culturally appropriate way. Importantly, he is not only a major champion, but also a well-known public spokesperson in East Africa, as they also include important hygiene messages within their programming and their songs that are widely broadcast.

3. **Private Sector/Entrepreneur Urban Public Toilets Nairobi, Kenya, bolstered by business marketing techniques and advocacy around 'sanitation for all.'**

CLTS is primarily known as a rural solution, one that requires more land than capital, more social cohesion – or ability to use peer pressure or disgust – than is normally possible in urban centers. There is a dearth of clear programming – or advocacy about it – in urban areas (other than quite expensive national wastewater treatment plants or pilot small 'condominium' wastewater treatment plants in Latin America).

Almud Weitz of WSP said, "Urban sanitation is trickier (than rural). Little local sanitation efforts won't be enough. As much as the government is now adopting the concept and language of community empowerment, empowerment can't replace the legitimate role of government for urban infrastructure needs. There is a need for capacity building of local government – local government is needed that knows how to plan and finance for urban sanitary infrastructure."

One case study in Kenya, however, illustrates the pull of private-industry programming in urban areas promoted via advocacy – lko toilets, developed by David Kuria, an Ashoka Fellow and The Schwab Foundation's Africa Social Entrepreneur of the Year Award for 2009.

During his survey interview by DH, Kuria explained he has been on a mission to ensure that the experience of using city toilets (in Nairobi) is both pleasant and memorable. Disturbed by lack of toilets in most Kenyan towns and informal settlements, he quit a well-paying job as an architect with a non-governmental organization to engage in the 'toilet' business.

"I quit at the time when polythene papers were being used as toilets in Kibera and other slums," Kuria said. "I felt I could play a role in improving people's lifestyles." With his ecological lko toilets, Kuria plans to convert human waste into energy-saving biogas to light premises or produce natural manure that is packaged and sold at affordable prices to improve agriculture. He says urine will be collected in tanks and processed into urea to be used for top dressing crops instead of Calcium Ammonium Nitrate, an expensive compound that is unaffordable for most Kenyan farmers.

Kuria also advocates the use of his lko toilets by slum dwellers through marketing advocacy techniques that emphasize dignity and provide enjoyment. "Besides the snacks, the music and a businesslike atmosphere in and around the toilets, we are talking to politicians to hold public functions within the 'lko' toilet." His efforts appear to be working; Kenyan Public Health

Minister, Beth Mugo, reportedly planned to sign contracts with popular musicians to entertain fans at the Iko toilets.

Music systems also are being installed to belt out tunes designed to soothe an individual's nerves while answering the call of nature. Already, Uganda and South Africa have approached Kuria for 'Iko' toilets.⁷

Respondents' Views on Organizations Doing Advocacy

DH concludes with an examination of what has and has not worked in sanitation/hygiene-specific advocacy efforts by examining respondents' views of what organizations and/or individuals have helped spotlight the urgent need for sanitation/hygiene for the poor.

In Question 4 of our survey, DH asked informants: *Looking now at specific organizations or individuals, which ones have most effectively increased the focus on sanitation/hygiene for the poor (in your country/region) over the past two years?* The answers to this question offer a more in-depth understanding of which organizations and individuals were having the most impact and why on sanitation/hygiene efforts. The results provided a ranking of organizations (see table below).

Frequency and Proportion of Top Organizations*	Number of times mentioned	Percentage of 103 respondents who mentioned the organization
UNICEF	39	21.4%
WaterAID	30	16.5%
Government	28	15.4%
World Bank/WSP	28	15.4%
PLAN	11	6.0%
WSSCC	9	4.9%
CARE	7	3.8%
AusAID	5	2.7%
Feliciano Di Santos	5	2.7%
GATES Foundation	5	2.7%
USAID	5	2.7%
DFID	4	2.2%
ADB	3	1.6%
IYS	3	1.6%
TOTALS	182	100.0%

*These organizations were mentioned by a minimum of three different respondents.

UNICEF was the most frequently mentioned organization, with WaterAID coming in second (although the two organizations were often mentioned together). Government was third, followed by the World Bank/WSP. After these top four organizations/entities, there is a dramatic drop in frequency of mentions for the rest of the list.

Insights on Overall Advocacy Approach

⁷ <http://urbanhealthupdates.wordpress.co> and <http://www.ashoka.org/node/5640>

In our follow-up to Question 4, DH asked respondents to share **the main reasons why they found these people or organizations most effective**. Their answers shed light on issues and approaches that could spur a greater level of positive action on sanitation/hygiene.

Informants cited UNICEF and WaterAID for many of the same reasons. The most frequently mentioned reason was those organization's community-based approaches to sanitation/hygiene. This was particularly so in the case of UNICEF.

For example, respondent Abdul-Nashiru Mohammed of WaterAID said, "UNICEF and WaterAID have a clear focus on sanitation that has led communities to look at their own environments to produce community-based results suitable to their circumstances." He added that, "WaterAID has also supported poor community access. They have a huge portfolio on equity, inclusion and gender."

Both UNICEF and WaterAID were often mentioned as having a strong focus on advocacy, particularly in terms of building partnerships and coalitions that focus on engagement of stakeholders at the international and country levels. According to respondent Ravi Narayanan of the Asia Pacific Water Forum, "UNICEF and WaterAID have built coalitions for change, helped governments build partnerships and facilitated an enabling environment at the national level. Leadership at these organizations took the issues seriously."

Both organizations were also cited by respondents for providing important data, studies and surveys that have helped increase the efficacy of both advocacy efforts (by enabling them to reflect local/nationally-based realities and beliefs) and on-the-ground programming for sanitation.

Governments were third in frequency of mentions. Some of the reasons cited that governments had positive impacts on sanitation/hygiene were (1) high levels of internal collaboration that led to a stronger, more coordinated focus on sanitation/hygiene, and (2) engagement of high-level national government figures provided strong visibility and engagement on sanitation/hygiene.

A respondent from CARE Vietnam noted: "Government can use its funds and mobilize donors and the private sector." Therese Dooley of UNICEF added: "Governments have been effective with developing policies, strategies and funding."

Fourth in frequency of mentions was the World Bank/WSP, also seen as a leader in stakeholder engagement. According to Sering Jallow of the African Development Bank, "WSP has drawn attention to the problem and brought political and other leadership to the table." Further commenting on WSP's impact on scaling-up sanitation/hygiene, he adds, "They have also moved from many small pilot programs (\$1-2 million project) to the fewer, larger scale (\$10-30 million project) approach."

In terms of individuals mentioned, musician and sanitation/hygiene advocate, Feliciano Di Santos of Mozambique, was the only one to make the list. Those who did mention him noted his creative, engaging approach (through popular music) that has helped break taboos surrounding sanitation and, as a result, engaged more of the public in the issue. Respondents also praised his culturally appropriate approach.

The answers to questions 4 and 4a also suggest an overarching approach for developing and implementing advocacy efforts for sanitation/hygiene focused on high-level decision makers, as follows:

- **Coalitions and partnerships** can be major drivers for action by national and international decision makers by improving institutional commitment and capacity. They also provide opportunities for significant leadership – and therefore increased visibility – for sanitation/hygiene efforts.
- **Documenting and sharing lessons learned and best practices** at all levels improve the odds for both program success and government support. Government stakeholders are more apt to endorse proven interventions. Advocacy activities bring those successes to the fore.

- ***Creating cross-sectoral linkages*** between sanitation and education, poverty reduction and gender issues (among others), help to broaden visibility for and engagement on sanitation/hygiene issues.
- ***Using clear, culturally appropriate messages*** strengthens engagement and action from grassroots to senior leadership levels. This requires data about target audience attitudes and beliefs to determine the best messages.

Strategic Objective #2

Assess the extent to which sanitation is understood as a critical concern for social and economic development and what could make it so.

DH begins by addressing the first part of the strategic objective: *Assess the extent to which sanitation and hygiene is understood as a critical concern for social and economic development.*

Our survey revealed that sanitation is well understood by the majority of our respondents (more than 88 out of the 103 respondents agreed that “*sanitation and hygiene are important as compared to other development sectors.*”

From a continental perspective, this was more or less equally divided among the 80 percent of Asian, 84 percent of African and 93 percent of global respondents. (See “APPENDIX, 2. Questionnaires, a. Data Harvest Telephone Survey Questionnaire” for details on questions.)

During the pre-test DH discovered many respondents mentioned water rather than sanitation or hygiene when asked about all three. Therefore, the decision was made to ask about sanitation and hygiene only in the remainder of the questionnaire.

Q1R-Importance of Water, Sanitation and Hygiene					
		Region of Respondent			
		Africa	Asia	Global	Total
Average or Low Importance*	Count	7	6	2	15
	%	15.6%	19.4%	7.4%	14.6%
Very Important**	Count	38	25	25	88
	%	84.4%	80.6%	92.6%	85.4%
Total	Count	45	31	27	103
	%	100.0%	100.0%	100.0%	100.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Open-ended remarks by some respondents to the above question underlined this finding. For example, Seerling Jallow, Manager of Water and Sanitation at the African Development Bank said: “You cannot achieve MDGs without water and sanitation because it is the foundation for everything, from girls’ health to mortality to clinics to poverty alleviation to health care.” Merri Weinger of USAID’s Environmental Health division also expressed strong feelings about both the health and economic impacts: “Diarrheal disease is one of the top three killers of children under age five, thus water, sanitation and hygiene are important to sustainable development, important to maintain productivity, and there is a clear connection between diarrhea and malnutrition.”

What Could Make It So?

Turning our attention to the second half of strategic question 2: “Assess the extent to which sanitation is understood as a critical concern for social and economic development **and what could make it so,**” good insights may be culled from the open-ended answers of respondents to survey questions 7a and 7b: “*Let’s step into the future for a moment. Ten years from now, imagine your country/region with all basic sanitation/hygiene needs for the poor being met. If you were asked to name the two most important factors that led to that success, what would these factors be?*” This was a “visioning question” that provided an opportunity for respondents to imagine a successful outcome and envision the key actions that occurred to bring about this ideal outcome. Since informants were required to name two separate factors, the content of their responses is presented according to each factor.

Success Factors

Q7a: Factor #1 Responses

- Political Will and Government Action or Legislation - 34
- Coordination and Good Planning - 27
- Global Awareness & Activism - 19
- Funding & Resources -12

Q7b: Factor #2 Responses

- Coordination and Good Planning - 34
- Advocacy Campaigns -17
- Political Will and Government Action - 12

Political Will and Government Action or Legislation

This was the most common answer of all with 46 out of all 103 respondents mentioning it as either the first or second factor necessary for achieving sanitation/hygiene for the poor. In her response, a senior Secretary within the government of India underlined the importance of government action to motivate change also expressed by other informants. "The huge political commitment was key to the success of this Clean Village Award/ CLTS project," the Indian secretary said. "The president (of India) himself and the PM also participated in the program. For example, the president of the country gave the awards. That and the awards set the national priority.... The first year, zero winners, this year 20,000 villages won!"

A significant number of respondents also saw the use of good sanitation/hygiene programming as a political advantage for government representatives seeking re-election. According to a senior staff person of WSP Asia, "It is the best way to keep your citizens safe and happy – the governance factor: Improve a government representative's accountability and political ratings for politicians. They need to be sold that if they improve sanitation in their district it will help them get elected and they need to make it a part of their campaign declarations."

Almud Weitz of WSP also discussed the growing awareness of the political advantages associated with support for sanitation/hygiene. "We do understand policy-makers' motivations a bit better now," he said. "We've also moved our focus from the host ministry folks, who already know, to influencing policy-makers and local government officials. It is hard to change the paternal approach of those in power at the local level.... Decentralization is still relatively young, along with cultural factors, and people don't yet demand services. There are some Bupatis (Indonesian District Chiefs) emerging who are more conscious of doing what they can in this sector as a means of helping themselves stay in power."

The Government of Ghana has also taken political will to a new level of action. It established an employment program three years ago that provides 50,000 jobs for unemployed youth in water and sanitation.

Finally, political will may need an expression other than laws; some respondents expressed that good legislation already existed but political will was necessary to enforce the laws already in place and achieve results.

Global Awareness and Activism

Respondents who named global awareness and activism as key factors to the success of sanitation/hygiene also mentioned advocacy activities in one way or another in their remarks. Comments from such respondents included: "Massive awareness-raising program about economic impact – like the revolution that we've had with the climate change issue. This was achieved largely via media campaigns and pressure from scientists."

Another respondent said, “Community empowerment. The development community needs to ‘unlearn its top-down approaches’ and instead train people to leverage the community to make decisions and take action.”

Respondent Abdul-Nashiru Mohammed, Water Aid’s Africa Advocacy and Policy staff person, summarized: “We need to know what thoughts are in their [government officials] heads when they plan a budget. We also need to hold them accountable to their promises – especially during political campaigns. We also need to engage citizens to contribute – especially with their local governments.”

Coordination and Planning

Respondents who deemed this factor as important called for the right approach and a clear plan with coordination and commitment by all actors (local government, donors, community, etc.) to achieve sanitation/hygiene for the poor. They also emphasized the need for cultural awareness, area-specific plans and knowledge management. According to Mozambican musician and NGO founder, Felicianos dos Santos, “Most of the time it’s not the volume of resources, but the planning and management of them that needs improvement.”

Funding & Resources

Respondents who favored this factor described the importance of increased financial investment and support for sanitation/hygiene as well as other competing needs. For example, one respondent from Bangladesh said: “Sanitation and hygiene must be coordinated with the many issues urgently needing to be addressed in Bangladesh such as population and climate change.” Indonesian respondents overall, on the other hand, felt that more funding was not necessary.

Factors That Need More Attention

To expand upon the answers to question 7 above, respondents to our survey were asked in *question 3* to select from a list of “*factors that need more attention to improve support for sanitation and hygiene.*” The factors were:

1. Financial support from government or donors.
2. New government legislation.
3. Better information to decision makers about the benefits of sanitation/hygiene.
4. More public awareness that increases public demand for sanitation.
5. More involvement by business.
6. Something the survey did not mention.

Key findings from our analysis of responses to these factors show:

1. Overwhelming agreement about the powerful influence over high-level decision makers that results from more public awareness leading to more public demand for sanitation/hygiene services.
2. Majority agreement about the power to focus more attention on hygiene and sanitation policies as a result of the negative impacts on economic growth and efforts to reduce poverty.
3. Majority agreement about the opportunity sanitation/hygiene public health impacts present for motivating high-level decision makers to pay more attention to the issue.
4. Mixed views among informants about the power of sanitation/hygiene environmental impacts to increase attention paid to the issue among high-level decision makers.
5. Little faith in the power of sanitation/hygiene impacts on human dignity and gender issues to increase attention paid to the issue among high-level decision makers.
6. Strong majority of agreement that profits from business sales of sanitation/hygiene supplies does little or nothing to motivate high-level decision makers to pay more attention to the lack of sanitation/hygiene for the poor.

Please note, the following percentage frequencies of responses according to region or target audience categories represent small numbers of total informants in each case. DH was very pleased to have completed interviews with 103 respondents (43 more than the 60 total respondents DH was

contracted to survey. However, when total interviews are analyzed by region or target audience type, the total number of individuals per sample shrinks dramatically. For that reason, DH did not present findings by country, but instead aggregated them by whole *target group* (35 donors, 19 advocates, 16 government representatives, 24 PVO/ NGO/ CBO staff and 10 private sector informants) or *region* (Global, African, Asian). With that understanding, DH wishes to note that our informants presented themselves to us as an excellent group of respondents for this research project who, in many cases, spent considerable time responding to our questions.

Strong Factors That Influence Decision Makers

Public Awareness

Nearly all (96) of our respondents thought that increased public awareness that leads to increased public demand needs more attention. Of those, all PVO/ NGO/ CBO interviewees and more than 95 percent of donors and advocates felt public awareness and demand were key. This strongly supports the perspective of the “Pull” (bottom-up grassroots demand) and “Push” (top-down political will) to provide sanitation/hygiene services for the poor.

Table 3.4- More Public Awareness That Leads to More Public Demand Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Agree**	Count	32	20	13	23	8	96
	%	97.0%	95.2%	81.2%	100.0%	80.0%	93.2%

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

On the issue of grassroots demand, respondent David Kuria, shared the same response as many other informants when he said: “People know about latrines but they do not prioritize them in their spending decisions.... You really need to highlight how sanitation can be fashionable. People spend a lot of money on mobile phones because they think they are fashionable.”

A senior official of the World Bank added: “It’s about demand stimulation; all the different things that motivate household investment, adoption of behavior change. What are they excited about; modernity, tradition of cleanliness, dignity? We should tap into marketing and understanding of behavior change. High-level decision makers need to know people really want it. They know they want water, but don’t believe folks care as much about sanitation.”

David Schaub-Jones, Outreach and Research Officer at Building Partnerships for Development noted that: “We need to understand why people change behavior. Coke and mobile phone companies study this stuff a lot and really understand what motivates people. We can be looking at how best to leverage status as a motivation in sanitation.”

Respondent Sam Parker, CEO of Water & Sanitation for the Urban Poor (WSUP) summed up the consumer research and marketing remarks by stating: “Basing it on a long and detailed research on understanding consumer behavior, users of sanitation services and hygiene is the most worthwhile and useful investment possible, starting with understanding communities. It’s very different between states, cities and countries where ethnic origins or ethnic norms differ.”

While nearly all respondents believed citizens and communities at the grassroots level need to be more aware and better educated about the benefits of sanitation/hygiene, in Table 3.3, 92 of 103 respondents felt that better information to decision makers about the benefits of sanitation/hygiene was vital for raising awareness of and support for sanitation/hygiene for the poor among those decision makers.

One hundred percent of all national government respondents and more than 90 percent of donors and advocates agreed this was key.

Better Information

Table 3.3- Better Information to Decision Makers About Sanitation/Hygiene Benefits Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	3	1	0	4	3	11
	%	9.1%	4.8%	0.0%	17.4%	30.0%	10.7%
Agree**	Count	30	20	16	19	7	92
	%	90.9%	95.2%	100.0%	82.6%	70.0%	89.3%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

As previously stated in this report (see page 5), Sering Jallow, Manager of Water and Sanitation for the African Development Bank, emphasized all the existing data that could be immediately utilized to educate and raise awareness. Jallow added that “statistics such as 40-70 percent of all outpatient visits are related to water and sanitation in Africa, or 40-70 percent of health care bills [that] are water- and sanitation-related exist, but Ministers of Finance don’t know this in many cases. If they did, they could allocate the budget effectively.”

A Senior Health Specialist at World Bank-WSP suggested: “Ministries of Health have to convince Ministries of Finance. It is still the case if a donor comes in and offers money, the Ministry of Finance can be influenced quickly. More influence is possible in Africa than in China or India because of proportionality of aid versus local resources.”

The advocacy communications challenge, cited by some respondents, is the dissemination of information that cuts through the noise and wealth of information already being pushed to high-level decision makers.

Economic Arguments

DH devoted a question to the types of benefits resulting from good sanitation/hygiene that decision makers need to hear more about. Interviewees were asked about the most important “*factors about sanitation/hygiene that can influence decision makers to pay more attention to sanitation and hygiene.*” As shown in Tables 6.2, 6.1 and 6.6, most respondents said economic benefits were most important, followed by health and a clean environment as the ‘pull’ for high-level decision makers.

Table 6.2- Extent of impact of "S/H Improves economic growth/reduces poverty" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	6	3	7	6	1	23
	%	18.2%	14.3%	46.7%	28.6%	10.0%	23.0%
Very Important**	Count	27	18	8	15	9	77
	%	81.8%	85.7%	53.3%	71.4%	90.0%	77.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Between 71-90 percent of interviewees—except for national government respondents—believe that the impact of the positive economic growth and poverty reduction benefits of sanitation on decision makers is very important. Interestingly, national government representatives were evenly split on this issue and slightly more Asians (80 percent) than Africans (70 percent) believed its impact would be high. Almost half of all national government informants said that economic growth arguments would not move decision makers. The economic argument is doubtlessly useful as another inroad for promoting action by high-level decision makers, but this must be alongside other messages about its impact on health, the environment, etc. Multiple efforts from many directions are key to effective advocacy. WSP Indonesia's booklet entitled, *"It's Not A Private Matter Anymore"* is an excellent example of such cross-sectoral advocacy.

A warning, though, came from a senior staff member of the World Bank: "Ministers of Finance are drowned in studies about all things that improve growth."

Health Arguments

While many felt health benefits were important, the national government interviewees felt most strongly that this was an important benefit to communicate to decision makers (87 percent), followed by the PVO/ NGO/ CBOs and then the advocates. It was also strong among Asian informants (80 percent of Asian respondents in particular felt public health would motivate decision makers versus 60 percent of Africans and Global respondents). Interestingly, only half of respondents representing donors and the private sector attribute average or low importance to the impact on decision makers of the fact that sanitation/hygiene improves public health. There is an advocacy learning opportunity here as well. Effective key messages tap target audience key values. These differences in answers potentially reveal different values held by national government representatives versus those of donors and the private sector. More research is needed.

Table 6.1- Extent of impact of "Sanitation and Hygiene Improve public health" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	16	6	2	5	4	33
	%	48.5%	28.6%	13.3%	23.8%	40.0%	33.0%
Very Important**	Count	17	15	13	16	6	67
	%	51.5%	71.4%	86.7%	76.2%	60.0%	67.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

A more focused question on whether good sanitation/hygiene generates savings on health care costs got a more tepid response. While more advocates, PVO/ NGO/ CBO and private sector respondents

thought that health care savings would have a very important impact among decision makers, this was far from a clear mandate. This was mirrored in the regional answers, with an average of only 60 percent believing it was an important motivator.

Environmental Arguments

There was a definite difference in how a clean environment benefits from improved sanitation/hygiene was perceived between the Implementers and the Influencers. Over two-thirds of national government and private sector respondents believed that sanitation/hygiene's role in creating a clean environment had a very important impact on decision makers. The opposite was true of donors and advocates, where two-thirds felt that this was less likely to influence decision makers, while the PVO/ NGO/ CBO respondents were split. Given the financial power and influence that donors and advocates may yield, this finding may show an important potential gap.

In addition, 62 percent of Asian respondents felt that a clean environment would motivate decision makers whereas nearly 40 percent of African and Global respondents felt that it would.

Table 6.6- Extent of impact of "S/H Creates a Clean Environment" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	21	13	5	11	3	53
	%	63.6%	61.9%	33.3%	52.4%	30.0%	51.4%
Very Important**	Count	12	8	10	10	7	47
	%	36.4%	38.1%	66.7%	47.6%	70.0%	40.1%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Dignity/gender Arguments

An interestingly negative finding was that two-thirds of all respondents thought that human dignity/gender issues would not move decision makers to act. Ninety percent of private sector respondents thought it had little chance of success while PVO/ NGO/ CBO representatives were almost split on this issue. Two-thirds of all respondents felt that dignity and gender would not likely motivate high-level decision makers (with the notable exception of Indian respondents who felt it would). Again, it will be important to research more about the perceptions of the values of our target audience and whose responsibility it is to provide sanitation/hygiene. It is an opportunity not yet exploited, and an interesting comment on the potential lack of effect of the German Toilet Organization and WaterAid's emphasis on human dignity.

Table 6.5- Extent of impact of "S/H Safeguard human dignity/gender issues" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	22	15	10	11	9	67
	%	66.7%	71.4%	66.7%	52.4%	90.0%	65.0%
Very Important**	Count	11	6	5	10	1	33
	%	33.3%	28.6%	33.3%	47.6%	10.0%	32.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Weaker Factors That Influence Decision Makers

Girls' Education and Business Profits as Motivators

Two other factors were shown to be much weaker benefit arguments for sanitation/hygiene: girls' education facilitated by good sanitation/hygiene facilities (especially for menstrual hygiene) and business profits.

Only 43 of all respondents felt that sanitation/hygiene's support of learning through safe hygienic facilities for schoolgirls would be important. Nearly 60 percent of PVO/ NGO/ CBOs felt this important compared to the opposite among the other groups. This might have been because the advocacy community has not expressed this point clearly. Our question – based on research that menstrual hygiene was very important to women – also presumed that interviewees cared for education, education for girls, and knew that good sanitation could support girls' education.

Regionally, while over half of all African respondents thought that girls' hygiene would motivate decision makers, two-thirds of Asian and Global decision makers felt it was only of average or low importance.

Studies show that girls in some regions miss an average of five days of school per month when they are menstruating due to inadequate hygienic facilities. The long-term problems caused by undereducated girls/women as compared to their male counterparts may be a missed opportunity for inter-sectoral promotion of sanitation/hygiene via women's rights, human rights and girls' education.

Table 6.4- Extent of impact of "S/H Supports learning through safe hygienic facilities for school girls" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	21	12	9	9	6	57
	%	63.6%	57.1%	60.0%	42.9%	60.0%	55.3%
Very Important**	Count	12	9	6	12	4	43
	%	36.4%	42.9%	40.0%	57.1%	40.0%	41.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

A senior official of the World Bank noted: "I keep hearing about schools, but am skeptical about the approach 'if you teach kids good sanitation/hygiene, parents will adopt the behavior and get a toilet.' Kids take home one of three lessons: a toilet is nice but locked and just for teachers, a toilet is a scary, appalling place, or a toilet is neat, kept clean with some work and good to have. Which message they take home depends on school toilet management on-site."

Business profits

Nearly 80 percent of all respondents by target audience as well as region felt that 'selling' sanitation/hygiene to decision makers via business profits (yielding possibly higher employment and tax revenues) was very unlikely. Interestingly, this included the 8 or 10 private sector respondents. Our question implied sales of hardware leading to profits, yielding possibly higher employment and tax revenues, yet respondents were unconvinced. More research needs to be done validating WTO Founder and respondent Jack Sim's perception that there is a \$1 trillion potential market for sanitation supplies to those who don't have access to sanitation/hygiene.

This would be an important step to improving both through the marketing savvy of private industry and at no apparent cost to government. Global Handwashing certainly has benefitted and sales of soap are growing.

Table 6.7- Extent of impact of "S/H Makes profit from business sales of S/H supplies" influence decision makers

		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	25	17	13	15	8	78
	%	75.8%	81.0%	86.7%	71.4%	80.0%	75.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Improving Awareness and Action

DH asked respondents about three elements potentially critical for increasing awareness and action on water, sanitation/hygiene for the poor:

- Funding
- Legislation
- Involvement by business

More financial support

Over 80 percent of all respondents and 100 percent of advocates felt that financial support from the government for sanitation/hygiene needs more attention.

Table 3.1- Financial Support from Government or Donors Needs More Attention

		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree	Count	5	0	6	5	3	19
	%	15.2%	0.0%	37.5%	21.7%	30.0%	18.4%
Agree	Count	28	21	10	18	7	84
	%	84.8%	100.0%	62.5%	78.3%	70.0%	81.6%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

When examined by region, the large majority of respondents representing African and Global organizations agreed that financial support from government and donors requires more attention, whereas Asian representatives were clearly split on this issue.

Table 3.1R-Financial Support from Government or Donors Needs More Attention					
		Region of Respondent			
		Africa	Asia	Global	Total
Disagreed*	Count	3	13	3	19
	%	6.7%	41.9%	11.1%	18.4%
Agreed**	Count	42	18	24	84
	%	93.3%	58.1%	88.9%	81.6%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

New legislation

Among all respondent groups except for advocates, new legislation appears to be the lowest priority. Just over half of all donors, national government representatives, PVO/ NGO/ CBOs and the private sector disagreed with the premise that new sanitation/hygiene-related legislation needs more attention, with many respondents expressing the sentiment that adequate legislation already was in place but unenforced. For example, in his interview remarks, van Ginhoven called for “more legislation enforcement, especially related to the disposing of effluents into rivers and the emptying of latrines, septic tanks, etc.”

In slight contrast, 62 percent of advocates support the premise that new government legislation needs more attention. There was a marked difference in responses by region. Almost 70 percent of respondents representing global organizations agreed that new government legislation needs more attention. Over two-thirds of African and Asian respondents did not.

Table 3.2- New Government Legislation Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	19	8	9	15	7	58
	%	57.6%	38.1%	56.2%	65.2%	70.0%	56.3%
Agree**	Count	14	13	7	8	3	45
	%	42.4%	61.9%	43.8%	34.8%	30.0%	43.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Private Sector

While many told us that business profits would not motivate high-level decision makers, over 85 of 103 respondents thought more business involvement is needed to improve sanitation/hygiene as well.

Joke Muylwijk, Director of the Dutch Gender and Water Alliance, stated: “In this world of sanitation and water supply, there should be more emphasis on the development of technologies of types of toilets and water supply that are sustainable, durable and strong—especially when people have to share.”

Dara Johnson of UNICEF said about CLTS in India: “There is a need for more involvement of local businesses and local artisans, yet there are two problems: the availability of masons who have the

skills to build toilets, and the availability of the sanitary pan, or squatting plate.”

A senior staff person at CARE Bangladesh noted that such supply has been created in his country. “CLTS, which emerged from Bangladesh, is exceptionally successful. At the SACOSAN I conference, the government decided to adopt community involvement through a low cost model, relying on the people themselves. The market responded well, supplying plastic latrine pans.”

Over 85 percent of respondents covering Global and African areas and over 70 percent of respondents from Asia agreed that involvement by business needs more attention.

Table 3.5- More Involvement by Business Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	3	2	4	7	2	19
	%	9.1%	9.5%	25.0%	30.4%	20.0%	17.5%
Agree**	Count	30	19	12	16	8	85
	%	90.9%	90.5%	75.0%	69.6%	80.0%	82.5%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Effectiveness Of Advocacy Campaigns, Events And Channels

The last elements evaluated were the ways used to affect high-level decision makers.

Campaigns

Turning to the importance of public sanitation/hygiene campaigns, our survey revealed a striking 100 percent of national government interviewees and 85 percent of all respondents agreed that this factor played an important role. The great majority (80 respondents) representing African, Global and then Asian respondents agreed that public sanitation/hygiene campaigns are important in raising awareness. Specific to WSSCC, Dick van Ginhoven of the Dutch Ministry of Foreign Affairs said, “WSSCC’s network and Global Sanitation fund have really organized meetings and brought people together.”

However, follow-up remarks by respondents who explained why they felt this way uncovered a frequent focus on local and district-wide advocacy campaigns with only a few references to international efforts.

Table 5.2- Public Sanitation/Hygiene Campaigns Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	8	2	0	3	2	15
	%	24.2%	9.5%	0.0%	13.0%	20.0%	14.6%
Agree**	Count	25	19	16	20	8	88
	%	75.8%	90.5%	100.0%	87.0%	80.0%	84.5%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Events and Meetings

More than three-quarters of all respondents agreed that the public and private events or meetings they attended are important in raising awareness about sanitation/hygiene. Many respondents on this point spoke of the power of private meetings as well as site visits.

Table 5.1- Public/Private Events/meetings Attended Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	8	4	4	5	2	23
	%	24.2%	19.0%	25.0%	21.7%	20.0%	22.3%
Agree**	Count	25	17	12	18	8	80
	%	75.8%	81.0%	75.0%	78.3%	80.0%	77.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

News and Advertising

The opinion that news reports are important in raising awareness showed some weakness in preference by our informants compared to other factors.

Two-thirds of all respondents agreed that news reports are important in raising awareness about sanitation/hygiene, however, 40 percent of PVO/ NGO/ CBO and private sector categories disagreed. While two-thirds of people felt that news reports raised awareness, most focused on individual awareness at the grassroots level. Almost no one felt that high-level decision makers were affected by news reports (with the exception of some watching television spots in Asia).

A review of respondent remarks on this point revealed a belief among PVO/ NGO/ CBO informants that news media reports usually do not reach or are not picked up by the poor and thus from their perspective were not considered to be useful. Their remarks also revealed that in general, PVO/ NGO/ CBO remarks about the utility of news media coverage reflected a positive view of how they help to publicize hygiene and sanitation events attended by officials (high-level decision makers).

While more than 80 percent of Global respondents believed that news reports are important, that sentiment was less strong among Asian (55 percent) and African (67 percent) respondents.

Table 5.3- News Reports Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	11	6	4	9	4	34
	%	33.3%	28.6%	25.0%	39.1%	40.0%	33.0%
Agree**	Count	22	15	12	14	6	69
	%	66.7%	71.4%	75.0%	60.9%	60.0%	67.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Opinion of the importance of advertising campaigns was similar to that expressed about news media coverage. Again, disagreement on this was most strongly expressed by PVO/ NGO/ CBO categories where one-third held the opposing view. Approximately three-fourths of respondents representing Asian, African and Global organizations agreed that advertising campaigns are important in raising awareness.

Table 5.4- Advertising Campaigns Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	9	6	2	8	2	27
	%	27.3%	28.6%	12.5%	34.8%	20.0%	26.2%
Agree**	Count	24	15	14	15	8	76
	%	72.7%	71.4%	87.5%	65.2%	80.0%	73.8%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Strategic Objective #4

Develop strategic recommendations about an effective approach for sanitation-specific advocacy and communications efforts that would more effectively fulfill the research objectives defined above.

Major Findings and Recommendations: Sectoral Lessons and Implications for Advocacy

Finally, there are 10 major lessons learned from the research. These are also our recommendations.

1. Establish Tangible Goals

Evaluating Advocacy Is Possible With Proper Attention To Objectives and Measures Of Impact

It is possible to **evaluate advocacy**, however this has been done qualitatively, and in a 'slice in time' manner. The greatest difficulty of the evaluation has been the absence of clear calls to action as well as clear baselines. Even qualitative perceptions of the sector, its campaigns and its major players would be good starting points. Advocacy criteria need to be applied uniformly and partners convinced to put funds toward monitoring and evaluation. A senior staff person of WSP in India affirmed this point. "In most of the programs you need to have a keen understanding of all your stakeholders. You need specific advocacy programs targeting the high-level decision makers and you need an advocacy program to reach out to the individual beneficiaries. You need multiple campaigns targeting multiple stakeholders at different levels simultaneously. Finally you need greater financial support for advocacy programs."

Sanitation/Hygiene advocacy lacks a clear call to action with benchmarks that provide an opportunity to use competitive incentives. A respondent from UNILEVER Vietnam said, "If there were something like the MDGs that the Vietnamese government felt it had to achieve to show that it was keeping pace with other countries, this would be a big incentive to pay attention to these issues."

Sam Parker of WSUP noted that sub-national competition is effective. "What is the incentive for government to do it, competitive benchmarking?" Parker asked. "Comparing planning and successful sanitation across cities... cities should do joint planning, what works, what doesn't. They should compete against each other."

Finally, advocacy can use information such as benchmarks for evaluating impacts and all advocacy campaigns benefit from clear, measurable objectives.

DH recommends investment in the coaching of PVO/NGO/CBOs in sophisticated strategic advocacy communications techniques. Additionally, DH recommends research of best practices and lessons-learned from sanitation/hygiene advocacy initiatives and the establishment of a knowledge management, information sharing and learning tool for the dissemination of best practices and lessons-learned.

2. Be Sustainable – Advocacy Is A Process

There are advocacy successes to report such as: IYS, Global Handwashing, the eThekwini process, GTO and WaterAid's advocacy. They all play a continuous drumbeat of good advocacy for the poor. However, **advocacy is a process** that must be sustained over time, and include multiple tracks of activities and messages directed toward both decision makers and the grassroots. Kees Konspapel of the Government of the Netherlands affirmed this

strategy. “There needs to be a sustained advocacy effort, and kicking in of a few donors, especially the ones that are concentrating mostly on water and not sanitation,” Konspapel said.

A senior official of the World Bank believes the minimum period of time for sanitation advocacy to take effect is 10 years and expressed a little surprise this research project was examining just the last two. The same respondent noted that the results of the 2002 advocacy effort that linked sanitation to the MDGs are only beginning to emerge – some seven years later.

Advocacy around programming, including behavior change and better understanding people’s motivations also takes some time, and while sanitation/hygiene are off to a good start, they are still in nascent phases of growth and commitment.

3. **Support the “Push” For Political Will**

Political will was repeatedly stated during our interviews as the missing ingredient for achieving sanitation/hygiene for the poor. Many of our respondents said it was more a matter of governments setting better priorities for sanitation/hygiene and following that up with better planning and management of available funds because investment in sanitation/hygiene would support vital activities in other sectors such as health, environment, trade promotion, etc.

“Optimal advocacy” would combine a national campaign with visible support from the highest government levels, intra-governmental coordination/mobilization, and highly customized, contextualized local advocacy.

Many respondents said legislation is not that important except to mandate better ministerial coordination, others returned to the need for enforcement. Respondents in many countries said that legislation on the books is of no avail if not enforced, while almost all respondents were looking for meaningful expressions of government will. Countries must counter inertia by having coherent pro sanitation/hygiene policies in place. In urban areas, government should set clear policies and sanitary standards. For the urban poor, land rights are frequently an issue so government must be intentional about establishing spaces for latrines and mechanisms for sewerage piping or alternative disposal. Active governance will always be required for serving the urban poor. Quite a few respondents spoke about the need to not create new laws – just to enforce existing laws.

Legislation alone is not enough, and politicians need to take an active role. Politicians can benefit, as well, by being identified as advocates for sanitation/hygiene such as the Presidents of India and Mali, the Prime Minister of Bangladesh and many local Indian politicians have found at election time. National-level competitions on progress on the MDGs have also furthered sanitation’s cause, evidenced by eThekwini.

Personal Commitment is very important to advocacy. The Indian government’s high-level commitment to CLTS occurs through national awards presented by the President no less. The Indian Prime Minister is also an economist so he understands and is battling lack of resources for the poor. They show a willingness to endorse programs for the poor but see lots of gaps in local government. Indonesian high-level decision makers are the opposite. Success is emerging from below as they are methodically building local government commitment but without presidential visibility.

There are regional and country-level differences. There are stark differences between the governments of the countries where DH conducted surveys; some are autocratic and centralized, others more democratic and less-centralized. Generating political will in each case requires different approaches. In countries with good governance, local advocacy efforts

(spotlighting sanitation) carried the sanitation agenda forward. In places where the “free” press has a big role in society (Ghana, to some extent Uganda), the press has played a big role. For instance, “Mr. Albert Abongo, Minister of Water Resources, Works and Housing, on Monday pointed out the need for Ghanaian media to unravel challenges that confront the provision of water and sanitation facilities.”

This is much more likely to happen in a democratic society than a closed one like Vietnam. In Uganda, there was a very effective public meeting with lots of press where politicians were dressed down for not having given appropriate attention to sanitation. This was quite effective but in more centralized states like Tanzania, probably not possible. Finally, politicians everywhere see everything in terms of political capital. They delivered a borehole, opened a health clinic, but in terms of behavior change, decision makers don't look at it as capturing attention. For this reason, resources are diverted for construction – something you are able to touch. This will be a challenge to ‘software’ hygiene programming, potentially made up for by smiling schoolchildren standing next to new latrines with Tippy Tap soap dispensers.

4. **The Growing Hunger for Information – Research Data is Vitrally Needed to Clarify Priorities and Support Approaches**

Data of every variety is needed, from baselines on advocacy campaigns to accurate sustainability information for CLTS and potential options for urban programming. The ‘push’ of advocacy has had some great success, especially with the AfricaSan Action Plan which not only put funding towards sanitation (0.5 percent of GDP) but also prioritizes sanitation/hygiene in programming for the 60 percent of Africans without these services through monitoring data of that implementation. While the ‘pull’ of programming advocacy has had some great success with the CLTS approach, a plethora of hardware approaches and an array of software approaches all need data to prove their effect and cost-effectiveness compared to one another to convince decision makers at the national as well as household level.

A respondent from UNICEF Vietnam paints a stark picture. “We can say we have a problem of quality. Although the government finds that 60 percent of the rural people now have latrines, when UNICEF assesses hygienic latrines (improved facilities) it finds coverage to be 18 percent. The government had one special water and sanitation program for 8 or 9 years. It spent more than 90 percent of the budget on water supply. In Phase II, 2006-2010, the budget share is up to 30 percent for sanitation. But the rural needs are great and need even more investment.” Many countries do not even have that level of information or the political will to act on it if it did exist.

Data is needed for effective advocacy

For both the ‘push’ of advocacy and the ‘pull’ of good programming (about which advocacy can write), there is a great need for data to inform decision makers about both the effect of good sanitation/hygiene as well as cost-effective interventions.

Data on Effects

As mentioned earlier, data is needed on the effectiveness of interventions, e.g., how good pit latrines are versus toilets, and how effective septic tanks are if they still drain sludge into rivers. It seemed notable that many perceived donors were more interested in mortality and morbidity rates, especially related to children under age five.

Several interviewees said that CLTS seems to be a success. For example, World Bank Water and Sanitation Program (WSP), Senior Sanitation Specialist, Eddy Perez said: “India’s CLTS is the clearest example of success. They had political will to meet MDG targets, so created a national program and funded it... The best part of the program is political will from the top all the way down – financial investment, set up, outcome-based incentive system – working best

where they did not give dollars to communities up front, but only after communities became 100 percent open defecation-free... They are making the largest per capita investment in sanitation at a national level."

Others said it might have more limited success. Respondent Dara Johnson of UNICEF rated it as "partially successful. Created a lot of news coverage for toilet construction. But it has not had the success that they wanted because they're beginning to realize there is a major requirement of hygiene promotion and behavior change that needs to go with the construction of toilets."

Respondent Stephen Luby, MD of ICDDR,B noted that CLTS emerged early on as a successful intervention and he believes it would be implemented more rapidly if research data existed that affirmed its positive impact economic impact.

There are also 'givens' which need further substantiation, such as the results of a sustained actual uptake of CLTS. Respondents such as Shantifan and Cairncross said that defecation-free village status is an early metric, but you need data to come back over time and show people gains in infant health for child-survival and continued utilization.

WSP respondent, Eddy Perez, said that the inter-sectoral nature of sanitation might be its greatest hurdle. "Sanitation and hygiene, like water, provide benefits for a wide range of areas, for example, the health sector competing with HIV/AIDS. Sanitation provides benefits in health, economic growth, education and therefore multiple clients, but in none of those areas does it provide as much benefit as many other single interventions."

A quarter of our respondents highlighted CLTS as the best programming approach for creating demand. Only one respondent questioned CLTS in India, but given the clout of WSP, her comments are notable. Speaking about India's "Clean Village Award" that rewards villages with cash incentives if they implement sanitation/hygiene, a regional communications specialist for WSP South Asia noted that this project has cast a spotlight on the previously taboo topic of sanitation, bringing global attention followed by efforts to expand ideas on solutions. Nonetheless, "it appears that only 6 out of 6,000 to 10,000 villages are actually carrying out full sanitation." She wonders what would happen after the reward money is spent, and whether the villages would slip back into old habits. Independent agencies are reviewing to find out if the interventions are sustainable, as "there is success in very small pockets but at a national level it is not successful." A representative of the Ministry of Urban Development in India said, "The key is ownership of the issue, need must be felt within the population, then capacity, and the minds of leaders. In the Indian context, most urban dwellers have a television and a mobile phone. They could easily as well have prioritized sanitation, so there is still a demand side issue."

Recently some data has been presented that quantifies the impact that sanitation/hygiene have on the quality and duration of life (e.g., DALYs). WHO released a report in 2008, *Safer Water, Better Health: Costs, benefits and sustainability of interventions to protect and promote health*, that revealed:

- Diseases with the largest, water/sanitation/hygiene contribution are diarrheal diseases at four percent in DALYs.
- Good hygiene can lead to the greatest reduction in diarrheal frequency (37 percent); sanitation reduces it by 32 percent while water supply reduces it by only 25 percent.

Data on Cost-effectiveness

A senior secretary within the government of India spoke about the cost-effectiveness of sanitation/hygiene compared to other sectors and the need to get such information to Ministries of Finance regarding what neglect was costing their economy. Several respondents

said the same, and pointed to the success of HIV/AIDS campaigns in raising such awareness. As noted in the research findings section, most thought that the number one way to convince decision makers was through economic growth/poverty reduction as well as health data. UNICEF notes in many websites, justifiably, that Global Handwashing Day took place in 80 countries in 2008. This is truly laudable and from all sides, respondents spoke about the success of Global Handwashing to further hygiene.

There still remains a dearth of impact data. Respondents Stephen Luby, MD and Sandy Cairncross both mentioned making guidelines practical. For example, how much handwashing is enough? What data about reduced mortality from good sanitation/hygiene is required?

Luby cited the need for applied research: "Very fundamental questions that are important are: 1. What benefits do we get from various interventions if 80 percent of the population is living on less than \$2 a day – and they don't have enough food, and a single illness can throw a family into irretrievable poverty? Donors have to make health and financial arguments about hygiene; have to recognize there are tradeoffs. The AIDS battle is being lost and there is a backlash because it can't demonstrate impact, and health systems are falling apart. How do we continue to say diarrhea and children's health is not a fad? Why is this going to have an important role in terms of economics and education?"

Other respondents mentioned that a more nuanced approach for measuring the cost benefit of CLTS also is needed.

When asked about what factors needed more attention by high-level decision makers to improve support for sanitation/hygiene, the oft-cited issue of personal responsibility rated highest, followed by the need for data to convince decision makers.

Not only are there insufficient studies about which sanitation systems are more cost-effective than others, but only a few impact studies exist on the cost-savings that using any of them could have on economic growth and tourism.⁸ One very good document came out in 2008 from the International Water Center "Sharing Experiences: Lessons in sustainable sanitation in South East Asia and the Pacific".

1. Global cost for water and sanitation = US\$38 billion – sanitation accounts for 92 percent of this value (Hutton et al. 2006)
2. Sanitation losses estimated at US\$9 billion in Cambodia, Indonesia, Philippines and Vietnam alone (\$4.8b health related) (Hutton et al. 2007)
3. Cost effectiveness of water, sanitation & hygiene as *health interventions* (US\$ per DALY averted) found hygiene to be most effective at \$3.35, compared to water supply hand pump or stand-post at \$94.00.
4. This report highlighted the need for clearer hygiene messages and more targeted, better-designed hygiene campaigns.

Respondent Dick van Ginhoven of the Government of the Netherlands said: "We need to realize the return on investment. It has been shown that 1 Euro invested in sanitation returns 20 Euros in tourism and health dollars. This type of information needs to be communicated to decision makers."

⁸ During our research, we became aware that the Foundation, WSP and other partners are engaged in intensive studies to document impact data in Senegal, Tanzania, Vietnam, Indonesia and India. WSP and the Foundation gathering urban and rural impact in (1) Big urban-rural studies in Senegal, Tanzania, Vietnam and Peru (2) Rural sanitation studies in Indonesia, Tanzania w/ 2 in India will add greatly to the knowledge set and the completion of these studies is likely to help motivate decision makers to invest intelligently in the best interventions.

Our research also found a 2008 WSP advocacy document, *Economic Impacts of Sanitation in Vietnam: A five-country study conducted in Cambodia, Indonesia, Lao PDR, the Philippines and Vietnam* under the Economics of Sanitation Initiative (ESI). Such documentation is just the right kind of data for influencing high-level leaders.

- This study has found that poor sanitation causes considerable financial and economic losses in Vietnam. Financial losses, in expenditure or lost income resulting from poor sanitation, are equal to roughly 0.5 percent of annual Gross Domestic Product (GDP), while overall population welfare losses are equal to 1.3 percent of GDP. The majority of economic losses are shared between health (34 percent), water resources (37 percent) and the environment (15 percent). The annual losses per capita equal US\$9.38 or VND 150,770.
- Having estimated the costs of poor sanitation, the study also evaluated the benefits associated with improved sanitation/hygiene practices. In this study, five potential improvements were examined.
- According to the study: "These are (a) better hygiene practices, (b) improved latrine physical access, (c) improved toilet system, (d) improved treatment and (e) re-use. The results indicate that improvements in treatment or disposal of waste can reduce the losses by US\$355 million a year, mainly through water and tourism impacts. There is also a large Benefit arising from the improved hygiene through reduced health care costs (US\$228 million). The value of sanitation input and output markets are estimated at US\$129 million and US\$202 million, respectively."

The advocacy questions are: 'Do donors and governments know this?' 'If they did, would they act'?

Our research indicates that impact and cost-effectiveness are the most important pieces of information missing for high-level decision makers. It is worth noting that our interviews indicate that data about the impact on national economic growth is viewed as slightly more important than health impacts, but both are key. As previously mentioned in our findings, DH interviews indicate that messages least important to high-level decision makers are the impacts poor sanitation has on human dignity and girls' education.

DH discovered one excellent advocacy brochure that reportedly led to high-level action. It comes from WSP Indonesia – it is called *"It's Not a Private Matter Anymore!"* It documents Indonesia-specific arguments using data such as:

1. *What are you waiting for?* (E.g., sewerage, septic tanks, losses, women's vulnerability)
2. *Why aren't you doing something?* (City and district responsibility, investment, targeting)
3. *Still doing nothing?* (E.g., involvement, assistance, appropriateness and comparison with other successful regions)

The brochure compares actual Indonesian data, e.g., per capita expenditures on sanitation of 200 rupiahs per person versus what was needed, 47,000 rupiahs per person per year. It shows the WHO statistic that every dollar of investment yields eight dollars of economic return. Such data, packaged in a simple, clear brochure aimed at high-level decision makers, is ideal. Several respondents from Indonesia mentioned how effective high-level governmental decision makers have found this document to be toward convincing them to allocate funding to sanitation/hygiene.

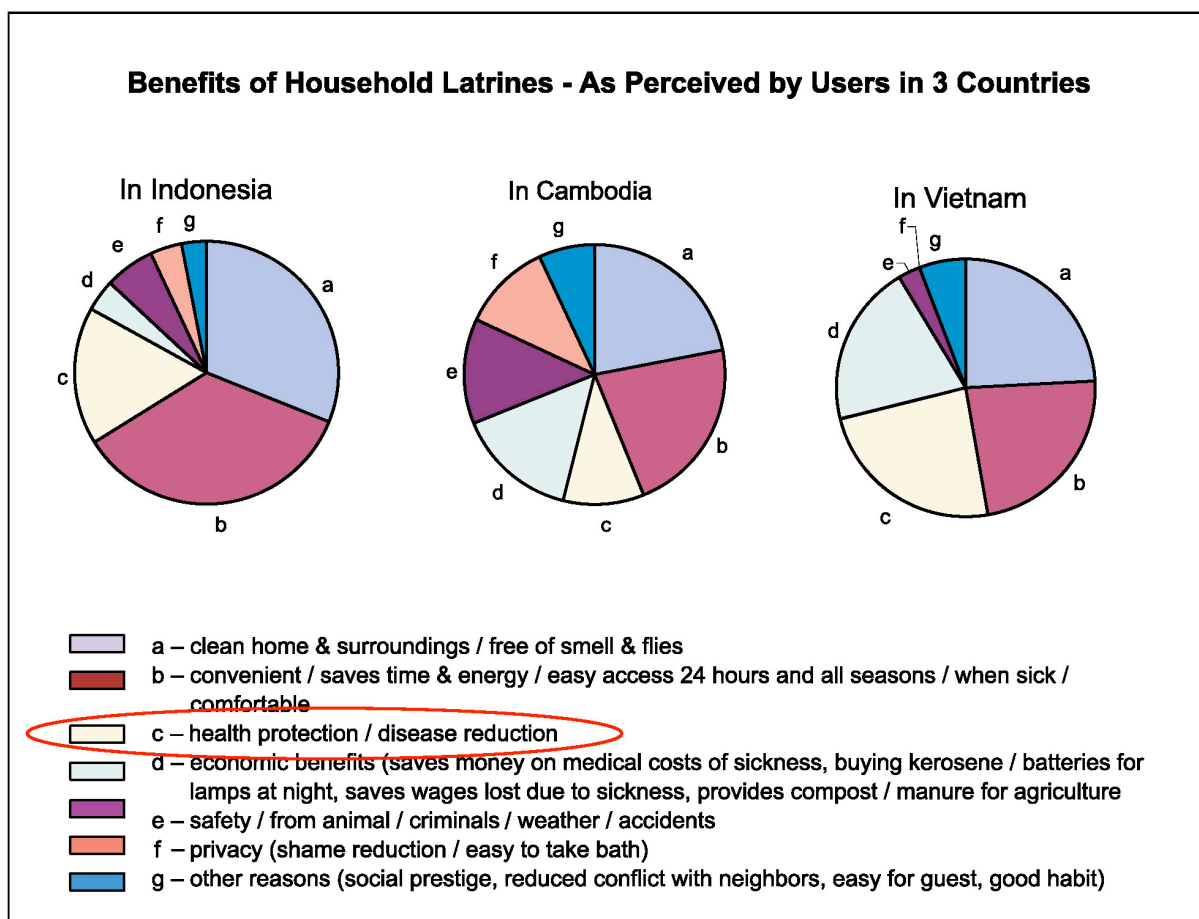
Overwhelmingly respondents spoke about the need to have grassroots-driven demand for sanitation/hygiene. Some informants shared that while health impacts and cost savings could be motivating, sanitation/hygiene programs will be sustained by focusing on health outcomes. For the program to be sustained they must talk about health as the outcome. For example, Feliciano dos Santos of Mozambique is focusing on spreading water, sanitation/hygiene

messages through song. He also is participating in village site visits, the same type of advocacy that motivated Indonesia to create CBTS (see elsewhere in report). Informants repeated to DH that motivating messages are needed to inform advocacy at the community level. Respondent Dennis Warner of Catholic Relief Services said that the most successful approach requires taking officials, donors, celebrities and private sector businesspersons into communities with poor sanitation and subsequently ask them to report about how they would feel if they had to live in those conditions.

Another organization, WSUP, recently researched attitudes in urban India slums about what motivates people to prioritize toilets – the main finding was the draw of dignity. WSUP CEO, Sam Parker, described it as people living in crowded areas, with no room to defecate in the bush and experiencing a lack of dignity and a sense of low self-esteem.

Research completed by Mukherjee sheds light on the attitudes and values of sanitation/hygiene in three countries in Asia.

Why do people want sanitation?



Source: Mukherjee 2001, "Achieving Sustained Sanitation For The Poor: Policy and Strategy from Participatory Assessments in Cambodia, Indonesia, Vietnam." Water and Sanitation Program

5. Continuously Re-evaluate Communication Vehicles

In spite of some very good awareness-building campaigns led by prominent and respected organizations, media was not particularly effective in engaging high-level decision makers; key messages rarely provided a clear call to action appropriate to the audiences targeted. While over half felt media was effective, this was among the findings in our research. Most media was aimed at individuals and viewed by many of our respondents as primarily effective engaging members of local communities in need of sanitation/hygiene services. There were differing effective channels for advocacy (e.g. radio in Africa and Television in Asia). There were also some country-specific aberrations, e.g. many Indian respondents felt that messages about gender/ dignity would move decision-makers, unlike many other respondents

There was also a lack of retention of sanitation/hygiene messages, except in vague or confusing terms. Some remembered international campaign messages, e.g., "2.6 billion people lack sanitation," some remembered local messages, such as Ghana's "Cleanliness is

Godliness,” but most did not. Also interestingly, private meetings and site visits seemed the most effective form of advocacy to convince high-level decision-makers.

6. Supply, Demand and The Role Of The Private Sector

The **private sector** has a role to play, but it is still emerging, and is likely to be country-specific. The dearth of private sector informants DH found was illuminating. Respondents repeated to DH that sanitation can be profitable by those in Public-Private Partnerships, but potential private sector partners need to be better educated about these opportunities to increase their involvement.

When advocacy creates political will, funding and demand, the question of *demand for what* emerges. We encountered many appropriate and innovative technologies, yet confusion about “best” technology and business models continued to impede progress. The DH team looked for clear ‘front runners’ in programming about which advocacy was happening, and found some: hygiene focused on handwashing with easily available soap and Tippy Taps as locally produced soap dispensers. While DH found CLTS popular as a sanitation approach, there were no particular interventions along the ‘sanitation ladder’ that were universally accepted, (with the possible exceptions of latrine pans, septic tanks and wastewater treatment plants in the most generic terms⁹.)

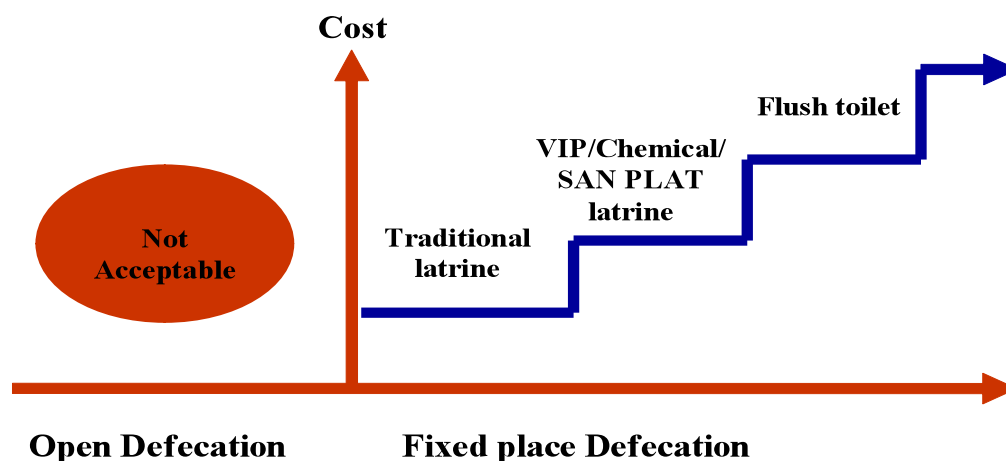
According to Joke Muylwijk: “Most people by now are really aware that water/sanitation is important but more has to be done. They need to know HOW to tackle it, which is a different thing.”

Types of sanitation service – rungs on a ladder

Types of sanitation can be thought of as rungs on a ladder, with each rung having a higher unit cost and greater health benefits than the one below (figure 17.1). The bottom of the ladder is open defecation. The next rung is traditional latrines (various kinds of pits), then improved latrines (SanPlat, VIP latrines, and basic pits with slabs), with flush toilets (connected to a septic tank or sewerage network) at the top. From a health perspective, the most critical movement is from no service (open defecation) or unimproved service (traditional latrine) to an improved or sanitary service. Once the basic level of sanitary protection is reached, there are diminishing returns in health benefits with each higher rung on the sanitation ladder.

⁹ Given the lack of information about urban sanitation, we asked Serling Jallow of the African Development Bank’s Rural Water Supply and Sanitation Initiative (RWSSI) about urban programming. He offered a menu of options: 1. For high-density areas, they implement mostly western style wastewater treatment plants – using conventional designs for treatment plants where space is limited and oxidation designs for places where space is available. 2. For less dense areas, they do onsite things, more localized in nature (no examples were provided), 3. For semi-urban, pit latrines.

Figure 17.1. The sanitation ladder



Source: Morella and others 2008, from presentation given by Eddy Perez of World Bank/WSP

The traditional latrine is the most prevalent sanitation option in Africa, but understanding the health benefits they can deliver is difficult. Classifying traditional latrines is complicated by a variety of installations under this basic label. Sometimes a traditional latrine can, with some modification, provide enough sanitary protection to be regarded as improved. The extent to which latrines deliver the intended health benefits depends on how they are used. Even basic latrines can provide protection if they are covered and emptied in a timely fashion, and if hands are washed after use. Conversely, improved latrines will not provide sanitary protection if people do not use them (that is, if their installation is not accompanied by sufficient efforts in hygiene promotion and social marketing).

Our respondents felt that the most important factor after political will was grassroots demand. Yet, demand for what? Many respondents highlighted the fledgling success of demand-creation via CLTS and equally, the need for clear **supply-creation** for sanitation/hygiene based on proven impact and cost-effectiveness. Customized hardware is needed, quality standards often vary and consumers need information about what step along the sanitation ladder is effective. Information needs to especially include the needs of women, girls and the youngest and oldest.

While there are staff and training costs for sanitation/hygiene, tangible input costs vary. Hygiene hardware, soap, dispensers and water can be inexpensive and there is a wide range of costs for sanitation hardware. It can be low-cost, but is very diffuse. There is a plethora of kinds for individual use (adapted to local conditions, "going up sanitation's ladder"), with a special lack of uniformity or clarity on how to address urban issues. Costs of hardware ranges from individual latrine pans or septic systems in rural areas, to public toilets linked to sewerage and wastewater for large urban use. Advocates need to know what to promote but the diversity of conditions and economic levels of the users seems to lead to such a range of 'answers' as to make advocacy around the 'what' elusive, at least for now. Thus, advocacy about what programming should be pursued is nearly absent from our report.

Role of Private Sector

According to respondents, there is a clear desire for the private sector to play a role, but views about its function as a major advocate for sanitation/hygiene were mixed. While there

were examples of excellent Public-Private Partnerships opportunities, (e.g., Coca Cola and Water Supply in Africa and UNILEVER, Proctor & Gamble and the Global Handwashing Campaign), such activities were limited. DH found examples of some wonderful entrepreneurs, e.g., Ashoka Fellows NB Nirmal who founded Exnora, David Kuria who founded Ecotact, Hindustan Construction which (involved in the UN Water partnership) and others. However, these were disparate cases. Their advocacy has been innovative and diverse. It includes such things as employing Miss Kenya and beautiful Indian television stars as spokespeople, the production of music videos (e.g., Mozambique's Felicianos dos Santos' Estamos) and generating publicity about government ministers using public toilets with music piped in that is designed to soothe the user. The entrepreneurs stress the need to customize approaches to their country.

There were examples of entrepreneurs creating profitable public utilities, for example, Uganda's National Water and Sewerage Corporation, ZoomLion Ghana and Mozambique's UAIENE Gama de Servicios. These Public-Private Partnerships for urban sanitation engaged public utilities via government subsidies so they were not wholly dependent upon community support. In fact, Mozambique's Paulino has municipal contracts with several barrios (the poorest slums of Maputo) and brings services to both peri-urban and rural areas close to Maputo in a very profitable manner. These need to be explored more and their successes loudly lauded by advocacy campaigns along with messages that empower individuals to make a difference by their individual actions. This would dip into the potential \$1 trillion sanitation marketplace that WTO and GTO Founder Jack Sim has predicted (see page 49).

Outside of these excellent private sector examples, the likely future of private industry is to focus on very local vendors such as masons, offering a range of sanitation hardware for people to choose from. Financial support and marketing assistance will be needed for such small-scale rural players, but evidence abounds that local supply is meeting some of the demand. Sample designs in the local language apropos to local construction methods provide ready reference if laminated and tacked up all around villages where demand creation is underway – alternatively in homes/shops of masons, craftsmen, and vendors. Local cartoons and slang add interest and are well accepted. A senior staff person in the Global Water Partnership said at one time the West African offices of the World Bank focused on small homebuilders to offer toilets and sinks as standard fixtures in all homes being built to great success. This model ultimately made the installation of toilets and sinks in new homes a regular occurrence.

There was most support for encouraging local entrepreneurs and small businesses to get involved in installing and maintaining latrines and waste management systems selected by the local community. The respondents who mentioned the private sector felt that the best approach would be multi-faceted, with a menu of strategies for different audiences and outcomes in response to the need for a variety of hardware solutions. As a senior secretary from the government of India pointed out, in India alone, sanitation systems that function in minus-40c temperatures must differ from systems that function plus-40c temperatures, and pit latrines, unlike flush toilets, can work in a variety of conditions.

This highlights another point. In general, urban areas have more per capita income, but require larger infrastructure. Meantime, the ability or willingness to finance urban sanitation/hygiene infrastructure is limited (Public-Private Partnerships may be necessary for success). In rural areas, there is less per capita income, but onsite sanitation options are numerous and can be built very cheaply. The key to success is to make available and *acceptable* the various options in the different contexts by realizing that one size will never fit all.

Finally, almost everyone recognized the need for innovation – not just new technology, but on a broader scale to include innovative financing strategies like Public-Private Partnerships, good marketing messages, etc. Examples include the adorable tri-logo of the Global Handwashing Campaign. It emerged from a pro-bono donation of corporate marketing experts. Some respondents referenced useful research into the power of social marketing provided by The Bill and Melinda Gates Foundation (e.g. Total Sanitation and Sanitation Marketing (TSSM) in East Java).

Almost all respondents felt that if something were fashionable, poor people would be motivated to make sacrifices to get it. DH believes that more marketing research needs to be carried out around the branding of sanitation/hygiene advocacy campaigns designed to target the poor. For example, a respondent from CARE Vietnam spoke about the power of reputation: “In social marketing we can also appeal to people’s sense of reputation within their community.”

7. Differentiate

Effective Sanitation/Hygiene Requires Separating Sanitation/Hygiene From Water – Separate funding/budget, separate technical expertise, separate national government ministries are necessary for funding, programming and advocacy

Sanitation/Hygiene need to be separate from water so as not to ‘drown’ them. Many respondents said that sanitation/hygiene remained orphans – either in the Ministries of Public Works, Ministries of Rural Development, Ministries of Water or Ministries of Health. Braimah Apambire of the Hilton Foundation, as well as many others, talked about the “need to elevate sanitation to same level as water. This will be accomplished through awareness creation and information sharing.” Both sectors need a home to garner the attention, funding and staff they need.

“Water overshadows sanitation,” articulates one of the top roadblocks towards more rapidly implementing sanitation/hygiene for the poor in developing nations. The view is that the water sector – stakeholders, funders, and all sector players – insufficiently integrates sanitation/hygiene as top priorities toward achieving a clean and adequate water supply. It is like a blind spot in the overarching discussion, research and debate of the water sector.

DH research supports the conclusion that a key step toward increasing research, funding and the development of successful sanitation/hygiene systems for the poor is to advocate for sanitation/hygiene (combined) as a sector separated from the water sector. Such a strategy may enable sanitation/hygiene to gain the prominence it deserves relative to the health, economic and other negative impacts it produces. Finally, if or when that occurs, it may benefit the poor in developing countries to fully integrate water, sanitation/hygiene as a singular sector once more.

A senior official at the Tanzanian Ministry of Water put it this way. “Water is important and gets a 5 score but in Tanzania, it is a low priority.” The Tanzanian government prioritizes spending on the following schedule:

1. Infrastructure
2. Education
3. Agriculture
4. Health
5. Water and sanitation

Sanitation/Hygiene needs its own budgets. Historically, they have been sub-sectors of the global water, sanitation/hygiene sector, but under this design, they received little funding as water supply has dominated the landscape. Merri Weinger of USAID said, “Water/sanitation

needs to be multi-faceted but WATER is the focus, sanitation is really not there. USAID is more likely to do a wastewater treatment plant, which can help people, but will not affect basic sanitation for the poor. It (sanitation) is the afterthought, stepchild, underfunded. People don't know how to program sanitation."

Nat Paynter of WSP put it succinctly: "At a country level, water is so highly valued it could be rated a six, but sanitation is so low it would be rated a one." Though recent focus on these two sub-sectors has raised their profile, the current study suggests that funding levels remain enormously inadequate. The study also suggests that strong advocacy will continue to play a critical role in allocating money to both sanitation/hygiene.

Baba Coulibaly of Senegal's ONAS (their sanitation utility) restates the need to separate water from sanitation/hygiene: "In Africa, we speak more of water than sanitation and hygiene. We need to create leadership around sanitation and hygiene to elevate it to the same level as water. This could mean creating government posts specific to sanitation and so forth."

There is hope. A Mozambican respondent said, "Increased government focus on the sector [is needed]. I believe that this is happening in Mozambique. For example, when the government was asked how they would like to spend the \$500 million over five years from the MCC, their answer was water and roads. This leads me to believe that they are giving it priority (at least the 'water' side of the equation). They recognize the importance of clean water."

David Kuria of Kenya's Ecotact notes "bilateral calls for support result in investments of up to 90 percent for water. There are no specific calls for sanitation investment, with the possible exception of the Dutch."

"Water is Life" is known and understood by most human beings. What are less obvious to many are the interconnections that exist between sanitation, hygiene and health, economic costs and benefits, environmental viability, quality of life, etc. Respondents indicated there is a great need separate the water sector from the sanitation/hygiene sector so that both sectors receive equal attention and funding when a donor approaches a government Ministry of Water & Sanitation, especially in urban areas.

Urban and Rural Sanitation have especially different needs

Differences between rural and urban sanitation are underappreciated – especially given large differences in scope, volume, cost, cultural and gender taboos. A big issue is that they have quite different constraints. In some rural areas, citizens have land but few funds and individualistic efforts can be effective, while in urban areas it is the opposite. There is a need for policy on sewers and urban regulation. Two regulatory barriers that can actively get in the way of establishing sanitary systems are institutionalized disincentives (random subsidies) and restrictive property rights are two.

The lack of 'spare cash' for sanitation is another barrier in both urban slums and poor rural communities. Sanitation is still seen by some of our informants as an individual and private matter. According to respondent Sam Parker of WSUP, "government can invest and enable but sanitation is often a household decision – individual behavior change and personal investment is key. A national promotion campaign needs to be based on messages that appeal to people and champions to be affiliated."

It may be that grassroots-led approaches, such as CLTS, may not be effective for establishing urban sanitation as a public asset.

Urban dwellers (often renters) need special assistance with government commitment to public toilets and wastewater treatment, as well as customized solutions beyond the rural latrines that are individually owned and movable.

Both rural and urban dwellers can quickly benefit from excellent handwashing information and the cheapness of it, but much more needs to be done on scale-up as well as enforcement of current legislation on both sanitation and hygiene. While the Gates Foundation, WSP and others are doing great work on social marketing and documenting impact, much more needs to be done and to be very widely disseminated.

Constraints, including Financing

Our informants told us that the attention to water at the expense of sanitation was due to a variety of reasons:

1. There is so much money in the water infrastructure business, unlike sanitation.
2. Professionals in the sector tend to come in as water engineers – not from environmental hygiene; sanitation engineers only get training in large-scale wastewater management systems whereas they need training in appropriate solutions for [grassroots] realities.
3. Donors did not ask to see a breakdown of allocations to water versus sanitation/hygiene, especially in Africa – being glad to even have water/sanitation/hygiene on the list of funding priorities.
4. Hygiene was often as ‘drowned’ in Ministries of Health as sanitation was, not being able to easily compete with the compelling data about the direct effects of Oral Rehydration Therapy on child survival.

Financing is complex and the ongoing debate between tariffs for sewage or individual financing and payment for sanitation will not need to be solved before an advocacy campaign with a clear ‘call to action’ emerges for separate funding streams. As the Foundation well knows, donor-driven funding in Africa and Asia happens when donors themselves do not disaggregate – thus the lion’s share funds for water and sanitation can go to water. This may well change with WSSCC’s Global Sanitation Fund¹⁰, data on MDG progress on the drinking water and sanitation’s progress via the GLASS reports, but progress is likely to be slow until ministries with separate bureaucracies – from water or health – and robust budgets are created.

Achieving the full benefits of sanitation/hygiene requires considerable coordination. Until budgets are joined for sanitation/hygiene, oversight may remain fragmented. Responsibilities for design and implementation of water/sanitation/hygiene programs are often fragmented among government ministries; responsible ministries may also change with government reorganizing. In new ministries, there needs to be a clear understanding that hardware and software are both needed and that the cumulative effects will be great. Several respondents said that in some regions there are significant numbers of latrines, but little or no accompanying hygiene. For instance, one official in Uganda noted: “We have plenty of latrines, but no one washes their hands.” Kenyan entrepreneur David Kuria said, “There is a need for a lot of financial support, especially for the new Ministry of Sanitation which does not have a budget and needs to fend for itself.”

Active promotion of sanitation is required to overcome the inertia before it becomes a water sector afterthought. Funding for sanitation, even out of a shared budget, must be seen as a

¹⁰ WSSCC’s Global Sanitation Fund is to help large numbers of poor people attain safe and sustainable sanitation services and adopt good hygiene practices. The Global Sanitation Fund is a single pooled fund open to contribution from any source including governments, foundations, private sector and individuals. The money is allocated to Executing Agencies in carefully selected countries, which then grant funds to Sub-Grantees who implement the sanitation and hygiene work programs agreed for each country. (<http://www.wsscc.org/en/what-we-do/global-sanitation-fund/index.htm>)

win-win, because it has so many ripple effects, e.g., it prevents contamination of the drinking water. In other words, advocacy along with funding is appropriate to encourage this attitude.

Champions are needed in each sector of sanitation/hygiene, as their crosscutting nature keeps these sectors often hidden. A Minister of Sanitation, if there is one, can learn a lot and push the agenda but they may need help for advocacy internal to the government. They can be eager to build their portfolios and budgets so they would be keen on hearing people who give them strategies to do so. Having a Sanitation Ministry and a National Sanitation Policy seems to go a long way towards realizing sanitation outcomes – these were all mentioned as successful in Uganda, Kenya, Senegal and Tanzania because they set up and funded Sanitation and Hygiene Ministries with line items in budgets and thus are good models.

The eThekweni Declaration and AfricaSan Action Plan at the 11th African Union Summit at which African Governments pledged 0.5 percent of their GSP to sanitation was revolutionary. Political will leads to action and political will was clearly generated by advocacy (see elsewhere in this report). Yiga Maker Matovu of ANEW Africa said, “Sanitation is the orphan so we are trying to help them develop advocacy strategies to help ensure both water and sanitation are given equal attention.” Civil Society organizations like ANEW can put pressure on what ministries are in charge of sanitation and AfricaSAN commitments to ensure they are making the changes necessary to live up to their commitments.

So too for hygiene to get a greater share of health budgets, an evidence base is not powerful enough to support stronger advocacy, e.g., by the Ministry of Health’s and public health community for more resource allocation. Separating budgets may also lead to greater research and ability to isolate the impact of a good scaled-up sanitation/hygiene program. Indian communities practicing zero defecation *over time* can be great models for studying benefits. Respondent Professor Sandy Cairncross of London School of Hygiene and Tropical Medicine (LSHTM) lamented the lack of data on hygiene and noted that the “WHO guidelines would have someone wash their hands nearly 30 times a day in order to have an impact, which was not feasible even in the ‘developed’ world.”

8. **Build Upon Cross-Sectoral Opportunities**

More data is required to better highlight how sanitation/hygiene intersects with a variety of other international development sectors such as child survival, reduction of diarrheal disease, human rights, the employment and empowerment of women, education of girls, moving families out of poverty, land rights, good governance and democracy and more.

Water Quality And Sanitation Are Under-Addressed Issues And Ecological Sanitation Has Potential

The Foundation knows well that bad sanitation/hygiene kills some two million children a year. Much of that is transmitted via dirty water (given improper hygiene and insufficient sanitation). Breaking the oral fecal route of infection saves lives on a large scale. Since hygiene relies in large part on water, the ability to meet hygiene goals is necessarily linked with water programming

Water quality and ecological sanitation are key areas to be explored. From increasing shortages of clean water and the need for greater wastewater cleaning to the power of cholera as a way to convince decision makers to act to the economic benefits of ecological sanitation – these were key areas needing more exploration. Further, effluent as a resource was understood best by innovators, e.g., David Kuria of Kenya’s Ecotact, Felicianos dos Santos of Mozambique’s Estamos and Dick van Ginhoven of the Government of the Netherlands. Much more needs to be done to spread their conviction.

Bridge issue: water quality and human health

Water quality – rather than water supply – is a ‘bridge issue’ often overlooked in the water/sanitation/hygiene sector. While the MDG on quality drinking water is linked to sanitation coverage, this is a point on which most sanitation/hygiene advocacy is silent. A significant number of respondents noted that water-borne illnesses are a powerful argument for convincing decision makers that bad sanitation can threaten even them. Respondents also shared that the urgency for improving sanitation/hygiene should be much more effectively argued in connection with cholera outbreaks. One such respondent, IRD Mozambique Representative Mark Heffernan said, “Water, sanitation and hygiene is extremely important. Lack of clean water across Mozambique is critical and a major problem in terms of diarrheal disease and cholera, especially in these last six months with the cholera epidemic.”

Respondent Eddy Perez of WSP put it more bluntly. “Pandemics get great exposure, for example, swine flu. Compare that to the fact that kids are dying daily because no one is washing their hands or preventing cholera epidemics. Inadequate sanitation kills kids and no one cares.”

Respondent Jack Sim said, “Water is about supply. Sanitation is about changing behavior... just because water was traditionally used to flush toilets doesn’t mean that will continue. The implementation of sanitation takes different forms. There are dry toilet designs. If the world starts to understand that you have to handle water separately from sanitation, then sanitation will start to see the light of day. People talk about water and sanitation and black or grey-water... and drift away from the issue of sanitation. Sanitation needs separate attention.”

IRD’s Country Representative stated, “We need to promote the idea that water has monetary value (people must pay for resources), water needs to be protected and contamination avoided. There is a lot to be done around the quality of water at the household level. There should be more focus on the introduction of low-tech, low cost household filter systems. People need to be exposed to these systems, trained on their use and then follow-up reinforcement given.”

Environmental issues also emerged from respondent comments in connection with water quality and use and climate change since climactic vagaries are leading to a reassessment of all natural resources. New realities of water conservation and reuse should be incorporated into water/sanitation/hygiene sectoral planning. Increasingly, the use of scarce water supplies for flushing toilets is seen as inefficient and wasteful. A senior secretary within the government of India describes it as the urban high-level decision maker “Flush and Forget Syndrome.” According to the respondent, “People have a blind spot – if you provide a toilet and water so it works, this leads to flushing, but this is the first part, then problems start – there are many down-the-line effects.”

The emerging global drinking water crisis is an opportunity to improve the cleaning of wastewater. In some urban and peri-urban areas with piped and treated water, how much money is spent on purifying water that is then used for flush sanitation? What impact does this have on national or privatized sanitation budgets? Money is saved if communities can use non-purified water for sanitation needs and purified water for drinking needs. This may be a more productive avenue of investigation rather than focusing on the question of whether, and to what degree, poor sanitation affects water quality. Along these lines, the disposal of “flushed” water should also be considered. For example, research has revealed negative impacts on human and animal health by progesterone that finds its way into water supplies through sewerage systems.

Respondent Dr. Bahri of the International Water Management Institute said, “Economic

growth/development is quite important, especially as it relates to sanitation. Decision makers often do not see the ripple effect. For instance, there are a lot of hidden benefits to investing in appropriate wastewater treatment plants in urban areas: when the water is treated appropriately, you improve your open spaces, increase land value, improve fish populations, improve water quality, clean lakes and increased tourism. You also protect the water supply, improve water resources, etc. Sanitation also addresses long-term water quality.”

Dr. Bahri also spoke about water/sanitation/hygiene advocacy. “We need to ask the question: How do we rank what is important? There is a large role for advocacy to take on promoting this long term, integrated approach. We need to better understand city and urban areas, and especially appropriate waste and wastewater treatment plants. There are a lot of good, low cost, appropriate technologies out there, but we need to bring the different options to Africa, put them on the table and try them out. Advocacy has a big role in achieving this.”

Eddy Perez of WSP noted the uphill struggle that decentralized sanitation/hygiene advocacy faces. “Historically, the one primary focus of advocacy and reform has been geared toward national level governments and decision makers. In part, that has to do with the history of the WSH sector. Not that long ago there was a national water and sanitation agency and now it is delegated to local governments—thousands of entities doing advocacy toward national governments, however challenging, with limited success. Imagine doing that at a local scale with local governments. This is a much bigger planning and advocacy challenge for local mayors.”

Ecological sanitation as a resource

Waste and effluent may be viewed as valuable resources with implications both for appropriate technology and advocacy. Some respondents said they believe cleaned and separated sewage (used as grey-water or completely cleaned water for consumption) has emerged as a powerful intervention to promote sanitation/hygiene in some developing countries.

Respondent Ravi Narayanan, Vice Chair of the Asia Pacific Water Forum noted that “waste management in general is neglected, [including] removal of human waste and garbage in general.”

A respondent who serves as a senior Secretary within the government of India made a similar point: “A clean environment does mean moving dirt from point a to point b, but not in my backyard. We must build in the concept of reuse. Nothing in nature is wasted, only we have invented (the concept of) waste. Our waste is a nutrient in a different form. We must mainstream this in our attitude toward sanitation.”

Narayanan also added that the Bloomberg Newspaper had finally cited an Indian innovation – paying people to use the toilet because the effluent created was being used profitably. Unfortunately, when this development was reported by the news media internationally, it was presented as a point of ridicule.

Other innovative water/sanitation/hygiene interventions have emerged from some recent pilot studies. Dutch respondent Dick van Ginhoven shared that his government and BASF are doing a small pilot study in Nairobi’s Kibera slum to address ‘flying toilets’. Currently, many people in slums without public or private toilet access dispose their urine and feces by defecating into a bag and throwing the bag out of their windows. The Dutch government/BASDF will sell – possibly at cost – biodegradable plastic bags to citizens and some will be employed to collect them after use. The bags will be sent to a centralized clearing space, processed and sold as fertilizer, which will recoup the costs. Such innovations are examples of “working with what is” within a community.

9. Gender – The Hidden Factor

Many of our respondents described **gender, dignity and girls' education** as vitally important issues while simultaneously stating they did not believe messages about the issues would motivate decision makers to take action to improve sanitation/hygiene for the poor. In this instance, the contrast between the deep concern expressed by the majority of respondents versus the perceived influence respondents believe the issue will have on decision makers leads DH to submit that the issue may offer sanitation/hygiene advocacy communications opportunities.

Firstly, research would be necessary to clarify the perceptions of high-level decision makers about this issue. Depending upon the results of the research, advocacy communications activities might include the education of targeted high-level decision makers and subsequently proposing the issue be tapped as a 'raison d'être' for government ministers to act. Additionally, inter-sectoral coordination between sanitation/hygiene and women's rights and girls' education, for example, might further promote improvements in sanitation/hygiene for the poor.

Respondents noted that women are most in charge of hygiene but typically have the least resources. Water is also largely a women's burden, with women spending 40 percent of their time looking for water. In order to facilitate women changing their hygiene habits and those of their families, simple messages and technology that is least constrained by access to water is needed.

Respondent Joke Muyylwijk of Gender and Water Alliance believes that if people made the **connection between the value of women's time and poverty** this would be a compelling argument with which to address hygiene and sanitation. He believes advocacy messages targeting men should be tested, for example, a key message that asks men to imagine the agricultural or other income-generation activities women (and children) could do if they were not burdened with water collection.

Women and girls health and safety may be effective key messages. A respondent who serves as a senior Secretary within the Government of India suggested the following key messages: "To Men: Did you know the best gift you could give you wife and daughter is a toilet? To Women: Your family's health lies in your hands; you can decrease your children's illness."

Respondent Felicianos dos Santos said: "The **links to the economy** are obvious to us who work in the water/sanitation sector. If people have poor sanitation, and become sick with diarrheal diseases, then they can't go to work, and the economy suffers. If this argument is made clearly to decision makers, they should listen and act on it. The same goes for having clean water close by the house. At the moment, women are walking kilometers and kilometers to get water. If they had taps near the home they could spend this time doing more productive things and contributing to the economy."

Education, the integration of water/sanitation/hygiene issues into school curriculums and the establishment of good sanitation/hygiene facilities in schools would pave the way to a better future for girls in developing countries. Several respondents noted that if there are no facilities in schools, girls were 'behind the curve' because they automatically missed out on five days of school each month. Many respondents said this point in particular should be important to high-level decision makers and lamented that it is not.

Equally hidden and even more taboo is the issue of **menstrual hygiene and safe sanitation including the disposal of blood and risk of rape**. Millions of women endanger their safety

and health because they must wait to defecate at night so they will not be seen. The widespread nature of this overlooked need is a mostly hidden human rights issue. Often women have specific needs but the least power to control resources.

Ideally, latrines should be built with the needs of women in mind. When Muylwijk goes to the field, she sees “toilets built in a way that is not useful to the users – either dirty and open or clean and locked. No one has thought about the management, cleaning, and social relationships between users.... When you build a lot of toilets to reach MDGs, then at least ask people where it should be, what technology is suitable, [as] elderly, pregnant, children – [are] usually never consulted.”

There are cultural constraints that are barriers to good sanitation/hygiene in some developing countries. These include cultural taboos on acceptable individual use of facilities. According to respondents, opportunities exist to begin addressing some of these challenges. Respondents mentioned women digging latrines or opening sanitation shops. They mentioned the importance of gender-related issues being addressed by women's groups (especially where they already exist) as an appeal to strengthening the family unit and inter-family roles.

10. Keep the Drumbeat Going – Patience and Sustainability are Key

All of this takes time, and **the development community can be quite impatient**. WaterAid Bangladesh's representative Khairul Islam says that san/hygiene education should be sustained for 15 to 20 years. This is true of advocacy as well, which needs sustained commitment by many actors over a long period of time that simultaneously focuses on a wide spectrum of advocacy activities.

It takes time for a policy to evolve or to change behavior. Numerous respondents said that positive results from private meetings and some conferences with high-level decision makers came following six to 10 years of effort (e.g., AfricaSan and eThikwene).

A big international stage for promoting improved sanitation/hygiene for the poor was set during IYS and related regional conferences. According to respondents, these events helped to crystallize the need for sanitation among many more decision makers.

DH analysis of sanitation/hygiene advocacy during the past two years indicates that increased awareness and positive action can be achieved with focus, campaigns that link goals to measureable outcomes, collaboration among sanitation/hygiene advocates to achieve policy change and Public-Private Partnerships. National Handwashing Day, for example, achieved a distinctive milestone in raising the profile of hygiene. In India, 80 million children washed their hands before the afternoon meal on that day, and the UNICEF informant sees this as a gateway to reaching families with more hygiene info. This commemorative day illustrates both the widespread awareness-raising opportunity and the need for ongoing reinforcement by other means, lest the awareness be lost.

CONCLUSION

Summary of Research Recommendations

For progress in sanitation/hygiene advocacy to continue, more research is needed to better inform the:

“PUSH” factor—information about what motivates target audiences to take desired actions on an issue. Such research informs advocacy communications activities designed to influence the opinions and actions of target audiences.

- i. Target Audiences Research: The values, needs, challenges and opportunities of high-level decision makers in connection with Sanitation/Hygiene issues broken down by audience:
 - Types
 - Continental region
 - Nation
 - Culture
 - Serving urban or rural poor communities
- ii. Target Audience Understandings: What do target audiences know (factually) and believe (fact or myth) about the lack of sanitation/hygiene for the poor?
- iii. Opinion Research: Explore the power of data to motivate target audiences to take desired actions. What are the opinions/reactions of target audiences to key facts about the impacts of the lack of sanitation/hygiene for the poor (e.g. women and girls dignity & girls education impacts)?
- iv. Key Message Research: What messages are most effective in motivating each target audience to take desired actions toward improving sanitation/hygiene for the poor?
- v. Communication Vehicles Research: What communications vehicles successfully connect key facts and messages about sanitation/hygiene with target audiences (news media—radio, TV, newspapers, magazines, Websites, twitter, e-cards, e-mail, postal mail, conference presentations, research papers, etc.) and of those, which are the most effective?
- vi. Spokespersons Research: Who are the top spokespersons for improving sanitation/hygiene for the poor at the globally and nationally? What “types” of individuals are the best spokespersons/ champions for target audiences?
- vii. Advocacy Lessons-learned and Best Practices Research: Identify best practices and lessons-learned from sanitation/hygiene advocacy initiatives; subsequently establish a knowledge management, information sharing and learning tool for the dissemination of the information.

THE “PULL” FACTOR: Information about the efficacy of tangible actions, investments and programming designed to improve sanitation/hygiene, i.e. viable solutions.

Sanitation/Hygiene Impacts Research: Facts about the—

- Costs of NOT improving sanitation/hygiene for the poor (e.g. the impact poor sanitation has on public health, national economies, health care costs, education of girls, human dignity, safety of women and girls and environment)
- ROI/Cost-effectiveness of Interventions, for example, data about how ecological sanitation/hygiene lead to increased tourism revenues, more potable water, fertilizer for farming, etc.
- Separating Sanitation/Hygiene from Water Sector: In instances where this has occurred (e.g. the new Kenyan ministry), has it been successful in achieving the implementation of sanitation and hygiene for the poor faster and more widespread?
- Financial Support: Research on the power of subsidies or other incentives for successfully involving public utilities in meeting the needs of urban and peri-urban populations, especially slums
- Private Sector Engagement: To identify private sector incentives for engaging with the sanitation/hygiene, research and write up case studies about successful business involvement in providing improved sanitation/hygiene to the poor, from multinationals to

local masons, (for example: P&G/ UNILEVER's role in Global Handwashing, Iko toilets in Kenya, Zoom Lion in Ghana)

While there are many excellent insights for sanitation, writ large, the solutions and best ways to implement advocacy or programming is to make sure it is nationally and locally specific. Respondent Kumar Alok of the government of India has many experiences of initiating change at the provincial level. He said that "a variety of different issues have provided the trigger; in some areas the key is a charismatic leader, elsewhere not; in some places there are strong women's groups, elsewhere not; sometimes working through the local bureaucracy can produce results, and in some places the subsidy system makes a difference."

Sanitation/Hygiene advocacy, like the sector itself (distinct from water) is in the early stages of its development upon the world stage. To the sector's credit, advocacy initiatives of the past few years have successfully launched an ongoing "drumbeat" of activities and messages that have been heard and repeated by a wide cross-section of high-level decision makers and other stakeholders around the world.

The advocacy challenge going forward is to sustain and enhance that drumbeat so that it is heard above all the "noise" of competing issues and messages. As best practices emerge, further momentum will be gained. So long as advocacy activities celebrate and magnify successes, sanitation/hygiene is likely to rise from its place as the 'ugly stepchild' of the water sector to an equal member of the development sectoral community.

SECTION III: RESEARCH PROCESS

Introduction

This section presents the Data Harvest (DH) research process for determining the effectiveness of the sanitation/hygiene advocacy efforts of the past two years. It was developed in collaboration with the Water/sanitation/hygiene (WSH) team of the Bill and Melinda Gates Foundation. It reflects a focus on understanding the motivations of high-level decision makers at the international and national levels to take action to improve sanitation/hygiene services for the poor.

It includes an analysis of how advocacy efforts might be made more effective in increasing the attention paid to sanitation/hygiene by donor and developing country decision makers and influencers, strengthening the quality of discourse on sanitation issues and enhancing the policy decisions and funding commitments to sanitation/hygiene.

Countries of Focus

The 10 countries of focus for this research project were:

Asia

Bangladesh
India
Indonesia
Vietnam

Africa

Ghana
Kenya
Mozambique
Senegal
Tanzania
Uganda

Time Frame of Advocacy Examined

January 2007 through May 2009.

Objectives

DH was asked to research four strategic objectives to help the Foundation and its partners better understand the efficacy of good advocacy:

1. Better understand what has/has not worked in sanitation-specific advocacy efforts to date.
2. Develop strategic recommendations for an approach to sanitation-specific advocacy and communications efforts that would more effectively motivate high-level decision makers at the international and national levels to take action towards improving sanitation/hygiene for the poor in developing countries.
3. Determine whether water/sanitation/hygiene-inclusive advocacy and communications approaches have hindered or furthered sanitation-related advocacy objectives.
4. Assess the extent to which sanitation is understood as a critical concern for social and economic development and what could make it more so.

In presenting our findings and analysis, DH combined strategic objectives #1 and #3.

Key Components of the Research Process

1. Background research on water, sanitation/hygiene and advocacy

This consisted of: attending the World Bank Water Week meetings and presentations in Washington, DC and the 5th World Water Forum in Istanbul; gathering sector and country-specific materials at these meetings; and carrying out documentary research as well as research via the Internet on decision makers who were exposed to advocacy.

2. Identifying Informants and Contact Information

The most intensive aspect of the research process was the compilation of 517 potential key informants, narrowing them down to 180 and prioritizing the top 80. This list drew on professional contacts from our DH team, presenters/participants at the meetings, and individuals from the background research. DH also received referrals from individuals at UNICEF and WSSCC.

As DH began conducting interviews, we solicited other high-level decision maker recommendations from our informants; replaced unavailable priority interviewees with those further down the priority of our contact list; and conducted research to identify alternate government staff informants – particularly in Asia. Ministry of Planning and private sector informants also were obtained in this way via referrals. Ministry of Finance staff, however, proved to be particularly elusive. DH selected informants that fell under five categories: Donors, Advocates, National Government, PVO/ NGO/ CBO and Private Sector¹¹. Additionally, DH strove to balance (1) sanitation/hygiene “champions” with (2) informants who were likely to have been exposed to sanitation/hygiene advocacy events and messages, and (3) informants who were more likely to be new to the sanitation/hygiene sector.

3. Training – Appreciative Inquiry

The DH research team received training about the principles of Appreciative Inquiry (AI) – a strength-based process that focuses on what works best and how to improve on it. The training presented interview protocols based on AI principles, the effective elicitation of stories during the research interview and the hallmarks of a ‘good’ story, e.g., being most useful in seeking out the best occurrences of effective advocacy for sanitation. Our trainer, Madelyn Blair, also reviewed our questionnaire and provided AI training materials (see “APPENDIX, 5. Appreciative Inquiry Principles: Summary of Principles of the Interview Approach”).

Appreciative Inquiry for Effectiveness and Impact in Sanitation Advocacy

The Appreciative Inquiry (AI) approach taken by DH consists of focusing on what works in order to celebrate what is possible as well as amplify available opportunities – rather than focus on what does not work and try to fix it. Begun by David Cooperrider of Case Western in 1980, it is both a paradigm for change and a research methodology:

“The traditional approach to change is to look for the problem, do a diagnosis, and find a solution. The primary focus is on what is wrong or broken; since we look for problems, we find them. By paying attention to problems, we emphasize and amplify them. ... Appreciative Inquiry suggests that we look for what works... The tangible result of the inquiry process is a series of statements that describe where the organization wants to be, based on the high moments of where they have been. Because the statements are grounded in real experience and history, people know how to repeat their success.”
- Hammond, Sue. *“The Thin Book of Appreciative Inquiry”*

¹¹ This stands for Private Voluntary Organization (normally international charity)/ Non-Governmental Organization (normally in-country charity or local office of the PVO)/ Community Based Organization (local, grassroots organization).

In terms of DH's research for the Foundation, this definition may be helpful:

"Appreciative Inquiry is a form of action research that attempts to create new theories/ ideas/ images that aide in the developmental change of a system (Cooperrider & Srivastva, 1987). The innovation of appreciative inquiry is the collection of people's stories of something at its best.... These stories are collectively discussed in order to create new, generative ideas or images that aid in the developmental change of the collectivity discussing them."

- Bushe, Gervase. *"Five Theories of Change Embedded in Appreciative Inquiry"*

DH engaged Madelyn Blair to train our Associates in this approach as interviewers as well as to imbue the questionnaire with this perspective. The Associates needed to: understand the principles that stories are powerful, learn techniques to be able to shift responses to include what works and what has been effective, and articulate why the focus on effective strategies and what works is necessary (and perhaps sufficient) for creating viable strategies for the future of sanitation advocacy.

The four AI principles were:

- Simultaneity: Asking a question is an intervention. What we ask respondents to talk about focuses their minds to do more and what stories are elicited focuses attention.
- Anticipatory: Image inspires action. Human systems move in the direction of their images of the future. Eliciting stories of what worked sharpens the images of what is possible.
- What works: Questions that allow the respondent to say why things worked generate possibilities that are energized by the previous effective strategies.
- Enactment: Acting 'as if' is self-fulfilling. Interviewers act with the intention that there will be reports of success, thus, embodying what works.

4. Testing

DH drafted and pre-tested the survey questionnaire and obtained feedback from the Foundation, Brocklehurst, and Lane on both the survey and the list of interviewees. During the pre-test with 10 interviewees, it became clear that DH needed to increase the focus on sanitation/hygiene. Whenever water was included in questions, it (rather than sanitation/hygiene) dominated respondent answers. DH also made a variety of changes to the questionnaire based on Foundation input from Vanessa Mazel and Casey Hanewall that added the line of questioning on "factors that can influence decision makers to pay more attention to sanitation and hygiene."

Interviews

All interviews utilized an Appreciative Inquiry (AI) approach (explained in detail above) with the intent of soliciting the advocacy lessons-learned and stories of success from each respondent. The DH team conducted two categories of interviews:

1. Survey Questionnaire Interviews

These were a set of nine questions posed in several different formats: rankings; yes-no; and open-ended. DH examined what interviewees knew about water/sanitation/hygiene, how they came to know about water/sanitation/hygiene, to what degree they believed the sector was robust and what they thought could expand awareness and action around the issues.

DH used SPSS to look at frequencies, overall trends from both numerical and open-ended data, and ranked data based on those over 80% strongly agreeing or strongly disagreeing. DH

did this based on responses by target audience (e.g., donor, private sector), geographical area (Global, Africa, Asia) as well as country.

In the majority of cases, DH decided against reporting on country-level responses as DH had less than 10 respondents per country. DH also looked closely at individual responses to open-ended questions, did word frequency analysis and included key quotes throughout this report (see “APPENDIX, 2. Questionnaires, a. Data Harvest Telephone Survey Questionnaire”)

2. Advocacy Communications Specialists Interviews

DH conducted informal interviews with selected advocacy communications specialists primarily outside of sanitation/hygiene to examine the process of how certain health, social and environmental issues moved from low awareness and action to international prominence – and the role of advocacy in bringing those issues to the fore. These interviews included advocates from climate change, HIV/AIDS, maternal health and infant mortality.

These interviews were loosely structured, but in each instance they framed around the following questions:

- a. What were some of the major challenges confronting their sector of expertise in becoming an internationally prominent issue with significant support from high-level decision makers?
- b. What were the key events/tipping points that helped to significantly launch their sector of expertise to international prominence and action?
- c. What role did advocacy communications play in that process? (Note: DH probed for such things as grassroots activism; NGO engagement; donor alignment; international level convening, celebrity spokespersons, partnership development, etc.)
- d. What role did research data play in making the case for action?
- e. DH also probed for information about whether or not awareness and action about the interviewee’s sector of expertise was propelled by the engagement of leaders from other sectors.

Survey Informant Types and Respondent Numbers

DH sought to achieve an overall balance of interviews that represented a cross-section of respondent groups, countries and regions, with the following results:

NUMBER OF RESPONDENTS	TARGET AUDIENCE TYPE				
TOTAL	DONOR	ADVOCATE	GOVERNMENT	PVO NGO CBO	PRIVATE
103	33	21	16	23	10

1. Donors

From organizations primarily focused on funding projects, for example: the World Bank, African Development Bank, Bilateral donors and USAID.

2. **Advocates**

From organizations dedicated to promoting water/sanitation/hygiene.

3. **Government Representatives**

From the Ministries of Water, Sanitation, Health and Public Works in all 10 countries of focus.

4. **PVO/ NGO/ CBO**

Individuals from international, national and/or grassroots non-profits implementing projects on the ground, or in the sub-region, e.g., South Asia or West Africa.

5. **Private Sector**

Representatives from multinational corporations such as Coca Cola and Proctor & Gamble as well as smaller, in-country entrepreneurs such as Ecotact and the National Water & Sewerage (a Public-Private Partnership).

If an informant's organization and job responsibility could be tied to more than one of the five categories, DH used the individual's job responsibility to select one category over the other.

6. **Country or Sub-Region**

DH used a similar method for our country or sub-regional allocations. For example, our informant for the West African Water Initiative is based in Ghana. However, his comments on sanitation/hygiene during our interview drew on his work across the West African region. Therefore, DH made his country/sub-regional allocation "Multi-African Countries" rather than Ghana alone.

7. **Influencer or Implementer**

DH also sought an even division of respondents between "Influencers" who comprised a total of 54 donors and advocates and "Implementers" who came from 49 national government, PVO/ NGO/ CBO and private sector organizations.

8. **Relevant Expertise**

DH searched for respondents who would be informed about water/sanitation/hygiene as well as those who were involved in policy, planning, or finance. DH interviewed 21 people who were specifically informants about hygiene and handwashing and experienced in both urban and rural programming.

DH was less successful in finding government finance or planning staff despite numerous queries to each targeted individual. This may illustrate a gap between water/sanitation/hygiene government staff and finance and planning government staff. In response to DH efforts to secure such interviews, many potential respondents said their schedule made it impossible to schedule an interview until long after the end of the research project.

9. **Geographic Scope of Work**

a. **Global:**

One-quarter of our sample (27) covered the globe for organizations such as UNICEF and UNDP, the World Bank, USAID and others.

b. **Africa – Country or Multi-national:**

Nearly half of our total interviewees came from Africa – 31 from individual countries and 14 covering sub-regions of Africa, e.g., west or East.

It was straightforward to reach high-level decision makers Africa. For the most part, we succeeded in interviewing a balanced sample across different target audiences per country, ranging from three to seven from each country. Because of the small number of respondents representing each country, in our analysis we aggregated specific African country and Multi-African regional respondents (45).

	GLOBAL	<u>COUNTRIES</u> AFRICA						
		Multi-African Countries	GHANA	KENYA	MOZAMBIQUE	SENEGAL	TANZANIA	UGANDA
Totals By Country			3	6	7	5	3	7
Totals By Global, Multi-African,	27	14						
Total For Africa		45						

c. **Asia** – Country or Multi-national:

Reaching high-level respondents proved to be very difficult and as a result, the project's research phase was extended by another two weeks to enable us to concentrate on Asian contacts. We reached 31 respondents across all five categories, with referrals from high-level respondents to others proving to be the most effective, path but also the slowest. Vietnam was the most difficult, but DH was satisfied to find five high-level respondents, including a Governmental Vice Minister and a private sector representative from Unilever.

	<u>COUNTRIES</u> ASIA				
	Multi-Asian Countries	BANGLADESH	INDIA	INDONESIA	VIETNAM
Totals By Country		8	9	7	5
Totals By Multi-Asian	2				
Total For Asia	31				

DH interviewed senior-level individuals from a wide scope of organizations that represented the following audience types:

- **Advocates**
- **Donors**
- **Government**
- **Private Sector**
- **PVO/ NGO/ CBOs**
- **Advocacy Specialist Informants**

Defining Advocacy

Another critical component of our research process to determine the effectiveness of sanitation/hygiene advocacy was to establish a clear definition for advocacy communications. We did so by examining documentary research from a variety of sources that included:

- Centre for Nonprofit Strategies (2005). "Advocacy for Impact: Lessons from Six Successful Campaigns."
- Evaluation Exchange (2007). "Advocacy and Policy Change: Spring 2007."
- Coffman, J. (2003). "Lessons in Evaluating Communications Campaigns: Five Case Studies." Washington DC, Communications Consortium Media Centre.
- Susan Nall Bales and Franklin D. Gilliam, Jr. (2004). "Communications for Social Good." New York, N.Y., Foundation Center.

In broad terms, "advocacy" is defined as the process of supporting a cause or proposal. Advocacy communications also refers to "disseminating information intended to influence individual behavior or opinion, corporate conduct, or public policy and law."¹²

In the context of the International Development community and for the purposes of this study, advocacy communications is *action geared towards changing the policies, positions or programs of any institution and/or defined target audience*.

In order to evaluate key sanitation/hygiene advocacy initiatives of the past two years, DH presented the Foundation with a list of universal "Good Advocacy Criteria" at the start of this research project (presented below). It provides a general road map for evaluating individual advocacy campaigns. However, it is important to note that advocacy communications is not prescriptive and the DH "Good Advocacy Criteria" has been used as a framework for evaluation, not a strict "to-do" list.

Heather B. Weiss, Ed.D., founder & director of the Harvard Family Research Project has noted: "Advocacy strategies to inform or influence policy can include activities such as one-on-one meetings, testimony at hearings, community meetings or forums, coalition building, public education campaigns, street marches, media outreach, and electronic advocacy."¹³ Advocacy goals also may include social justice issues that may or may not include public policy change and they may aim to change the policies, positions or programs of ANY type of institution – NGO, community leaders, government ministers, international agency or corporation. Some advocacy initiatives may cover a mix of objectives – policy, social justice, behavior change, programmatic, etc.

In examining sanitation/hygiene advocacy, DH considered a wide spectrum of advocacy goals, strategies and actions.

Also for uniformity of definitions, we defined sanitation¹⁴ and hygiene¹⁵ as "including rural and urban programs, innovative methods of promoting access and affordability, infrastructural improvements such as sewerage and latrines and the promotion of behavior change in such areas as handwashing and latrine use (see: "APPENDIX, 2. Questionnaires, a. Data Harvest Telephone Survey Questionnaire").

¹² (2005) "Advocacy for Impact: Lessons from Six Successful Campaigns." Center for Nonprofit Strategies, USA.

¹³ The Evaluation Exchange, Periodical, Harvard Family Research Project, Harvard Graduate School Of Education, Volume XIII Number 1, Spring 2007.

¹⁴ Sanitation generally refers to the provision of facilities and services for the safe disposal of human urine and feces. Inadequate sanitation is a major cause of disease worldwide and improving sanitation is known to have a significant beneficial impact on health both in households and across communities. (From WHO <http://www.who.int/topics/sanitation/en/>)

¹⁵ Hygiene is promoting individual and household health through the appropriate disposal of human waste, handwashing and ensuring gender sensitivity and privacy (DH definition from var. sources).

Data Harvest "Good Advocacy Criteria"	
Core Decisions:	<ul style="list-style-type: none"> a. Goal The goal must be well-defined, tangible, represent a definitive plan of action and be measurable. b. Measures of Impact Evidence or information that determines whether you ultimately have been successful in accomplishing the goal.
Context:	<ul style="list-style-type: none"> a. Resources b. External Factors Advocates understand the environment for communicating the issue including known facts, misperceptions, players, opposition, and any public debate.
Strategic Choices:	<ul style="list-style-type: none"> a. Target Audiences The groups and sub-groups that represent the individuals being called upon to take specific actions. Audience targeting that is too broad leads to vague messages that have little or no impact. b. Values and Core Concerns What will compel the target audiences to move toward the program goal and take desired actions? c. Strategic Approach d. Message Reflects the call to action and is appropriate to the target audience. e. Messengers/Spokespersons Who is credible to the target audience? f. Sustainability Raising awareness, changing opinions, communicating a call to action and achieving lasting change in connection with an issue (such as sanitation/hygiene) typically takes time. Thus, an important consideration for advocacy approaches for the International Development Community is their sustainability over several years.
Tactics:	<p>Tactics should:</p> <ul style="list-style-type: none"> a. Be in line with the objective b. Produce tangible/measurable outcomes toward achieving the objective c. Reflect the strategic approach
Evaluation	Evaluations should be tied to the initiatives should stipulate a method for evaluation that includes tangible measures of impacts and facilitates learning.

Section IV: APPENDIX

1. **Summary - Tables of Findings** (7 pages)
2. **Questionnaires**
 - a. Data Harvest Telephone Survey Questionnaire (5 pages)
 - b. Data Harvest Advocacy Specialist Interview Questions (1 page)
3. **Advocacy Communications Case Studies** (6 Pages)
 - a. Case Study #1 HIV/AIDS
 - b. Case Study #2 Climate change
4. **Appreciative Inquiry Principles: Summary of Principles of the Interview Approach** (1 Page)
5. **Matrix: Impact of UNICEF/UNDP/WSSCC IYS Activities** (2 pages)
6. **Bibliography** (5 Pages)
7. **Staff List** (1 Page)

SUMMARY - TABLES OF FINDINGS

Please note, the following percentage frequencies of responses according to region or target audience categories represent small numbers of total informants in each case. DH was very pleased to have completed interviews with 103 respondents (43 more than the 60 we promised in the original Scope of Work), but when total interviews are analyzed by region or target audience type, the total number of individuals per sample shrinks dramatically. For that reason, we did not present findings by country, but instead aggregated them by whole *target group* (35 donors, 19 advocates, 16 government representatives, 24 PVO/ NGO/ CBO staff and 10 private sector informants) or *region* (Global, African, Asian). With that understanding, DH wishes to note that our informants presented themselves to us as an excellent group of respondents for this research project who, in many cases, spent considerable time responding to our questions. Please see the report for detailed findings.

Q1R-Importance of Water, Sanitation and Hygiene					
		Region of Respondent			
		Africa	Asia	Global	Total
Average or Low Importance*	Count	7	6	2	15
	%	15.6%	19.4%	7.4%	14.6%
Very Important**	Count	38	25	25	88
	%	84.4%	80.6%	92.6%	85.4%
Total	Count	45	31	27	103
	%	100.0%	100.0%	100.0%	100.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

In answering **Strategic Objective #2:**

“Assess the extent to which sanitation is understood as a critical concern for social and economic development and what could make it so,” DH drew on 103 survey responses. This Annex summarizes our key findings.

The most highly ranked questions were:

MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total ¹⁶
1. AGREE that Public Sanitation/Hygiene Campaigns Are Important in Raising Awareness	Count	25	19	16	20	8	88
	%	75.8%	90.5%	100.0%	87.0%	80.0%	84.5%
2. AGREE that Financial Support from Government or Donors Needs More Attention	Count	28	21	10	18	7	84
	%	84.8%	100.0%	62.5%	78.3%	70.0%	81.6%

¹⁶ Note: Total percentages cannot be a simple average of individual percentages as they each are comprised of their own 'universe' thus they will differ slightly from the simple average.

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MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
3. AGREE that Better Information to Decision Makers About Sanitation/Hygiene Benefits Needs More Attention	Count	30	20	16	19	7	92
	%	90.9%	95.2%	100.0%	82.6%	70.0%	89.3%
4. AGREE that More Public Awareness That Leads to More Public Demand Needs More Attention	Count	32	20	13	23	8	96
	%	97.0%	95.2%	81.2%	100.0%	80.0%	93.2%

MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
5. AGREE that Extent of impact of "S/H Improves economic growth/reduces poverty" on decision makers is high	Count	27	18	8	15	9	77
	%	81.8%	85.7%	53.3%	71.4%	90.0%	81.8%
6. AGREE that Extent of impact of "Sanitation and Hygiene Improve public health" on decision makers is high	Count	17	15	13	16	6	67
	%	51.5%	71.4%	86.7%	76.2%	60.0%	65.0%

MOST HIGHLY RANKED QUESTIONS BY RESPONDENT TYPE					
		Region of Respondent			
		Africa	Asia	Global	Total
7. AGREE that Financial Support from Government or Donors Needs More Attention	Count	42	18	24	84
	%	93.3%	58.1%	88.9%	81.5%
8. AGREE that Extent of impact of "S/H Improves public health" on decision makers	Count	28	23	16	67
	%	63.6%	79.3%	59.3%	65.0%

Factors That Influence Decision Makers

Table 3.4- More Public Awareness That Leads to More Public Demand Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Agree**	Count	32	20	13	23	8	96
	%	97.0%	95.2%	81.2%	100.0%	80.0%	93.2%

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Table 3.3- Better Information to Decision Makers About Sanitation/Hygiene Benefits Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	3	1	0	4	3	11
	%	9.1%	4.8%	0.0%	17.4%	30.0%	10.7%
Agree**	Count	30	20	16	19	7	92
	%	90.9%	95.2%	100.0%	82.6%	70.0%	89.3%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Economic arguments to decision makers

Table 6.2- Extent of impact of "S/H Improves economic growth/reduces poverty" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	6	3	7	6	1	23
	%	18.2%	14.3%	46.7%	28.6%	10.0%	23.0%
Very Important**	Count	27	18	8	15	9	77
	%	81.8%	85.7%	53.3%	71.4%	90.0%	77.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Health arguments to decision makers

Table 6.1- Extent of impact of "Sanitation and Hygiene Improve public health" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	16	6	2	5	4	33
	%	48.5%	28.6%	13.3%	23.8%	40.0%	33.0%
Very Important**	Count	17	15	13	16	6	67
	%	51.5%	71.4%	86.7%	76.2%	60.0%	67.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

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Appendix

Environmental Arguments To Decision Makers

Table 6.6- Extent of impact of "S/H Creates a Clean Environment" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	21	13	5	11	3	53
	%	63.6%	61.9%	33.3%	52.4%	30.0%	51.4%
Very Important**	Count	12	8	10	10	7	47
	%	36.4%	38.1%	66.7%	47.6%	70.0%	40.1%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Dignity/Gender Arguments To Decision Makers

Table 6.5- Extent of impact of "S/H Safeguard human dignity/gender issues" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	22	15	10	11	9	67
	%	66.7%	71.4%	66.7%	52.4%	90.0%	65.0%
Very Important**	Count	11	6	5	10	1	33
	%	33.3%	28.6%	33.3%	47.6%	10.0%	32.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Girls' Education

Table 6.4- Extent of impact of "S/H Supports learning through safe hygienic facilities for school girls" on decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	21	12	9	9	6	57
	%	63.6%	57.1%	60.0%	42.9%	60.0%	55.3%
Very Important**	Count	12	9	6	12	4	43
	%	36.4%	42.9%	40.0%	57.1%	40.0%	41.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Business Profits

Table 6.7- Extent of impact of "S/H Makes profit from business sales of S/H supplies" influence decision makers							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Average or Low Importance*	Count	25	17	13	15	8	78
	%	75.8%	81.0%	86.7%	71.4%	80.0%	75.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Factors for Increasing Awareness and Action

More financial support needed

Table 3.1- Financial Support from Government or Donors Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree	Count	5	0	6	5	3	19
	%	15.2%	0.0%	37.5%	21.7%	30.0%	18.4%
Agree	Count	28	21	10	18	7	84
	%	84.8%	100.0%	62.5%	78.3%	70.0%	81.6%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Table 3.1R-Financial Support from Government or Donors Needs More Attention					
		Region of Respondent			
		Africa	Asia	Global	Total
Disagreed*	Count	3	13	3	19
	%	6.7%	41.9%	11.1%	18.4%
Agreed**	Count	42	18	24	84
	%	93.3%	58.1%	88.9%	81.6%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Government Legislation May Not Be Needed

Table 3.2- New Government Legislation Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	19	8	9	15	7	58
	%	57.6%	38.1%	56.2%	65.2%	70.0%	56.3%
Agree**	Count	14	13	7	8	3	45
	%	42.4%	61.9%	43.8%	34.8%	30.0%	43.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

More Business Involvement

Table 3.5- More Involvement by Business Needs More Attention							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	3	2	4	7	2	19
	%	9.1%	9.5%	25.0%	30.4%	20.0%	17.5%
Agree**	Count	30	19	12	16	8	85
	%	90.9%	90.5%	75.0%	69.6%	80.0%	82.5%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Respondents' Views on Organizations Doing Advocacy

Frequency and Proportion of Top Organizations*	Number of times mentioned	Percentage of 103 respondents who mentioned the organization
UNICEF	39	21.4%
WaterAID	30	16.5%
Government	28	15.4%
World Bank/WSP	28	15.4%
PLAN	11	6.0%
WSSCC	9	4.9%
CARE	7	3.8%
AusAID	5	2.7%
Feliciano Di Santos	5	2.7%
GATES Foundation	5	2.7%
USAID	5	2.7%
DFID	4	2.2%
ADB	3	1.6%
IYS	3	1.6%
TOTALS	182	100.0%

*These organizations were mentioned by a minimum of three different respondents.

Campaigns

Table 5.2- Public Sanitation/Hygiene Campaigns Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	8	2	0	3	2	15
	%	24.2%	9.5%	0.0%	13.0%	20.0%	14.6%
Agree**	Count	25	19	16	20	8	88
	%	75.8%	90.5%	100.0%	87.0%	80.0%	84.5%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

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Events and Meetings

Table 5.1- Public/Private Events/meetings Attended Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	8	4	4	5	2	23
	%	24.2%	19.0%	25.0%	21.7%	20.0%	22.3%
Agree**	Count	25	17	12	18	8	80
	%	75.8%	81.0%	75.0%	78.3%	80.0%	77.7%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

News and Advertising

Table 5.3- News Reports Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	11	6	4	9	4	34
	%	33.3%	28.6%	25.0%	39.1%	40.0%	33.0%
Agree**	Count	22	15	12	14	6	69
	%	66.7%	71.4%	75.0%	60.9%	60.0%	67.0%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

Table 5.4- Advertising Campaigns Are Important in Raising Awareness							
		Description of Respondent					
		Donor	Advocate	National Government	PVO/NGO/CBO	Private Sector	Total
Disagree*	Count	9	6	2	8	2	27
	%	27.3%	28.6%	12.5%	34.8%	20.0%	26.2%
Agree**	Count	24	15	14	15	8	76
	%	72.7%	71.4%	87.5%	65.2%	80.0%	73.8%

*Represents respondents who answered 1, 2, or 3 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

**Represents respondents who answered 4 or 5 on a scale of 1 to 5 with 1 = Least Important and 5 = Most Important

QUESTIONNAIRES

Data Harvest Advocacy Specialist Interview Questions

Intro: we are examining the process of how certain health, social and environmental issues came to major international prominence and the role of advocacy in bringing those issues to the fore.

1. What were some of the major challenges that _____ faced in becoming an internationally prominent issue with significant support?
2. What were the tipping points that helped to significantly launch _____ into international prominence?
3. What role did advocacy – writ large – play in this process (grassroots movements; NGO engagement; donor alignment; international-level convening; partnership development)

DATAHARVEST ASSUMPTIONS TO ASK ABOUT (or probe further when these are mentioned in response to above questions)

1. What role did data play in making the case for the impacts, positive and/or negative, of _____?
2. Was it important that the issue gained traction with multiple sectors of society (health, economic, education, environment, etc)?
3. Was it important that solutions addressing _____ be presented as part of the advocacy outreach? (Or not – was data sufficient to gather significant momentum to explore solutions, for example?)
4. What were the biggest influences on (developing country) national governments to make _____ a priority?

ADVOCACY COMMUNICATIONS CASE STUDIES

Case Study #1: A Perspective from the HIV/AIDS Sector

The rise of HIV/AIDS on the international development agenda is inherently different from other issues such as sanitation due to the fact that the condition/disease afflicts citizens of developed nations and advocacy was, for the first twenty years, mostly based in the US and Europe. However, there are some interesting and important milestones in the rise of awareness of HIV/AIDS worldwide that other issues and sectors can draw from.

It is believed that HIV/AIDS entered the US in the early 1970s, by which time African doctors had seen a rise in opportunistic infections and wasting, although western doctors and scientists remained ignorant. The first public reports of the disease came via the Centers for Disease Control in 1981, which named it AIDS in 1982, thus providing it with a distinct identity.

In response to the lack of US government recognition, support and engagement in the face of a growing number of infections and deaths, grassroots efforts got underway in the early/mid-1980s, creating more of a movement to raise awareness and motivate government action to address the spread of the disease. The HIV/AIDS activist organization, ACT UP, staged public demonstrations and other highly visible stunts to force action, such as FDA drug approvals. They used slogans such as SILENCE=DEATH to raise awareness of the spread of AIDS, along with political art such as the AIDS Quilt Project. "The loud, humorous, highly organized activist movement in the US was the major driver of change and over time, the ACT UP logos, ads and bumper stickers became ubiquitous to the advocacy effort," according to Jon Cohen, a *Science Magazine* reporter who has covered HIV/AIDS.

The spread of AIDS to non-gay portions of the US population prompted a level of misconception and in some cases hysteria about how the disease is spread.

High profile cases in the US such as Ryan White, a nine-year-old hemophiliac with AIDS whose presence at his school prompted some parents to pull their children out of his school, garnered significant media coverage and helped to underscore the level of conflicting information. (White became an advocate and spokesperson on AIDS until his death in 1990.) Just prior to this event, the World Health Organization issued a report on the number of those infected and killed by the virus in the US, raising the specter of the epidemic. All of this led to the first convening of the International Conference on AIDS, and the founding of the American Foundation for AIDS Research (amfAR).

Starting in 1985, with the death of US movie star Rock Hudson from AIDS, the media coverage of celebrities who died from AIDS or announced they were infected had a major impact on bringing the issue to the fore in the US – and to some extent the world. The illness and/or death of numerous celebrity figures helped to mainstream public concern and greater understanding of the virus as a major health threat. From sports stars to Hollywood starlets, the engagement of internationally recognized individuals in the HIV/AIDS movement would continue to raise awareness and funds, and help dispel the stigma that had enveloped AIDS for many years. Legislation in the US would follow, such as the Ryan White Act and the Americans with Disabilities Act, that would help protect and support those with HIV/AIDS.

In the developing world, particularly hard-hit Africa, this level of activism was absent until the dawn of effective HIV/AIDS medications, which allowed governments to lobby for access to those drugs for afflicted, under-served populations. In other words, until there was an available solution, advocacy by and for poorer, developing countries did not happen.

HIV/AIDS Advocacy Lessons for Sanitation/Hygiene

The following lessons learned from HIV/AIDS advocacy that apply to advocacy for sanitation/hygiene are based on documentary research, interviews we conducted with notable authorities on the history of HIV/AIDS advocacy (as well as other major international health issues) and DH's own advocacy communications expertise.

- **Articulate a condition as a problem** – Poor sanitation is most often perceived as simply an ever-present condition in many countries, rather than a major health and/or economic threat. Grassroots demand and political will can be increased by promoting the concept that access to sanitation is a right and a key component of improved health systems.

According to Maurice Middleburg, vice president of policy at the Global Health Council, "The AIDS advocates did a good job of this by turning the infection rate into an urgent problem. And with everyone they reached out to, they customized the urgency of the message for each particular audience."

- **Establish celebrities and other champions** – Having highly visible individuals as spokespersons helps attract funding and media attention, and thereby raises awareness. Just as HIV/AIDS was a taboo subject that benefited greatly from celebrities addressing the issue publically, so can sanitation benefit from high-profile individuals who are willing to talk about what is often perceived as a very personal, and not a public, issue.

Theresa Shaver of the White Ribbon Alliance, which focuses on maternal health issues in developing countries, attests to the power of high-profile individuals to strengthen advocacy efforts: "Sarah Brown, the wife of the Prime Minister of Great Britain, is our major champion. She in turn taps into a network of friends, stars and media, who leverage their own networks, resulting in a movement that maternal health has never experienced before. This was evident in the AIDS movement, which also generated a lot of funding through celebrity champions."

- **Set clear goals** – Knowing specifically what you want to achieve through advocacy from the start is crucial to developing the most successful advocacy strategies and tactics to meet those objectives. Specificity also helps clarify the path forward, i.e., all the interim steps/objectives that must be met to ultimately achieve the goal.

During the early stages of HIV/AIDS advocacy in the US, advocates wanted significant government and private resources devoted to developing treatments and a possible cure to the virus, followed by access for all to HIV/AIDS treatments. Advocates understood that the path to achieving those objectives included a new level of effort to fight discrimination against homosexuals and actions that would dramatically raise awareness of the epidemic and all of its impacts among the general public, policymakers, the news media and all major stakeholders within the public health sector.

In later years, HIV/AIDS advocates established more specific, tangible goals. According to Maurice Middleberg of the Global Health Council: "Know what you want to achieve and communicate those goals clearly. Often program people get caught up in diffuse, technical messages, which don't work in terms of advocacy. HIV/AIDS developed goals like treating three million people in five years, which was very clear."

- **Innovate** – Advocacy communications efforts that employ new and creative strategies and tactics can help to distinguish an issue such as Sanitation/Hygiene from competing International Development issues of concern and thus raise awareness and action.

In the case of HIV/AIDS advocacy in the US, the raucous, daring and humorous strategic approach employed by advocates, combined with an intelligent and sophisticated policy change effort, enabled HIV/AIDS advocates to garner wide news media coverage and wedge their way into advisory positions of prominent policy health groups.

As *Science Magazine* and free-lance journalist Jon Cohen described: “The ACT UP logos, ads and bumper stickers became ubiquitous to the HIV/AIDS advocacy effort. Their advocacy communications genius was to clown around and play with the camera in a way that had never been done before while simultaneously taking on the FDA, the pharmaceuticals, the department of Health and Human Services and other health policy groups. They used the best of Madison Avenue and theatrical techniques to get their point across and they did it with funny looking hair, unusual attire, and as an ostracized group who proclaimed, ‘We’re here, we’re queer and we’re not going shopping.’ They even shut down the Golden Gate Bridge.”

- **Demonstrate Solutions** – Successful advocacy typically requires that achievable solutions to the defined problem be put forward. In the case of HIV/AIDS, the solution was education about prevention and treatment by effective drugs.

There are nuances to this rule. According to Cohen, HIV/AIDS advocacy during the early stages was succeeded by messages that proclaimed the absence of effective treatment and the view that authorities were not trying hard enough to find a cure and solution. In developing countries, however, the demonstration of solutions facilitated action. “The key factor that led to HIV/AIDS being effectively addressed by the International Development Community was from effective drug treatments – a solution – followed by advocacy efforts to help overcome the lack of access to treatment by the poor,” Cohen said.

Finally, the effective utilization of solutions in the case of sanitation/hygiene is more complex than the case of HIV/AIDS. The scope and nature of the sanitation/hygiene challenge necessitates the development of many different types of solutions depending on a wide variety of national government, cultural, environmental and local community factors.

- **Demonstrate Success** – Once solutions are offered and implemented with some degree of success, advocacy communications can effectively use this outcome to spur greater action, funding and public acceptance. It is undeniable that viable solutions serve as powerful motivators for high-level decision makers to devote greater resources and take action.

Case Study #2: Climate Change

The issue of climate change provides interesting insights on sanitation/hygiene advocacy from the perspective of being a far-reaching problem that had difficulty gaining broad public concern and action despite scientific data that supported its importance.

Background

- Starting in the 1970s, the scientific research began to emerge about climate change and its impacts. Early on, few believed the research, including the international environmental community.
- In 1987, the United Nations Environment Programme and the World Meteorological Organization established the Intergovernmental Panel on Climate Change (IPCC). The first IPCC report, issued in 1990 and based on the work of hundreds of scientists from around the world, called for immediate action to reduce the impacts of climate change and avoid the effects of a warming earth.
- During the 1980s, the environmental sector and other stakeholders fully accepted climate change as a serious environmental threat.
- The first IPCC report was endorsed by the governmental representatives at the Second UN World Climate Conference in November 1990, and called for immediate negotiations on a framework convention on climate change.
- UN General Assembly created the Intergovernmental Negotiating Committee for a Framework Convention on Climate Change to elaborate a treaty for adoption at the 1992 Earth Summit.
- Growing scientific data and advocacy communications efforts by national and international environmental nonprofit organizations were very strong and helped lead to the adoption of the Kyoto Protocol to the United Nations Framework Convention on Climate Change (UNFCCC) in 1997. Under this protocol, industrialized nations agreed for the first time to specific legally binding greenhouse gas emissions limitations or reductions. The Protocol, however, would not enter into force until it was ratified by at least 55 countries (accounting for more than half of all carbon emissions around the world).
- In 2004, the Protocol was ratified and entered into force.

Advocacy History

Climate change advocacy strategies focused on the scientific evidence that global warming was taking place (the “impending doom” message), the cost of doing nothing and a generalized call to action to reduce carbon emissions, especially by nations that were the biggest emitters such as the US and China. This effort was countered by well-financed initiatives led by industry and conservative politicians who denied that climate change was happening, with the goal of convincing public opinion that it was not a legitimate cause for public concern and action.

While initial gains in public awareness and political support for policies and actions to reduce emissions were made outside of the US (for example, in Europe), the US lagged behind until the release of former Vice President Al Gore’s movie, *An Inconvenient Truth*. It was accompanied by a massive new advocacy effort to increase awareness, understanding and action led by Gore, the environmental community and other stakeholders.

The “impacts” message was expanded and refined to better communicate the wide scope of impacts climate change posed to the environment and civilization over the long term. Those messages were boosted by the increasing tangible impacts of climate change that in many instances were occurring at a greatly accelerated pace compared to original predictions. The solutions message along with the “call to action” was refined to include remedial steps that anyone could take, giving individuals a sense of empowerment that helped to energized climate change policy advocacy. After Gore won the Nobel Peace Prize in 2007, climate change was firmly established as an urgent issue in the US and around the world.

Better awareness of the wide spectrum of impacts expanded to include international development sectors that joined environmental advocates in calling for action. This in turn led to increased funding, research and policy change.

In the case of CARE, a major internal lobbying effort led by in-country CARE staff around the world forced the organization to focus attention and resources on climate change adaptation strategies. A letter signed by several thousand involved with CARE around the world was sent to the organization's headquarters calling for action on the grounds that work on poverty reduction was being threatened by climate change impacts.

Climate Change Advocacy Lessons for Sanitation/Hygiene

The following lessons learned from climate change advocacy that apply to advocacy for sanitation/hygiene are based on documentary research, interviews we conducted with climate change advocates from the environmental and poverty reduction sectors and DH's own advocacy communications expertise.

- ***Provide solutions*** – In the last ten years, climate change advocates have greatly improved their ability to offer solutions – to the public, to industry, to communities directly impacted by climate change – and thus encourage greater action and commitment on the issue. This is an important lesson for sanitation/hygiene efforts, as solutions must be developed and offered to key audiences in order for real impact to be realized.
- ***Link To Policymakers*** – Link the problem and solutions to top issues facing high-level decision makers, i.e., factors important for their re-election or future political ambitions. Thus, frame the problem and solution so that it promotes national concerns about employment, health, the environment, etc.
- ***Correctly Frame Messages*** – The Head of Communications for the World Wide Fund for Nature's Climate Policy Program, Martin Hiller, emphasized the example of smart message framing about action on climate change by the Obama administration. "It (the administration) has framed action to reduce the growing negative impacts of climate change as a strategy for creating new jobs and industries, countering the longstanding argument that taking action is not possible because it would cause economic calamity."
- ***Conduct Simultaneous Advocacy Initiatives Targeting Different Audiences*** – "Advocacy communications achieves change by simultaneously targeting audiences at all levels – from the citizens of Tuvalu (a South Pacific island nation) to the leaders of the US and China," Hiller said.
- ***Communicate Solutions*** – "Raising awareness of a problem moves opinion and achieves change through tangible action only if it communicates significant facts about an issue along with solutions," Hiller said.
- ***Consider The Moral Argument*** – Often advocates for international development issues shy away from making a case for an issue focusing on responsibility at the personal, community, and national levels. In the case of climate change advocacy, religious leaders have taken up the cause because of this moral obligation. For example, the website of the Global Ministries of the Christian Church and United Church of Christ states: "As citizens of this developed nation, however, don't we have another obligation? Can we find ways to hold our government representatives accountable when they fail to see what is happening and act responsibly? Can we find ways to educate ourselves and our society about the impact of our addiction to fossil fuels (the scientific community is in wide agreement that the carbon dioxide released by the burning of fossil fuels is the primary cause of climate change)?"

Can we look courageously and critically at our personal habits to examine how we share in this addiction? Can we faithfully work to help create a vision of another way of being in relationship

with the earth and its peoples? Can we begin to articulate this vision – not just in terms of what we might have to give up, but in terms of what we stand to gain?”¹⁷

- **Multi-sector Concern Spurs Action** – Growing concern about climate change impacts by poverty reduction groups such as CARE has greatly expanded climate change advocacy around the world by connecting it to a wider cross-section of global challenges.

All of these lessons learned from both HIV/AIDS and climate change apply to sanitation/hygiene – and most other issues that are working to build visibility and broad engagement in order to have impact. These tenets are part of the foundation of successful advocacy, and should be emphasized in efforts to significantly improve sanitation worldwide. As such, we have incorporated them into our Theory of Change for sanitation/hygiene.

¹⁷ <http://www.globalministries.org/get-involved/justice-and-advocacy/water/water-resource-challenges-call-f.html>

APPRECIATIVE INQUIRY PRINCIPLES

Summary of Principles of the Interview Approach

There are several principles that are active in this interview approach: Appreciative Inquiry, story, and those of any good interview.

The interview has been designed with **Appreciative Inquiry (AI)** in mind. Thus, AI principles are active. What we ask about influences what the respondent continues to do. As interviewers, if we act with the understanding that there are practices that work, the more likely we are able to find them. Moreover, when we focus on what has been effective, the more we reinforce and energize those behaviors.

Simultaneity: asking a question is an intervention. What we ask respondents to talk about focuses their minds to do more. The protocol should allow the interviewer to select the stories that are called forth in detail.

Anticipatory: image inspires action. Human systems move in the direction of their images of the future. Eliciting stories of what worked sharpens the images of what is possible.

What works: questions that allow the respondent to say why things worked, generate possibilities that are energized by the previous effective strategies.

Enactment: acting 'as if' is self-fulfilling. Interviewers act with the intention that there will be reports of success, thus, embodying what works.

Stories are powerful because they contain the context of the event or activity. Learning is never done outside of context. Not being able to connect lessons to the work that needs to be done means that the lesson is often lost. Second, stories create images in the mind. Such imagery aids the storyteller as well as the listener to imagine possible future advocacy practices.

Context: Stories provide the context that helps listeners to determine the relevance of the points of the story to them.

Image: Stories create images in the mind. Listeners are able to see the impact of the story, reinforcing the lessons of the story.

Emotion: Stories convey the emotion of the situation so that the listener is able to relate to the story. Relating to the story opens the mind of the listener to discover the lessons the story contains.

All **good interviews** follow the principles of including **open-ended** elements that allow the respondent to use the words and manner of response they prefer. The use of **silence** in the interview opens the possibility for the teller to expand on a point as more thoughts come. Lastly, the audience of the survey should gather insights from as **many perspectives** as possible.

MATRIX: IMPACT OF UNICEF/UNDP/WSSCC IYS ACTIVITIES**Feedback on Impact of UNICEF/UNDP/WSSCC IYS Activities In 8 Countries Where DH Conducted Surveys**

Note: Only eight of the 10 DH countries received feedback from the WSSCC and UNICEF respondents. Ghana and Senegal were missing. = Chosen as especially noteworthy by DH.

Country	Q2: What events did you organize or hold during IYS?	Q4: Did anything happen in your country that <i>would not have happened</i> if it had not been IYS? (For instance, policy changes, budget allocations?) Explain.
Bangladesh (UNICEF)	<ul style="list-style-type: none"> Four private TV channels promoted handwashing before eating and after latrine use and safe disposal of child feces. Sanitation, Hygiene Education and Water Supply project (SHEWA-B) training on IYS key messages on gender, poverty, and social issues. Twin pit latrine construction and low cost handwashing devices demonstrated in 635 unions to promote sustainable latrine technology and handwashing in critical times. 	<ul style="list-style-type: none"> Senior government officials were involved in preparation and launching of the international year sanitation campaign. Govt., NGOs., development partners, and private sector all joined together to achieve MDG targets.
India	<ul style="list-style-type: none"> Global Handwashing Day: http://www.globalhandwashingday.org/GHD_Matrix.asp South Asian Conference on Sanitation – III, held in New Delhi, India during 16-21 November 2008. 	<ul style="list-style-type: none">
Indonesia (UNICEF)	<ul style="list-style-type: none"> Under leadership of Ministry of Public Work and other sector partners: UNICEF, WHO, WSP, ESP, CARE, Plan International, University, Mercy Corps, have developed National committee and action plan on IYS 2008. Workshop and seminar for journalists and professionals on IYS, water sustainable, solid waste, urban sustainable, HWTS (Household Water Treatment and Storage), CATS (Community Action for Total Sanitation) etc. Radio/TV talk show on IYS, WWD and GHD etc. 	<ul style="list-style-type: none"> Parliament approved Solid Waste Regulation and signed by Government in 2008. Ministry of Public Works extended Policy and Strategy on Domestic Waste Water Management.
Kenya (WSSCC)		<ul style="list-style-type: none"> Both radio and television aired quality infomercials with hygiene and sanitation messages during IYS.
Mozambique (UNICEF)	<ul style="list-style-type: none"> Road shows Exhibitions Launch of sanitation awards 	<ul style="list-style-type: none">

Country	Q2: What events did you organize or hold during IYS?	Q4: Did anything happen in your country that <i>would not have happened</i> if it had not been IYS? (For instance, policy changes, budget allocations?) Explain.
Tanzania (UNICEF)	<ul style="list-style-type: none"> • In response to the eThekweni Declaration and the IYS, a Tanzania One Year Plan has been developed and implementation started. • Media Sanitation workshop organized by WaterAid and facilitated jointly by WSP and WASH Coalition Coordinator. This was an eye opener to most journalists on the need of carrying out fact finding on sanitation to inform the public and influence positive action. • Distribution of Sanitation and hygiene publications. 	<ul style="list-style-type: none"> • Closer collaboration between key sanitation partners: MOHSW/MOWI, WSP, Plan, WaterAid and UNICEF. Others are GTZ now coming on board for policy development and SNV for school WASH. • The development of a One Year Plan to accelerate actions towards achieving the MDGs was in direct response to the IYS. • There is high momentum to develop a comprehensive S&H policy in one year, which normally takes more than 3 years. • A draft MOU between 4 ministries has been developed awaiting agreement and approval by senior Govt. leadership. • Local newspapers, radio and television cover now more stories of sanitation.
Uganda (WSSCC)	<ul style="list-style-type: none"> • IYS launched in Uganda with the chief guest Hon. Minister of Water and Environment. • Other IYS launches took place in various districts of Uganda. 	<ul style="list-style-type: none"> • The National Sanitation Working Group / WASH Coalition Team Uganda has been fighting for a specific budget line for sanitation & hygiene and there is green light that next financial year it might succeed.
Vietnam (UNICEF)	<ul style="list-style-type: none"> • Workshop to launch the UNICEF-MOH National Baseline Survey on Rural Sanitation, Hygiene and Water Quality; • Advocacy for sanitation at all important events such as World Water Day, World Environment Day, World Health Day, Global Handwashing Day and Vietnam WATSAN week. • Initiated and advocated for establishment of National Sanitation Working Group 	<ul style="list-style-type: none"> • UNICEF's increased budget for sanitation and hygiene from US\$660,000 to US\$800,000; • Increased budget for sanitation from <10% to 30% in the six provinces funded by Netherlands, AusAID and DANIDA through the National Target Program on RWSS; • Establishment of the National Rural Sanitation Working Group

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